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Emergency appeal operation update

Sudan: Floods

 International Federation
of Red Cross and Red Crescent Societies

Emergency appeal n° MDRSD018

GLIDE n° FF-2013-000091-SDN

6-month summary update

21 May, 2014

Period covered by this Ops Update: 12 August, 2013 to 15 February 2014. This update represents a six-month summary of the operation (cumulative narrative and financial).

Appeal target (current): CHF 7,384,813; [<click here to view the attached interim financial report>](#)

Appeal coverage: 42%; [<click here to go directly to the updated donor response report and here to link to contact details >](#)

Appeal history:

- An [Emergency Appeal](#) was launched on 13 August, 2013 seeking CHF 918,554 for six months to assist up to 7,000 households (35,000 beneficiaries).
- **Disaster Relief Emergency Fund (DREF):** CHF 80,000 was initially allocated to support start-up of this operation.
- An [Operations Update n°1](#) was published on 30 August, 2013 to provide an update of the floods situation as well as slightly increase the budget to CHF 993,715 to reflect the Non Food Items (NFIs) price adjustments as well as the changes in the Regional Disaster Response Team (RDRT) deployments.
- An [Operations Update n°2](#) was published on 3 October, 2013 to provide additional updates of the floods situation as well as inform of an upcoming revision of the appeal.
- The [Revised Emergency Appeal](#) was published on 10 October, 2013. Through the revision the appeal budget increased to CHF 7,384,813 and the targeted beneficiaries also increased to 15,000 households. Furthermore, the geographical operation area expanded to also include the states of Gezira, White Nile, and Blue Nile and subsequently extended the duration of the operation to 18 months.
- This 6 months summary update provides an overview of the situation and activities implemented during the initial 6 months of the operation. It also informs of an upcoming revision of the appeal and the rationale behind the decision to proceed in this manner.



Semi-permanent 'mobile' clinics have provided emergency health care for displaced people. Photo/SRCS

Summary: During the rainy season in August and September 2013, unusual heavy rains and floods affected tens of thousands of families across Sudan. Although flooding is an annually recurring challenge in many parts of Sudan, the flooding was so extensive that many areas normally not affected were also severely hit which resulted in the displacement of a large part of the affected population. Reports from the Humanitarian Aid Commission (HAC) estimated that 499,900 people countrywide had been affected by the heavy rain and floods across Sudan since the onset of the events in early August 2013. The floods destroyed/damaged over 85,385 houses in the states affected, with Khartoum being the worst affected state. Assessments showed that the immediate needs of the affected people included emergency shelter, health and water and sanitation services. Humanitarian agencies responded through an established cooperation system set up by HAC. Additionally, the United Nations (UN) Agencies and International Non-Governmental Organizations (INGOs) have been responding to Sudan Floods

within the scope of the country assistance strategy in a coordinated manner through the Humanitarian Coordination Team established under the UN Humanitarian Coordinator.

Since the onset of the emergency, the Sudanese Red Crescent Society (SRCS) HQ and Branches have been delivering essential health and care, water and sanitation, and relief services to the flood affected population in the targeted areas. 871 volunteers have been supporting implementation of emergency interventions under the appeal framework. Up to 6,128 families have received emergency shelter kits and a total of 7,000 households have received essential relief items (blankets, mosquito nets, sleeping mats and jerry cans). First aid services have been provided to injured persons from the flash floods in affected areas, and 25,880 patients have been receiving health services through mobile clinics deployed by SRCS to the flood affected areas. A field health facility (similar to the one shown in photo above) was established in Gezira State, providing health services to around 3,200 persons, including reproductive health care for women. Community based health and first aid services were provided at disaster affected areas in several of the affected states. Safe water has been provided to affected households through water treatment plants, establishing of pumps, rehabilitation of water sources, and distribution of chlorine tablets for household water treatment (along with demonstration of usage). Community cleaning campaigns and vector control (spraying) campaigns have been implemented in several of the affected states. Hygiene promotion, awareness of how to prevent waterborne diseases such as diarrhoea and malaria, and HIV/AIDS prevention were carried out for 6,168 households.

To date, the floods response operation has received multi-lateral funding support from the following donors and partners: British Red Cross, Saudi Arabian Red Crescent Society, Bulgarian Red Cross, Danish Red Cross/Danish Government, Finnish Red Cross, Italian Government bilateral emergency fund, Japanese Red Cross, Norwegian Red Cross, Swedish Red Cross, Canadian Red Cross/Canadian Government, The Netherlands Red Cross, Red Cross of Monaco, United States Government/USAID and VERF/WHO Voluntary Emergency Relief.

IFRC on behalf of Sudanese Red Crescent Society (SRCS) would like to thank all partners for their generous response to the appeal.

The situation

Annual flooding as a result of heavy rains in August and September is a reoccurring challenge for many families in different parts of Sudan. However in 2013 the rains and subsequent floods were heavier and more extensive. This resulted in areas normally not affected were also affected.

The 2013 rains affected states such as Khartoum, Northern, River Nile, Gezira, Red Sea, Sennar, North Kordofan, Gedaraf, North Darfur, Blue Nile, White Nile, South Darfur, Kassala and South Kordofan. In addition HAC reported that Abeyei and West Kordofan and parts of the population had also been affected. The capital Khartoum was reported to be suffering its worst flooding in 25 years, and the impact of the floods was also worsened due to poor drainage and urban planning.

Overall, HAC reports estimated 499,900 people countrywide were affected by the heavy rain and floods across Sudan from August 2013. Assessments have shown that the floods destroyed or damaged over 85,385 houses in the states affected, with Khartoum being the worst affected state. Immediate needs of the affected people included emergency shelter, health and water/sanitation services. Humanitarian agencies have been responding through the established cooperation system set up by HAC. Additionally, the United Nations (UN) Agencies and International Non-Governmental Organizations (INGOs) have been responding to Sudan Floods within the scope of the country assistance strategy in a coordinated manner through the Humanitarian Coordination Team established under the UN Humanitarian Coordinator.

