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Emergency Plan of Action Operation Update

Uganda: Population Movement

 International Federation
of Red Cross and Red Crescent Societies

Emergency appeal n° MDRUG0038	GLIDE n° OT-2016-000087
EPOA update n° 6;	Timeframe covered by this update: December 2017 – May 2018
Operation start date: 26 August 2016	Operation timeframe: 25 months. End date: 24 September 2018
Overall operation budget: CHF 4,503,319	
Project Manager: Lisa Zitman (responsible for implementation, compliances, monitoring and reporting)	National Society contact: Robert Kwesiga, Secretary General of the Uganda Red Cross Society
N° of people being assisted: 216,666 people	
Red Cross Red Crescent Movement partners currently actively involved in the operation: The International Committee of the Red Cross (ICRC), Austrian Red Cross (ARCS), German Red Cross (GRC), the Netherland Red Cross (NLRC) and Belgium Red Cross Flanders (BRCS) are in country.	
Other partner organizations actively involved in the operation: The Government of Uganda - Office of the Prime Minister (OPM), UNHCR, OXFAM, AIRD, UNICEF, UNFPA, World Food Program (WFP), IRC, ACF, MSF, World Vision, Welt hunger Life among others.	

Summary

This Operation Update provides an update on the implementation of the Revised Emergency Plan of Action published in December 2017, including the activities implemented between December 2017 and May 2018, and the Plan of Action for the remaining timeframe. The expenditure level is at 74%

To ensure the implementation of all remaining activities, a no cost time extension for an additional three months from June 24th to September 24th is sought.

The additional time will enable IFRC to further support URCS in its gradual transition from the emergency phase to a longer-term response to the South Sudanese Refugee crisis, in line with the URCS Plan of Action for the South Sudanese refugee operation. Long term bilateral programs were renewed and/or initiated between URCS and Partner National Societies (PNS), to continue to support the URCS South Sudanese refugee operation. Partner national societies supporting the South Sudanese operation bilaterally are the Austrian, Canadian,



Picture 1. Distribution of hygiene toolkits in a school in Imvepi refugee settlement. This is one of the schools where the hygiene and sanitation school clubs will be formed

Icelandic, German and Netherlands Red Cross. The bilateral programs provide continuity to previous bilateral programs, scale up activities already implemented and/or take over components of the IFRC Emergency Appeal in the West Nile.

The following activities will be implemented during the extended period

- construction of latrines for People with Special Needs (PSN) in Bidibidi and Imvepi refugee's settlements;
- establishment and training of School Health Clubs on PHASE/PHAST methodologies;
- training of School Management Committees (SMCs), Parents and Teachers Associations, Health Teachers on PHAST/PHASE methodologies;
- distribution of Menstrual Hygiene Management (MHM) kits;
- procurement of indoor and outdoor games for psychosocial support (PSS) activities;
- procurement of infotainment equipment for Community Engagement and Accountability (CEA) and PSS activities;
- improvement of office space and accommodation for staff and volunteers at Imvepi base camp.

The above activities could not be carried out within the implementation period due to the following reasons:

- delay in decision making process between URCS and IFRC on the alignment of the Appeal budget line with the available earmarked funding froze for a certain period of time the approval process of concept notes related to earmarked activities;
- delay from UNHCR and OPM in the validation of schools identified by IFRC-URCS to implement in school activities, including the establishment and training of school health clubs, training of school management committees and distribution of MHM kits;
- unexpected delays in the procurement process of the construction of Latrines for PSN
- delay in the decision-making process of the design of Imvepi base camp structures

