



SUDAN: YELLOW FEVER

DREF Bulletin no. 05ME068

FINAL REPORT

9 May 2007

The Federation's mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world's largest humanitarian organization and its millions of volunteers are active in over 185 countries.

In Brief

Period covered by this Final Report: 28 December 2005 to 31 August 2006.

History of this Disaster Relief Emergency Fund (DREF)-funded operation:

- CHF 200,000 was allocated from the Federation's DREF to respond to the needs of this operation—refer to the [DREF Bulletin](#) for more information.
- DREF Bulletin [Update no. 1](#) was issued on 4 May 2006.

[<Click here to go directly to the attached financial report >](#)

This operation is aligned with the International Federation's Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".

Global Agenda Goals:

- Reduce the numbers of deaths, injuries and impact from disasters.
- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

Background and Summary

In 2005, a Yellow Fever outbreak was confirmed in South Kordofan (Sudan), following tests conducted by the World Health Organization (WHO). The outbreak, which had caused 142 deaths in a total of 556 cases by December 2005, was declared no longer an immediate risk by WHO on 20 December 2005.

In the initial response by the Sudanese Red Crescent (SRC), 150 volunteers from the South Kordofan branch of the National Society carried out house-to-house visits in Kadugli and Dilling for vector control and health education. The Red Crescent volunteers were also incorporated into 75 vaccination teams formed to fight the outbreak. In summary, the intervention of the SRC and the International Federation provided the much needed support to the Ministry of Health's (MoH) response plan.

During the vaccination campaign, over 90 per cent of the target populations were vaccinated; populations in fixed settlements and semi-permanent nomadic camps were covered. However, nomadic populations were only partially covered (estimated at 60 to 90 per cent). Mobile vaccination teams functioned well on all transit road points and weekly markets. However, due to the long lasting conflict in many parts of Sudan, including South Kordofan, the country's infrastructure is still weak. Large rural areas and off-road townships are often difficult to reach, if not completely out of the SRC volunteers' reach, and therefore were more vulnerable to the spread of the epidemic.

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The Federation's health delegate in Sudan, as part of an assessment, observed that meeting the immediate needs of the outbreak did not fully address the vulnerability of communities recovering from years of conflict as compared to focus on longer-term needs to improve on community risk reduction. As part of the longer-term strategies to lessen the impact of health emergencies in South Kordofan, a comprehensive plan for the development of a pilot primary health care project, involving volunteers with skills in health emergencies, was initiated to support the existing community-based first aid (CBFA) programme in South Kordofan. It was also noted that the situation in South Kordofan could be replicated in other states of Sudan. Therefore, the project was further developed as a pilot for potential replication in other regions. Part of the Disaster Relief Emergency Fund (DREF) allocation allowed for the initial pilot project to be undertaken. This formed the cornerstone of the health programme for the foreseeable future.

Coordination

The Sudanese Red Crescent and the Federation's Sudan delegation attended regular coordination meetings with the Ministry of Health, WHO, United Nations Children's Fund (UNICEF), non-governmental organizations (NGOs) and Partner National Societies in Khartoum. The Ministry of Health, WHO and partners – including the SRC and the Federation Sudan delegation – agreed that a comprehensive action package was needed to curb the outbreak as well as to quickly distinguish and treat the disease on a case-by-case basis.

In support of Government efforts in South Kordofan, over 850 Red Crescent volunteers were mobilized; they constituted more than 75 vaccination mobilization teams which were active during the mass vaccination campaign held between November and December 2005. The International Federation facilitated the release of 1.7 million doses of yellow fever vaccine from the Global Emergency Vaccine Fund which is held in trust by Médecins Sans Frontières (MSF), UNICEF, WHO and the Federation.

The SRC's comparative advantage over other agencies was its ability to mobilize volunteers who have received CBFA training. Traditionally, the South Kordofan Federal MoH calls for support from the SRC volunteers during health emergencies. Efforts to strengthen ties with other agencies through active participation also added value to this advantage.

Analysis of the operation - objectives, achievements, impact

In response to the yellow fever outbreak, the Federation allocated CHF 200,000 from its Disaster Relief Emergency Fund (DREF). The allocation was done on 24 November 2005 to support the Sudanese Red Crescent's emergency operation. In addition, the Federation's Secretariat deployed a health delegate to support the National Society (particularly the South Kordofan branch) and the Sudan delegation in implementing activities in the operation.

Objective: To contribute towards the reduction of the Yellow Fever outbreak in South Kordofan region

Expected Results

- Vector control interventions, including spraying and distribution of insecticide treated mosquitoes nets, have been implemented in South Kordofan region.
- Incidences of Yellow Fever in South Kordofan region and surrounding regions are reduced.
- Good environmental hygiene standards are achieved and maintained.