The joint needs assessment led by the SRCS in 14 localities in the six worst hit states (Khartoum, Gezira, White Nile, Blue Nile, River Nile and Northern States) confirmed that the rains were negatively affecting the states, causing huge impact on the human habitat in general and specifically disrupting the health and care system, drinking water provision, access to water and sanitation. The report indicates that at least 34,032 houses

collapsed and another 35,564 houses were partially damaged in the area of the assessment. Most of vital health infrastructures were destroyed. The assessment also identified shortage of staff, absence of laboratory services, and shortage in basic medical supplies. The highest frequency in reported illnesses include diarrheal diseases, respiratory tract infections, malaria, skin diseases and other infections mainly caused by the low/very low level of hygiene practices. The lack of clean water adequate for human consumption and/or access to water in absolute terms generated specific health threats for the affected population in the worst affected six states. Collapsed latrines and spread of mosquitoes and flies were identified as a general pattern. Most water sources were destroyed and affected families had difficulties in accessing safe water. Hand pumps and boreholes broke down, and at least 20,133 latrines were reported to be completely destroyed in a situation where there was already poor disposal of waste, posing other increased health risks to the affected families.

At the time of this 6 months operations update, a majority of the affected population remains displaced. The activities implemented under the emergency appeal, such as operating 10 mobile clinics in the most affected states, have provided essential lifesaving health care and alongside with hygiene promotion and disease prevention activities by SRCS volunteers, the situation has not deteriorated further by the outbreak of illnesses. Before the floods and its negative impact on water and sanitary infrastructure in the country, Sudan was far away from meeting its Millennium Development Goal (MDG) targets for increased access to safe water and for adequate sanitation, and has even slipped backwards in the last decade.

Coordination and partnerships

Government/UN and Partners Humanitarian Coordination Meeting is the main forum for humanitarian coordination between the Government of Sudan, the UN, and humanitarian partners and donors, and covers all of Sudan. The meetings are chaired by the Commissioner General of the Government's Humanitarian Aid Commission (HAC). The forum includes members of HAC, National Intelligence and Security Services, Military Intelligence and the Ministry of Foreign Affairs. For the UN and humanitarian organizations, the forum includes the Resident and Humanitarian Coordinator, OCHA, a UN agency representative (rotating), donors, the INGO Steering Committee, the SRCS and the Sudan Council of Voluntary Agencies. The Humanitarian Country Team (HCT) comprises the heads of UN humanitarian agencies, international humanitarian organizations, international NGOs and donor representatives. ICRC, IFRC, MSF and African Union/United Nations Hybrid operation in Darfur (UNAMID) have a standing invitation to participate. The HCT provides strategic direction for humanitarian operations carried out by the UN and its partners in Sudan. It ensures, where appropriate, links with recovery and development planning. The IFRC Country representation has been regularly attending the HCT meetings set with periodicity and represent the interest of the RC/RC Movement and share information accordingly. Excellent cooperation has been set with UNOCHA office in Khartoum, while exploring new ways of enhancing overall cooperation.

The International Non-Governmental Organization (INGO) Forum facilitates communication, information-sharing and action among humanitarian and development INGOs based in Sudan. The INGO Forum has a membership of 70 INGOs operating in Sudan and is represented by a nine-member Steering Committee elected every six months. The INGO Forum fosters coordination with a range of stakeholders, including the United Nations, the Government of Sudan and donors, to allow for more effective delivery of relief, recovery and development assistance. The purpose of the Sudan INGO Forum (the Forum) is to facilitate communication, information-sharing and action among international humanitarian and development agencies based in Sudan. The Forum is also responsible for fostering communication and coordination between NGO coordinating bodies in Khartoum and Darfur, South Kordofan and other areas of Sudan; between INGOs and national NGOs; between INGOs and the UN or other international actors; and between INGOs and appropriate representatives of the Government of Sudan, to allow for more effective and efficient delivery of humanitarian assistance and recovery and development programming to meet basic needs in Sudan.

The SRCS maintain dynamic and multi-level cooperation and coordination with the IFRC Country Representation and PNSs present. Formal regular meetings take place with the involvement of all parties, while maintaining the flexible operation level daily routine meetings and ad hoc information sharing. SRCS has been attending the

Humanitarian Coordination Team meetings at UN as well as coordinating all humanitarian efforts with the Government's Humanitarian Aid Commission (HAC). SRCS has been maintaining open communication with other INGOs and national NGOs active in the field having a coordinated approach to humanitarian affairs. SRCS has been maintaining dialogue with representatives of Embassies based in Khartoum. SRCS maintain established multi-level cooperation and coordination with IFRC, ICRC and PNSs. Until early 2014, in Sudan, the ICRC delivered emergency and early recovery assistance in the fields of health, water, relief, livelihoods, and restoring family links (RFL) between those separated as a result of conflict. It also promotes respect of international humanitarian law (IHL) and supports the Sudanese Red Crescent (SRCS) in its capacity building in the field of emergency preparedness and response, RFL, Communication, Economic Security programmes (ECOSEC) and health/first aid. At this stage, IFRC-SRCS-ICRC maintain coordination meetings on a number of humanitarian and security matters of concern on a monthly basis.