A. SITUATION ANALYSIS

Description of the disaster

- **July 2016:** In the month following an escalation of violence in South Sudan, **80,354 people** cross into Uganda at a rate of approximately **2,592 people** per day.
- **27 July 2016:** An inter-agency meeting is held where the Office of the Prime Minister (OPM) and UNHCR call upon agencies to urgently mobilize resources and capacities to respond to the refugee humanitarian situation in West Nile.
- **2 Aug 2016:** Bidibidi settlement opens in Yumbe District to alleviate overcrowding in other settlements. The IFRC is supporting URCS to focus its response efforts in Bidibidi. Services and facilities in Bidibidi settlement are extremely under-resourced and are not sufficient to meet the basic needs of the current and projected refugees. The URCS, UNHCR and other agencies working in Bidibidi settlement are helping to address urgent basic needs in terms of water, sanitation and health. There were concerns of a cholera outbreak from neighboring settlements into Bidibidi, and the situation is monitored.
- **16 Aug 2016:** **8,982 refugees** are registered at Bidibidi. UNHCR projects the number would increase to 40,000 by December 2016.
- **24 August 2016:** The IFRC issues an [Emergency Appeal](#) for **658,782** Swiss francs, targeting 40,000 refugees in Bidibidi Settlement.
- **1 November 2016:** The IFRC publishes [Operations update 3](#) to announce an increase in budget to **690,325** Swiss francs to assist 30,000 refugees (reduced from 40,000 refugees).
- **February 2017:** The IFRC publishes an [Operations update 4](#) after a significant increase in daily refugee arrivals. There are **272,206 people in Bidibidi settlement, 123,795 people in Palorinya settlement and 86,770 people in Rhino settlement.** A **WASH Emergency Response Unit (M40)** is deployed to address the urgent WASH needs in Rhino settlement and the newly opened Imvepi settlement.
- **April 2017:** With a total of 816,041 South Sudanese refugees and asylum seekers, and 176,033 new arrivals since the 1st of January 2017 (UNHCR 27 March 2017). A **Mass Sanitation Module (MSM 20)** is deployed to address the urgent sanitation needs in the newly opened Imvepi settlement. The IFRC issues revised Emergency Appeal for **2,670,638** Swiss francs to now target 136,666 refugees in Bidibidi, Imvepi and Rhino settlement. [The revised appeal](#) and its budget includes an Emergency Response Unit (ERU) bilateral component valued at CHF 1,026,632. With CHF 1,944,217 of support received to date the remaining gap is CHF 726,421.71.

- **June 2017:** The IFRC publishes [operations update 5](#), to provide up to date information on increasing number of South Sudanese refugees. Moreover, the appeal time frame has been extended until the end of December 2017, to ensure the completion of all the activities.
- **December 2017: Revised emergency appeal** is issued with an increased budget of **4,503,319** Swiss francs and an extended timeframe until June 2018.
- **June 2018:** IFRC publishes the Operations Update 6 extending the Appeal timeframe for 3 months from June 24 to September 24 to complete remaining activities and continue to support URCS South Sudanese refugee operation in the West Nile to transition from the emergency phase to a longer-term response, in line with URCS Plan of Action.

Summary of current response

Overview of Host National Society

Uganda has been hosting refugees since the early 1990s. As of June 2018, Uganda hosts 1,462,866 refugees from South Sudan, Democratic Republic of Congo, Rwanda, Tanzania, Somalia, Ethiopia, Eritrea, Burundi and Kenya. Uganda is currently hosting 1,061,892 South Sudanese refugees and asylum seekers throughout the country. The URCS has been providing humanitarian support to refugees in the West Nile and South-Western region in the area of emergency WASH, distribution of non-food items, food security, psychosocial support, health, restoring family links and peace and conflict management. The focus of the activities revolves around:

- ensuring daily access to safe water which meets SPHERE and WHO standards in terms of quantity and quality;
- ensuring adequate sanitation which meets Sphere standards in terms of quantity and quality
- providing hygiene promotion activities which meet SPHERE standards in terms of the identification and use of hygiene items;
- providing community-based disease and promotion activities;
- conducting epidemic prevention and control measures;
- improving wellbeing of staff, volunteers and beneficiaries.

Overview of Red Cross Red Crescent Movement in country

At country level, URCS partners with IFRC, ICRC and the partner national societies in country: the Netherlands Red Cross, German Red Cross, Belgium Red Cross-Flanders, Austrian Red Cross, Canadian Red Cross and Icelandic Red Cross. In addition to emergency operational support, the various PNSs also support emergency health, disaster preparedness and response as well as food security and livelihood projects in various branches and geographical areas of the country. The below table provides an overview of RC Movement support to programs within the refugee context:

	Partners	Focus on Refugee Response
1	IFRC	Global coordination, resource mobilization and technical assistance to the Emergency Operations
2	ICRC	Restoring Family Links program in all refugee reception centres and refugee settlements.
3	Netherlands RC	Community Based Health and First Aid (CBHFA) in Rhino refugee settlement, West Nile region; WASH in Ntoroko refugees landing site, and Kyaka II refugee settlement, Mid-Western region.
	German RC	Food security and Livelihood in Adjoumani refugee settlement, West Nile region.
	Austrian RC	WASH in Rhino refugee settlement (Kamukamu water treatment unit), West Nile region and Kyangwali refugee settlement (support to Maratatu water treatment unit), Mid-Western region; Sanitation in Imvepi refugee settlement, West Nile region.
	Belgium RC - Flanders	National Society Disaster Preparedness capacity building; Branch Capacity Building with branches bordering Democratic Republic of Congo (900.000 CHF total amount for mobilization of funds)
	Icelandic-Canadian RC	Psychosocial support in Bidibidi and Imvepi refugee settlement and Community Based Health and First Aid (CBHFA) in Imvepi refugee settlement, West Nile region.