Achievements

A total of 150 volunteers from the South Kordofan branch of SRC carried out house-to-house visits in Kadugli and Dilling for spraying, vector control and health education. The National Society and the Federation provided the Ministry of Health with logistical support, including mobilizing over 850 trained Red Crescent volunteers who helped to constitute more than 75 vaccination teams. The vaccination teams were actively engaged in different phases of the mass vaccination campaign conducted between November and December 2005.

A revised plan of action for the health and hygiene component of the operation was developed. It initiated a comprehensive plan – piloted in South Kordofan – for the benefit of the Sudanese Red Crescent's primary health care volunteers to address the needs of communities for sustainable, local-level skills. Armed with these, the volunteers would be able to address basic health needs and their community response in times of health emergencies.

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Constraints

The longer-term activities of providing health and hygiene education, sensitization in South Kordofan region were beset with a number of unforeseen delays. Other related health emergencies, such as cholera and meningitis, overstretched the Sudanese Red Crescent's/International Federation's capacity as the emergencies also required some priority due to their prevalence in the first quarter of 2006.

Initial delays involving the recruitment of a project delegate for the implementation of the education and training component of the programme also led to postponement of activities under the initial action plan. However, the recruitment took place in June 2006 and the plan of action was revised; activities were completed by 31 August 2006.

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All International Federation assistance seeks to adhere to the [Code of Conduct](#) for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response](#) (Sphere) in delivering assistance to the most vulnerable.

For longer-term programmes in this or other countries or regions, please refer to the Federation's Annual Appeal. For support to or for further information concerning Federation programmes or operations in this or other countries, or for national society profiles, please also access the Federation's website at <http://www.ifrc.org>

[<Financial report below; Click here to return to the title page>](#)

International Federation of Red Cross and Red Crescent Societies

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Final Financial Report

Selected Parameters	
Reporting Timeframe	2005/1-2006/12
Budget Timeframe	2005/1-2006/12
Appeal	M05ME068
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
A. Budget		42,285				42,285
B. Opening Balance		0				0
Income						
<u>Reallocations (within appeal or from/to another appeal)</u>						
<i>DREF</i>		199,946				199,946
<i>C3. Reallocations (within appeal or</i>		199,946				199,946
C. Total Income = SUM(C1..C6)		199,946				199,946
D. Total Funding = B + C		199,946				199,946

II. Balance of Funds

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
B. Opening Balance		0				0
C. Income		199,946				199,946
E. Expenditure		-199,946				-199,946
F. Closing Balance = (B + C + E)		0				0

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III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation		
A							B	A - B
BUDGET (C)		42,285					42,285	
Land, vehicles & equipment								
Computers & Telecom	3,150		3,158			3,158	-8	
Total Land, vehicles & equipment	3,150		3,158			3,158	-8	
Transport & Storage								
Storage			359			359	-359	
Distribution & Monitoring			120			120	-120	
Transport & Vehicle Costs	4,200		5,983			5,983	-1,783	
Total Transport & Storage	4,200		6,462			6,462	-2,262	
Personnel Expenditures								
Delegates Payroll	0		65,608			65,608	-65,608	
Delegate Benefits	0		19,472			19,472	-19,472	
National Staff			7,498			7,498	-7,498	
National Society Staff	5,057		6,496			6,496	-1,439	
Consultants	26,600		26,755			26,755	-155	
Total Personnel Expenditures	31,657		125,829			125,829	-94,172	
Workshops & Training								
Workshops & Training	0		22,295			22,295	-22,295	
Total Workshops & Training	0		22,295			22,295	-22,295	
General Expenditure								
Travel	0		21,482			21,482	-21,482	
Information & Public Relation			173			173	-173	
Office Costs	280		5,429			5,429	-5,149	
Communications	250		2,647			2,647	-2,397	
Financial Charges			-1,299			-1,299	1,299	
Other General Expenses			776			776	-776	
Total General Expenditure	530		29,208			29,208	-28,678	
Program Support								
Program Support	2,749		12,993			12,993	-10,245	
Total Program Support	2,749		12,993			12,993	-10,245	
TOTAL EXPENDITURE (D)	42,285		199,946			199,946	-157,661	
VARIANCE (C - D)			-157,661			-157,661		

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IV. Project Details

Project	Name	Opening Balance	Income	Expenditure	Closing Balance	Budget	Variance
		A	B	C	A + B + C	D	D - C
Disaster Management							
PSD586	2005 Yellow Fever	0	199,946	-199,946	0	42,285	-157,661
Sub-Total Disaster Management		0	199,946	-199,946	0	42,285	-157,661
Total	SUDAN: YELLOW FEVER	0	199,946	-199,946	0	42,285	-157,661