In operational aspects the IFRC has supported the emergency appeal by deployment of delegates to assist SRCS within Sudan. The Partner National Societies (PNSs) working in Sudan include: Austrian, Danish, French, German, Netherlands, Norwegian, Spanish, Swedish and Swiss Red Cross Societies as well as the Qatar, Saudi, Iran and Turkish Red Crescent Societies. Cooperation and coordination meetings with PNSs permanently based in Sudan takes place on a monthly base where all partners coordinate and share information on programme/project development. Substantial In-kind donations towards the Sudan floods operation were contributed by the Finnish and Norwegian Red Cross Societies. The Finnish Red Cross provided NFIs, mosquito nets and warehouse tents of substantial volume, while the Norwegian Red Cross shipped Medical Kits and Supplementary kits to Sudan, complementary to the health activities under the appeal. Substantial in-kind donation received from the Saudi Red Crescent Authority of the value of USD 1,760,000 has arrived at Sudan Port, being processed and ready to hand-over to the SRCS in support of the Sudan floods operations. The Saudi in-kind donation is comprised of the following items:

- 20,000 mosquito nets earmarked for distribution in Khartoum, Gezira and White Nile States (within the scope of this emergency appeal).
- 10 mobile clinics, where each mobile clinic contains two prefabricated containers fully furnished and medical equipment installed. Layout and functionality of the mobile clinic: doctor's room, midwife and vaccination room, laboratory, pharmacy, two latrines and generator comprise the clinic set. Medical clinics will be deployed based on SRCS plans in the affected states.
- Assorted and specified set of drugs in support of the 10 medical clinic operations sufficient for six months of operations.
- Insecticide and spraying machines to be utilized during anti mosquito campaigns.

In kind donations from Finnish Red Cross (kitchen sets) and remaining parts of the Saudi Red Crescent donations (mosquito nets) have arrived in Port Sudan and are awaiting custom clearance. Due to changes within the procedures of obtaining customs exemption status, SRCS are still in the process of finalizing these issues with the relevant authorities. It is anticipated these will be cleared in a not so distant future.

Beyond the scope of multi-lateral contributions:

SRCS has received bilateral support from a variety of PNS and other partners and donors.

Table 1: Summary NFIs received through bilateral support as of 29 March 2014.

Partner	Tarpaulins	Blankets	Kitchen Sets	Mosquito Nets	Plastic Sheets	Jerry cans	Clothes	Tents	Cleaning Materials	Other
ICRC	3,000	9,000	3,000	0	9,000	3,000	3,000	0	6,000 pieces of soap	3,000 plastic buckets 20,000 chlorine tabs;
U.A.E Red Crescent	6,200	9,700	0	9,700	10,700	2,700		0	0	5 water pumps 250 meter of electric cable 100 pieces of water pipes 5 generators 37 spraying pumps 37 galloon of insects spraying
Civil Defense	300	3,000	0	0	0	0	0	0	0	0
UNHCR	1,000	0	0	1,000	0	1,000	0	0	0	
Spanish RC SPRC	2,000	2,000	1,000	2,000	0	0	0	0	0	0
Bahrain Red Crescent		10,000	0	2,000	0	1,000	0	0	0	28 stretchers 200 spraying tools
Kuwait Red Crescent	7,647	15,085	0	0	0	0	28 boxes of clothes	0	0	150 generator 350 water pump
Swiss R.C	2,282	2,282	1,045	0	0	2,282	0	0	2,282 pieces of soap	0
Hajar Company	2,000	2,000	0	2,000	0	0	0	502	0	0
Saudi Red Crescent	0	9,300	0	0	0	0	0	1,760	0	0
WHO	0	0	0	0	0	0	0	0	0	10 PHC Units
UNFPA	0	0	0	0	0	0	0	0	0	Medical equipment & Drugs in kind equal to USD 5,080
HAQ										14 Water Tanks
Turkish RC	0	0	150	600	0	0	0	150	0	0

Table 2: Summary of food contributions received by SRCS as of on 29 March 2014.

Partner	Milk Powder (bags)	Bottled water	Batteries (pieces)	Tuna fish (tins)	Beans (tins)	Tahini sweet	La vach cere (tins)	Tomato	Hummus	Other
Hajar Company	540	2,500	2,000	1,000	2,000	1,000	2,000	0	0	0
HAC	239 cartons	0	0	880 carton	0	0	0	294 carton	0	0
Kuwait Red Crescent	0	0	0	295 carton	571 carton	0	0	0	238 carton	528 carton of nutrition set; 86 carton of dates; 170 carton of vegetables;
Saudi Arabian Red Crescent	0	0	0	0	0	0	0	0	0	8,751 carton of nutrition sets

Table 3: Summary of cash contributions received bilaterally by SRCS as of 29 March 2014.

Partners/Donors	Amount in national currency	Amount in other currency
ICRC	SDG 78,400	
United Arab Emirates Red Crescent	SDG 1,103,289	
Chinese Red Cross	SDG 300,000	
UNFPA	SDG 95,700	
WHO	SDG 389,970	
Al-Baraka Sudanese Bank	SDG 100,000	
Ahmed Salim Alkarbi (U.A.E.)	SDG 366,000	
Danish Government		CHF 120,000
The Netherlands Red Cross		CHF 20,565
USAID		CHF 46,308
Belgium Red Cross		EUR 2,462
Government of Italy		EUR 350,000
Government of Canada		CAD 30,891

Red Cross and Red Crescent action

Overview

Since the onset of the emergency, SRCS HQ and Branches have been delivering essential health and care, water and sanitation, and relief services to the flood affected population in the defined area of Sudan Floods Operation. The IFRC-SRCS Emergency Appeal has been the only active appeal targeting specifically the floods emergencies and its effects. IFRC Operations Management was put in place from the early stage of the Sudan Floods Operations maintaining support to the SRCS Programme Directorate and Disaster Management Department. Field monitoring system were put in place including routine field monitoring visits so far carried out in Khartoum State, Gezira, Blue Nile and White Nile States. IFRC Country Representation in cooperation with Africa Zone RM has been engaged in direct resource mobilisation activities, reaching out to PNS partners and the institutional donor community at all levels.