URCS coordinates the refugee operations with the in-country PNSs through monthly partners' operations meetings where updates on ongoing operations, including the Democratic Republic of Congo (DRC) and South Sudanese refugee responses, are shared.

Through the Population Movement Emergency Appeals in response to the South Sudanese refugee's crisis (MDURG038) and Congolese refugees' crisis (MDURG040), the IFRC has supported the National Society with both financial and technical resources, including the deployment of surge capacity, which has enabled effective response to the South Sudanese Refugee operation since 2016. Additionally, an IFRC Disaster Relief Emergency Fund (DREF) operation to respond the Marburg Viral Disease outbreak was launched in November 2017 and an IFRC/URCS Community Pandemic Preparedness Programme (CP3) is currently ongoing.

The overall management, monitoring and evaluation of the South Sudanese refugee response operation is led by the URCS Disaster Management team, with technical assistance from the Health and WASH departments. The DM team coordinates URCS operations at national, regional and local levels with all other stakeholders, including the Government through the Office of the Prime Minister (OPM), UNHCR and Arua, Yumbe and Moyo Districts Local Government for technical support and standardization of approaches. URCS staff and volunteers in Arua and Moyo branches implement the operation with technical support from the Headquarters, the IFRC Eastern Africa Cluster Office in Nairobi and the ICRC country delegation. The URCS continues to attend coordination meetings, sharing information, experiences and best practices related to the operation as appropriate.

Overview of non-RCRC actors in country

The URCS has been implementing refugee response interventions in close partnership and coordination with the Government of Uganda's Office of the Prime Minister (OPM), as well as District Local Governments. Other humanitarian partners involved in national level strategic coordination mechanism include UN agencies, Non-governmental organizations and International organizations. In the South Sudanese Refugee response operation, the following stakeholders, divided per sector of intervention, are present in the field:

Site Management	OPM (with support by UNHCR, AIRD)
Site Planning & Infrastructure	UNHCR, AIRD, URCS
Shelter	UNHCR, AIRD, URCS
WASH Construction & Services	URCS, UNICEF, OXFAM, Welt hunger Hilfe, Samaritans Purse
Water Sanitation and Hygiene (WASH)	UNHCR, ACF, ADRA, CEFORD, DRC, HIL, MI, MSF, NRC, OXFAM, PWJ, PLAN, SP, URCS, UNICEF, WMI, WHH, WRU, WVI)
Protection and Community Services	OPM, UNHCR, URCS, UNFPA (GBV), UNICEF, PLAN, Save the Children (CP), World Vision (CP) ARC, DCA, IRC, OPM
Health	UNHCR, CWW, GSS, IRC, MSF, MTI, OPM, RMF, TPO, UNFPA, UNICEF and WHO
Food security and Nutrition	UNHCR, ACF, CWW, DCA, SP, UNICEF, WFP and WVI
Food Distribution	WFP, World Vision (wet feeding at RC, and ration distribution)
NFI Distribution	UNHCR, World Vision, URCS
Logistics	UNHCR, AIRD
Education	UNICEF, UNHCR, AAR, OPM, TPO, WTU, PLAN, FCA
Community empowerment and self-reliance	UNHCR, WFP, WVI, DCA, OXFAM, IRC, URDMC, Caritas, SP, WTU, Plan International, MUPC

Needs analysis and scenario planning

Needs analysis

The conflict in South Sudan, which began in December 2013, has affected many people in the country. The latest figures of UNHCR (see <https://ugandarefugees.org>) give daily insights in the current amounts of refugees and UNHCR scenario planning. The figures show that from a total of 2.100.716 South Sudanese who sought refuge in the region, 49.30% of them are hosted in Uganda. Refugees continue to flee South Sudan to escape the fighting and violence and thus for the fear of indiscriminate killings, looting of property, burning of houses, torture, rape, arrest and other form of abuse i.e. denial of human rights. The lack of basic services and hunger are additional causes for the continued population movement from South Sudan to other countries in the region, including Uganda.