IFRC and SRCS conducted field visit in the following areas of operations: Gezira State, Medeni city, Um Al Groa locality of flood affected IDPs settlement of 794 households (3,970 people). The settlement/camp of IDPs was set up as a result of the floods, which hardly hit and destroyed people's original settlement. In response of the water needs of the affected population, SRCS deployed and operated 2 WatSan kit 5 producing 90,000 liters which can provide safe drinking water for 6,000 beneficiaries per day to SPHERE Standard. These Wat San kits were used in White Nile State (Kosti city, Jabalen locality, Abu Ramad settlement. The IFRC team conducted a field mission to the Khartoum state on the 16th May to assess the progress of implementation of activities, but observed the following challenges and constrains:

10 mobile health clinics donated by the Saudi Red Crescent Authority to the SRCS deployed for the operation are currently experiencing shortage of medicines

Water provided is not sufficient in providing the clean drinking water to the population based on SPHERE standards to the number of beneficiaries (21,000 persons).

Spare parts for repairs of water storage containers.

An overall and main problem in all affected areas, proved to be health and hygiene related matters. The most frequently occurring diseases are: A wide range of various infections (predominant severe diarrhea), very high rate of malaria positive registered patients versus shortage in medicine supply. The appeal activities initially included procurement of hygiene kits for 15,000 beneficiaries. Due to budgetary restraints and challenges with procurement, this has not been implemented.

SCRS deployed 10 mobile clinics to accessible and worst affected areas. Through these 25,880 patients have been receiving health services. A health facility was supported in Gezira State, providing health services to around 3,200 persons, including reproductive health care for women. SRCS, with support through IFRC and donors to this appeal, have been able to play a crucial role in responding to the emergency and the needs of the affected population A RC/RC Movement joint assessment was conducted in the six most affected states of Sudan (Khartoum, Gezira, White Nile, Blue Nile, River Nile and the Northern State). Based on findings from these assessments, the revised appeal included a larger geographical scope and timeframe. Due to challenges of implementation beyond the control of SCRS and its partners, this operation update is accounting for activities until the end of March and inform of an upcoming appeal revision.

Progress towards outcomes

The floods response operation has been implemented with the in-coming funding to respond to the needs in the target areas. According to the needs assessment reports the appeal focused on provision of support on assessment, emergency shelter & relief distribution, emergency health & care, WatSan & hygiene promotion, disaster preparedness and risk reduction, emergency health & care and logistics.

Overview of progress:

Shelter: SRCS mobilized 871 volunteers for the emergency operation in the affected states. 6,128 families have received emergency shelter kits, with the majority of beneficiaries being from Khartoum state. 7,000 households from five affected states (Khartoum, River Nile, Northern State, Gezira and West Kordofan) have received essential relief items (blankets, mosquito nets, sleeping mats, jerry cans).

Health: First aid services have been provided to injured persons from flash floods in affected areas. Community based health and first aid services were provided in disaster affected areas in Khartoum, River Nile, Northern State, and Blue Nile. 60 volunteers from localities of Marawie and Dongola in Northern State were trained in communicable disease control and epidemic preparedness covering malaria information, vector control, spraying technique and sprayers repair.

Water, sanitation and hygiene (WatSan): SRCS deployed one WatSan kit 5 to Gezira State and undertook refresher training for the WatSan National Disaster Response Team (NDRT) members. Since the beginning of the operations, 7,800 families have been provided with potable water from the WatSan Kit 5 and rehabilitated boreholes. 60,000 chlorine tablets for household water treatment were distributed along with demonstration of usage, in three affected states. 81 community cleaning campaigns and 41 vector control (spraying) campaigns have been implemented in several of the affected states. 150 volunteers and 20 trainers conducted hygiene promotion, awareness of how to prevent waterborne diseases such as diarrhea and malaria, and HIV/AIDS prevention for 6,168 households.

Disaster Preparedness and Risk Reduction: Post-disaster community infrastructure construction and re-construction guidelines, Disaster Response Standard Operating Procedures, Integrating Relief Rehabilitation and Development Policy and the Sphere Project: Humanitarian Charter and Minimum Standards in Humanitarian Response under the overall umbrella of the Code of Conduct for the International Red Cross and Red Crescent Movement and NGOs in Disaster Relief.

Publications have been shared both locally and internationally on different platforms including *Facebook* and *Twitter*. Information is continuously being shared with the IFRC Zone office with several articles posted on the [FedNet](#), Newswire and the IFRC Eastern and Indian Ocean Islands Round up.

Assessment

Outcome: Emergency needs of affected families in the worst-affected states are identified and gaps documented leading to refinement of the operation's plan of action.

Output	Activities planned
<ul style="list-style-type: none"> Detailed assessment is carried out across all sectors and the operation plan of action is revised appropriately to address outstanding needs. 	<ul style="list-style-type: none"> A joint RC/RC rapid assessment. Identify outstanding needs and gaps in consultation with local authorities and other stakeholders. Revise plan of action and budget. Continuous assessment of needs.

Progress: Since the beginning of the response operation, the following activities have been implemented: A joint RC/RC Assessment was conducted between 7 and 14 September 2013 in the most affected States of Khartoum, Gezira, River Nile, Northern, Blue Nile and White Nile States. Based on the assessment findings and recommendations a revised emergency appeal was published on 10 October, 2013. IFRC Sudan continued

receiving updates and situation analysis complementary to the finding of the Joint Assessment. Monitoring of the situation in the field has been an integral part of the operations and laid ground for the on-going adjustments to the activities. IFRC and SRCS maintain regular monitoring field visits to the areas of operations. Findings and feedback to the system enable adjustments in the operation management. SCRC internal discussion and planning for 2014 concluded that the capacity of the National Society versus continuous needs of flood affected population will be considered for the inclusion in the upcoming revision of Sudan Complex Emergency Appeal 2013.

Emergency shelter and relief distributions (basic non-food items):

Outcome: Vulnerability is reduced through distribution of relief assistance (non-food items) to 15,000 HH and emergency shelter to 7,000 households in the target states.

Output	Activities planned
<ul style="list-style-type: none"> At least 15,000 households receive essential relief items. At least 7,000 households receive emergency shelter kits. 	<ul style="list-style-type: none"> Develop beneficiary targeting strategy and registration system to deliver assistance Mobilise 200 volunteers for the emergency operation, of which 150 volunteers will be involved in distribution of relief items and assessments Train 150 volunteers in needs assessment, relief distribution, emergency shelter construction, etc. Deploy short-term technical shelter assistance for detailed planning and a 3 months shelter delegate for emergency shelter implementation. Conduct continuous assessment on the needs, existing capacity and propose sustainable interventions Procure and distribute NFIs for 15,000 families and emergency shelter kits for 7,000 families. Out of these, 2,000 NFI kits have already been distributed and this appeal will replenish these. SRCS volunteers and staff to provide technical assistance to the families to construct the emergency shelter and put up the mosquito nets. Monitor and evaluate the relief activities and provide reporting on relief distributions. Provide an update of the situation based on the findings of the assessment and revise the operation as appropriate Training 60 SRCS staff and volunteer on PASSA.

Progress: Since the beginning of the operation the following activities have been implemented:

- SRCS has provided basic food to 1,011 families and non-food items to 24,237 flood affected families from its prepositioned stocks and support from in-country international partners and local organisations.
- In Khartoum state 2,000 families were supported with NFIs from the NS' prepositioned stocks.
- SRCS mobilized 871 volunteers for the emergency operation in the affected states, of which 307 volunteers were involved in distribution of relief items in the states of Khartoum - 162, Gezira State - 128, Northern State - 73 and River Nile State - 60 volunteers.

Priority for shelter kits distribution was given to Khartoum State which was the worst hit by the floods disaster. Up to 6,128 families have received emergency shelter kits, with 5,628 households being from Khartoum state, 250 households from River Nile State, and 250 households from Northern State.

A total of 7,000 households from five affected states Khartoum, River Nile, Northern State, Gezira and West Kordofan, have received essential relief items (blankets, mosquito nets, sleeping mats, jerry cans) from local sources. The NFI and shelter kits distributions were carried out accordingly in the most affected states as defined by the Emergency operation. Replenishment has been done accordingly of 2,000 NFIs to SRCS stock. Up to 871 SRCS volunteers were mobilized and 307 volunteers involved in distributions.

Table 4: Summary of NFI distributions to date

State	Shelter kits	Mosquito nets	Blankets	Sleeping Mats	Water jerry cans	Rub hall
Khartoum	5,628	14,000	10,000	6,628	3,000	2
River Nile	250	0	2,000	500	250	0
Northern Dongola	250	0	2,000	1,600	250	0
Gezira	0	0	3,000	2,500	2,500	0
White Nile	0	0	0	0	0	1
Blue Nile	0	0	2,000	0	0	0
Sinnar	0	0	0	0	0	0
North Kordofan	0	0	0	0	0	1
West Kordofan	0	0	0	2,000	1,000	0
Total	6,128	14,000	19,000	11,228	7,000	4
Balance	0	0	0	2,772	0	
Number of Households reached	6,128	7,000	3,500	5,614	3,500	

Emergency Health and Care

Outcome: To meet the basic health needs of at least affected 15,000 households (75,000 persons) in the target states.

Output	Activities planned
<ul style="list-style-type: none"> Disease Prevention - prevention of communicable disease through vector control efforts, including distribution of 30,000 mosquito nets and co-ordination with other sectors to ensure safe and secure water supply and sanitation and living conditions. Disease Surveillance - to support community-based disease surveillance and ensure early reporting of cases, and prompt detection and response to outbreaks; Outbreak Control preparedness - ensure outbreaks are rapidly detected and controlled through adequate preparedness (including repositioning of 320 community ORP kits, treatment protocols and staff training) Disease Management - to support community based health and first aid (CBHFA) and provision of Ministry of Health clinical services to up to 15,000 affected families to diagnose and treat cases effectively Training - At least 150 volunteers are trained on hygiene and health promotion, epidemic preparedness and response Psycho-social support and Mental Health – provision of services to victims and families in disaster affected areas 	<ul style="list-style-type: none"> Deploy 50 medical and first aid kits and 12 Basic and Supplementary Emergency Health Kits to disaster affected areas for use in medical outreach and mobile health clinics Distribute 30,000 mosquito nets in disaster affected areas Preposition 40 IFRC ORP community kits in each of the affected states. Train 150 volunteers in communicable disease control and epidemic preparedness Support community-based disease surveillance and prompt detection and response to outbreaks Support psycho-social support and mental health services to victims and families in disaster affected areas

Progress: The following activities have been implemented;

- SCRC has teamed up with MoH and WHO and provided health services to vulnerable populations with the two additional temporary health clinics in Khartoum, River Nile, Northern state and Gezira State.
- SRCS has provided first aid, emergency health services and health education in the clinics.
- Community based health and first aid services were provided at disaster affected areas in Khartoum, River Nile, Northern State, and Blue Nile. So far 60 volunteers from Marawie and Dongola in Northern State have been trained in communicable disease control and epidemic preparedness covering malaria information, vector control, spraying technique and sprayers repair. A total of 97 sessions in health education included malaria prevention, HIV/Aids and diarrhea with participation of 20 trainers and a total

of 4,508 beneficiaries. In Gezira state 2 mobile clinics were established and run by a doctor, a laboratory technician, a pharmacist, a nurse and a pharmacist assistant in Managal locality, where the health service has provided.

Table 5: Summary of Health services provided in Gezira State

Villages/ areas	Beneficiaries	Remark
Kadous	267	Common diseases treated included: Malaria, chistosomiasis infections, Diarrhoea, typhoid and eye infections.
Alradi	319	
Campo 44 Karkat	468	
Abdalahaman	211	
Almatori	589	
Total	1,854	

Water, Sanitation, and Hygiene Promotion

Outcome: Reduced risk of waterborne and sanitation related disease outbreaks for 15,000 households (75,000 persons) affected by the flash floods in the target states.

Outputs	Activities planned
<ul style="list-style-type: none"> Provide access to safe drinking water to the targeted population. Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items is provided to the target population. Hygiene-related items which meet Sphere standards are provided to the target population. Continuous assessment of water, sanitation, and hygiene situation is carried out. Provide disinfectant for sanitation purposes. Contribute to rehabilitation of the destroyed and sub-standard sanitation facilities of the individual HH. The target is set on the level of 12,950 HH Provide construction material contribution to latrine reconstruction activities to the affected linked with hygiene promotion activities that include monitoring of latrine construction rehabilitation activities. Well construction, digging of the bore holes and equipping. Rehabilitation of identified public facilities' (schools and health clinics) sanitation units including latrines, providing safe water supply. The target is set on the level of 50 schools, clinics and other public facilities. 	<ul style="list-style-type: none"> Mobilise 100 volunteers for water, sanitation and hygiene promotion activities. Train 100 volunteers in household water treatment education, hygiene awareness and promotion, and community cleaning campaigns. Conduct an assessment on the water sources to determine extent of damage and alternate means of accessing safe drinking water. Enabling safe water through provision of chlorine tablets for the 15,000 targeted households along with training of households on their use. Distribution of one hygiene kit per family for 15,000 families (300 gms per pax, per month bathing soaps, 250 gms detergent per pax per month, 6 toothbrushes per month per pax, toothpaste, 1 nail clippers and 2 combs) Distribution of dignity kits for women for 15,000 (1 top cloth, 2 underwear, sanitary towels, 1 pair of slippers) per woman for one month (source: UNFPA) Deployment of 4 SRCS water treatment plants and refresher for NDRT team. Undertake sanitation and hygiene awareness campaigns, focusing on floods related risks. Conduct one community cleaning campaign, and vector control (spraying) in each of the six affected states. Provide an update of the situation based on the findings of the assessment and revise the operation as appropriate. Procurement and distribution of chlorine tablets for household water treatment and demonstrate usage. Chlorination of contaminated open wells. Increase access to drinking water by rehabilitating wells. Rehabilitation or reconstruction of HH latrines (12,950 HH) by supporting beneficiaries with construction materials.

	<ul style="list-style-type: none"> Volunteers will be trained for hygiene promotion around sanitation including monitoring of latrine rehabilitation and reconstruction activities. Trained volunteers will conduct hygiene promotion and WatSan software activities around latrine construction. Implement rehabilitation of public sector focused on school and clinic sanitation facilities (50 schools, clinics and other public facilities) and provide adequate water supply.
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Progress: The following activities have been implemented;

- SRCS deployed its water treatment plants from White Nile to Gezira state and was able to provide safe water to affected families and distribute 70,000 chlorine tabs, 3,250 jerry cans and 2,000 hygiene kits with hygiene promotional materials. These services were continued with the deployment of WatSan-NDRT to support the operation in Gezira as well as the running of WatSan kit 5s in two targeted states.

Table 6: Water, Sanitation and hygiene promotion progress

Activities	Planned	Achieved	Location	No of Beneficiaries	No of Volunteers involved
Water provision					
Rehabilitation of wells (haffirs)	4	4	Kararri & Um Badah locality in Khartoum State.	3,200	15
Deployment of water treatment units	2	2	Gezira	-	-
NDRT refresher training	1	1	Gezira	-	10
Rehabilitation of Earth Dams	15	15	-	6,000	15
Installation of Solar Pump	1	1	Gezira	350	5
Provision, installation complete Water Kit production and tanking of safe drinking water in Village 38 and Village 26	14,400 m3	14,400 m3	Gezira	6,000	12
Production and distribution of safe Water	12,000 m3	12,000 m3	White Nile	6,000	12
Provision of 3 inch Submersible Pumps and Rehabilitation of 3 Deep Boreholes	3	3	(Alfath - Omdurman) Khartoum	39,000 (7,800 HH)	12
Rehabilitation of defected Hand Pumps	9	9	3 in Khartoum	15,500	18
Construction of Solar Protection Room	1	In progress			
Sanitation and hygiene promotion					
Hygiene Awareness Sessions	121	110	Sinnar, North Kordofan, Kassala, Blue Nile, South Kordofan, Nother, Central Dafur, White Nile.	2,750	45
Home Visits	5,545	5,003	North Kordofan, Kassala, Blue Nile, South Kordofan, Gezira, North Darfur, Central Darfur	3,521	195
Vector Control					
Cleaning/Spraying Campaigns	81	87	Gezira (35) White Nile (1), River Nile (2), (45) and Northern states (4)	26,879	3,408
Capacity Building					
Water, sanitation and hygiene promotion for Branch Disaster Response Team volunteers chlorination Training	2	2	Gezira	12	12
Training of Hand Pump Mechanics	4	0			

Disaster Preparedness and Risk Reduction

Outcome: Communities preparedness and resilience to floods risks is strengthened in 7 high risk communities in the worst-affected states.

Output	Activities planned
<ul style="list-style-type: none"> • VCAs have been conducted in 7 Flood affected communities to inform planning for risk reduction and preparedness activities. • SRCS has increased preparedness to respond to disasters in high risk and flood affected communities. • Contribute to the prevention and reduction of flood risks: through a media campaign to raise public awareness of the affected areas and risks. • Advocacy campaigns organised for Nile river bank reinforcement by the involvement of national and international community. • In collaboration with the relevant district authorities and communities, individuals for voluntary relocation to the safe (flood free) areas. • Engage in dialogue with the government on a more coordinated approach to water management between the three states (regulated and coordinated water flow management) DRR. 	<ul style="list-style-type: none"> • Review and update the SRCS flood contingency plan, linking with early warning systems. • Conduct trainings for 30 staff and volunteers on Capacity Assessment (VCA) guidelines and tools in the affected and high-risk areas. • VCA conducted in 7 communities. This will include reviewing existing early warning mechanism, and assessing need for relocation of people to higher ground • Close links and collaboration with meteorological services in the country for early warning and action. • Organize media campaign and awareness raising. • Organize targeted meetings with the government relevant authorities, international community to raise awareness on the necessity for DRR in the Nile river banks. • Organize meetings at community level and engage with the district authorities to address DRR activities linked to voluntary relocation of people living in the most hardly hit areas. • Organize targeted meetings with the relevant government authorities to emphasize the role of coordination and enhanced cooperation between adjacent states (Ethiopia-Sudan-Egypt)

Progress: SRCS evacuated at-risk individuals and households to higher grounds, conducted rapid assessment and determined the needs of the affected communities and conduct risk reduction activities with the communities. SRCS has been engaged in preparedness and risk reduction processes, however due to limited availability of funds, SRCS has had to make priorities in activities to be carried out. Therefore under this output no activity was implemented at the time of the reporting.

Logistics

Outcome: Efficient and effective logistical support including warehousing of stock, procurement and transport, will be provided in accordance with standards IFRC logistics procedure

Output	Activities planned
<ul style="list-style-type: none"> • Coordinated mobilization of relief goods; reception of all incoming goods and efficient dispatch of goods to the final distribution points. • Procurements done in line with IFRC procurement guidelines. • National Society capacity support to enable the organization deliver needed services. 	<ul style="list-style-type: none"> • Set up efficient logistics and identify best supply chain to support the operation • Provide logistical support in transportation of supplies, staff and volunteers across the response sites of the crisis • Procure and mobilize relief stocks locally and control supply movements to distribution points. • Distribute relief supplies and control supply movements from point intended of dispatch to end-user. • Provide sufficient support to structures of the National Society that are involved in operation implementation to enable the NS deliver services.

Progress: SRCS being a recipient of the Humanitarian Aid, the point of entry of the relief, procurement, stocks, tracking, inflow-outflow reporting, in-kind donations' reports is on the Logistics Department. The department is being provided with support from IFRC, under the overall capacity building umbrella and institutional

development. In line with IFRC guidelines, SRCS through its purchasing committee manage procurement of the needed items for vulnerable people in the disaster affected area.

Table 7: Summary of procurement and distributions done as of 29 March 2014.

Items	Quantity
Shelter kits	6,128
Mosquito net	14,000 pieces
Blankets	7,000 pieces
Sleeping Mats	14,000 pieces
Water jerry cans	7,000 pieces

SRCS used its own fleet and rented additional trucks to deliver the emergency items to the target States and organized NFI distribution to the recorded beneficiaries. SRCS also mobilized volunteers to deliver essential services during NFI distributions.

In-kind international procurement support continues to be encouraged among partners and supported by the Operation. An up-to-date mobilization table has been published on the Federation's Disaster Management Information System (DMIS) and was updated regularly.

SRCS and IFRC Logistics Department has been very active in custom clearance of the incoming Norwegian, Finnish and Saudi Arabian in-kind donations. Due to delay of shipping parts of these donations, the items arrived in the early part of 2014. Whereas for items arriving in 2013, goods clearance were processed promptly, items arriving in 2014 remains in Port Sudan pending approval of SRCS exemption status. Based on these delays Saudi RC has decided to procure the remaining 20,000 mosquito nets locally within Sudan. Communication with Finnish Red Cross is being initiated on possibilities of either extending the Flood Appeal until September allowing for the clearance of kitchen sets into Sudan or transferring the donation to the upcoming revised Sudan 2013 Complex Emergency Appeal. The National Society's senior management is engaged in a concise effort to resolve the issue.

Contact information

For further information specifically related to this operation please contact:

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- **IFRC Geneva:** Christine South, Operations Support; phone: +41.22.730.45 29; email: christine.south@ifrc.org
- **IFRC Zone Logistics Unit (ZLU):** Rishi Ramrakha, Head of zone logistics unit; Tel: +254 733 888 022/ Fax +254 20 271 2777; email: rishi.ramrakha@ifrc.org
- **For In Kind Donations and Mobilization Table:** IFRC Global Logistics Services (GLS): Sera Coelho, Logistics Delegate, Dubai; Tel: 971 4 4572993 Mob +971 5 29 933598, Fax +971.4. 4572994, email: sera.coelho@ifrc.org

For Resource Mobilization and Pledges:

- **IFRC Africa Zone: Martine Zoethoutmaar, Resource Mobilization Coordinator; phone: +251 11 518 6073; email: martine.zoethoutmaar@ifrc.org**

For Performance and Accountability (planning, monitoring, evaluation and reporting)

- **In IFRC Zone: Robert Ondrusek, Planning, Monitoring, Evaluation and Reporting Delegate, Phone: +27.11.303.9744, email: robert.ondrusek@ifrc.org**
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How we work

All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.



The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.

Disaster Response Financial Report

MDRSD018 - Sudan - Floods

Timeframe: 12 Aug 13 to 28 Feb 15

Appeal Launch Date: 12 Aug 13

Interim Report

Selected Parameters

Reporting Timeframe	2013/8-2014/2	Programme	MDRSD018
Budget Timeframe	2013/8-2015/2	Budget	APPROVED
Split by funding source	Y	Project	*

All figures are in Swiss Francs (CHF)

I. Funding

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
A. Budget		7,384,813				7,384,813	
B. Opening Balance							
Income							
Cash contributions							
<i>British Red Cross</i>		58,721				58,721	
<i>Bulgarian Red Cross</i>		2,460				2,460	
<i>Danish Red Cross (from Danish Government*)</i>		120,000				120,000	
<i>Finnish Red Cross</i>		269,082				269,082	
<i>Italian Government Bilateral Emergency Fund</i>		432,366				432,366	
<i>Japanese Red Cross Society</i>		87,881				87,881	
<i>Norwegian Red Cross</i>		36,680				36,680	
<i>Red Cross of Monaco</i>		6,112				6,112	
<i>Swedish Red Cross</i>		141,025				141,025	
<i>The Canadian Red Cross Society (from Canadian Government*)</i>		30,990				30,990	
<i>The Netherlands Red Cross</i>		20,565				20,565	
<i>United States Government - USAID</i>		44,440				44,440	
<i>VERF/WHO Voluntary Emergency Relief</i>		500				500	
C1. Cash contributions		1,250,822				1,250,822	
Inkind Goods & Transport							
<i>Norwegian Red Cross</i>		9,069				9,069	
C2. Inkind Goods & Transport		9,069				9,069	
Other Income							
<i>Programme & Services Support Recover</i>		589				589	
C4. Other Income		589				589	
C. Total Income = SUM(C1..C4)		1,260,481				1,260,481	
D. Total Funding = B + C		1,260,481				1,260,481	

* Funding source data based on information provided by the donor

II. Movement of Funds

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
B. Opening Balance							
C. Income		1,260,481				1,260,481	
E. Expenditure		-1,118,866				-1,118,866	
F. Closing Balance = (B + C + E)		141,615				141,615	

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III. Expenditure

Account Groups	Expenditure						TOTAL	Variance
	Budget	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
BUDGET (C)			7,384,813			7,384,813		
Relief items, Construction, Supplies								
Shelter - Relief	420,000		240,240			240,240	179,760	
Clothing & Textiles	437,400		193,124			193,124	244,276	
Water, Sanitation & Hygiene	3,170,295		46,194			46,194	3,124,101	
Medical & First Aid	1,091,460		9,068			9,068	1,082,392	
Teaching Materials	30,000						30,000	
Utensils & Tools	362,700		30,493			30,493	332,207	
Total Relief items, Construction, Sup	5,511,855		519,120			519,120	4,992,735	
Land, vehicles & equipment								
Computers & Telecom			1,009			1,009	-1,009	
Total Land, vehicles & equipment			1,009			1,009	-1,009	
Logistics, Transport & Storage								
Storage	71,300		4,161			4,161	67,139	
Distribution & Monitoring			1			1	-1	
Transport & Vehicles Costs	202,016		51,060			51,060	150,955	
Logistics Services	13,015						13,015	
Total Logistics, Transport & Storage	286,331		55,222			55,222	231,109	
Personnel								
International Staff	228,500		50,218			50,218	178,282	
National Staff			483			483	-483	
National Society Staff	356,820		106,463			106,463	250,357	
Volunteers	249,680		141,168			141,168	108,512	
Total Personnel	835,000		298,333			298,333	536,667	
Consultants & Professional Fees								
Consultants	20,000		12,822			12,822	7,178	
Professional Fees			-1,051			-1,051	1,051	
Total Consultants & Professional Fees	20,000		11,771			11,771	8,229	
Workshops & Training								
Workshops & Training	103,778		1,561			1,561	102,216	
Total Workshops & Training	103,778		1,561			1,561	102,216	
General Expenditure								
Travel	52,200		11,600			11,600	40,600	
Information & Public Relations	39,208		320			320	38,888	
Office Costs	19,800		1,693			1,693	18,107	
Communications	1,500		1,613			1,613	-113	
Financial Charges	4,000		-9,073			-9,073	13,073	
Other General Expenses			871			871	-871	
Shared Office and Services Costs	60,425		21,139			21,139	39,286	
Total General Expenditure	177,133		28,163			28,163	148,970	
Operational Provisions								
Operational Provisions			125,347			125,347	-125,347	
Total Operational Provisions			125,347			125,347	-125,347	
Indirect Costs								
Programme & Services Support Recover	450,716		67,634			67,634	383,082	
Total Indirect Costs	450,716		67,634			67,634	383,082	
Pledge Specific Costs								

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III. Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
BUDGET (C)			7,384,813			7,384,813		
Pledge Earmarking Fee			8,006			8,006	-8,006	
Pledge Reporting Fees			2,700			2,700	-2,700	
Total Pledge Specific Costs			10,706			10,706	-10,706	
TOTAL EXPENDITURE (D)	7,384,813		1,118,866			1,118,866	6,265,947	
VARIANCE (C - D)			6,265,947			6,265,947		

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Budget Timeframe	2013/8-2015/2	Budget	APPROVED
Split by funding source	Y	Project	*

All figures are in Swiss Francs (CHF)

IV. Breakdown by subsector

Business Line / Sub-sector	Budget	Opening Balance	Income	Funding	Expenditure	Closing Balance	Deferred Income
BL2 - Grow RC/RC services for vulnerable people							
Disaster response	7,384,813		1,260,481	1,260,481	1,118,866	141,615	
Subtotal BL2	7,384,813		1,260,481	1,260,481	1,118,866	141,615	
GRAND TOTAL	7,384,813		1,260,481	1,260,481	1,118,866	141,615	