South Sudan Influx | 16 April - 26 April 2018 ¹



Due to the decreased influx from January to May 2018, during the Inter Agency meeting on June 1st, UNHCR and OPM considered to revise the planned figures of refugee arrivals from South Sudan to Uganda in 2018 from 300,000 to 100,000. Nevertheless, considering the unpredictability of the situation in South Sudan, UNHCR and OPM are at the same time aware that the influx could increase again in case of intensified hostilities in Western Equatoria or the organization of political elections, planned for the end of 2018.

The emergency appeal predominantly focuses on:

- Bidibidi and Imvepi Refugee Settlements with a multi-sector intervention on WASH, Health, and Protection;
- Rhino Refugee Settlement with multi-sector intervention on WASH and Protection;
- Palorinya with a WASH intervention.

Needs in terms of WASH, Health, Protection, Food security and nutrition remain nearly unchanged from the situation as described in the Revised Emergency Plan of Action, published in December 2017.

Between January and May 2018 efforts were made by the entire humanitarian community to implement activities in line with the Comprehensive Refugee Response Framework (CRRF). In particular through the application of the Refugee and Host Population Empowerment Strategy (ReHoPe), which represents one of the CRRF key components. Humanitarian organizations aim at bridging humanitarian interventions to longer term development programs, in order to work towards an integrated refugee management model. Long term programs and initiatives promoting community self-resilience have been gradually started up.

Operation Risk Assessment

Security: on March 28th a series of riots between motorcycle (boda-boda) cyclists and officials from Uganda Revenue Authority took place in Yumbe town, resulting in 4 death and various damaged vehicles. Although humanitarian organizations were not targeted, Police advised to be in high alert and exercise maximum caution. IFRC-URCS evacuated their personnel from Yumbe town to Lodonga Catholic Mission, which is selected as primary assembly point as per IFRC Uganda Security Plan. No damage was reported to IFRC-URCS staff and properties.

In addition to the implementation of the IFRC-URCS security rules and regulations, IFRC-URCS:

- maintain constant contact with Governmental institutions in charge of security;
- maintain constant contact with humanitarian agencies for information sharing.

Floods: Water treatment units (WTU), especially Enyau and the volunteer accommodation in a number of settlements, including Enyau, Palorinya, Palabek and Imvepi base camp were affected by heavy rains. In addition to actions to repair damages, IFRC-URCS worked on:

- an early warning - early action system for Enyau WTU, only partially implemented due to lack of funds;
- an improvement of volunteer accommodation conditions in Angalia-Chini and Imvepi base camp through the rehabilitation of existing infrastructures and the construction of new accommodation.

Roads: Road conditions leading Palorinya refugees settlement to Angalia-Chini WTU affects access of trucks to the water treatment unit. IFRC-URCS requested to UNHCR and OPM to repair the roads, to make sure that water can continue to be provided to refugees and host communities.

B. OPERATIONAL STRATEGY

Proposed strategy

In line with the strategy defined as per Revised Emergency Plan of Action, IFRC supports URCS in its gradual transition from the emergency phase to a longer-term response to the South Sudanese Refugee crisis, in line with its Plan of Action. As such, between January and May 2018 long term bilateral programs were renewed or started up with support from in country PNS. The bilateral programs from the Austrian, Canadian-Icelandic, German and Netherlands Red Cross scale up activities in ongoing operations and take over components of the IFRC Emergency appeal in the West Nile. A revision of URCS Plan of Action for the South Sudanese refugee response is currently undertaken by IFRC and URCS, with technical support from Netherlands Red Cross. The PoA for this specific operation will provide a broad picture of all URCS activities in the West Nile (funded by Movement and external partners) and identifies activities that need additional internal and external support. The EPoA will serve as a tool to advocate for additional internal and external support.

Between June and September 2018, IFRC and URCS will focus on the following activities:

- finalization of planned activities for that have been delayed due to both internal and external factors;
- support the implementation of exit strategies from water trucking activity in collaboration with other WASH stakeholders;
- end line surveys to measure the impact of URCS interventions;
- lessons learnt workshop, with the objective to jointly analyze with IFRC, URCS and external stakeholders, the URCS/IFRC emergency appeal. The results of this workshop will feed into URCS long term PoA for the South Sudanese refugee response.



Picture 2: Water Treatment Unit in Palorinya refugee settlement

C. DETAILED OPERATIONAL PLAN

 Water, sanitation and hygiene		
Outcome 1: Immediate reduction in risk of waterborne and water related diseases in the targeted Communities		
Indicators:	Target	Actual
# people provided with 15 litres of water/person/day	160.000	160.000
Output 1.1: Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population		
Indicators:	Target	Actual
# of Water Treatment Unit managed for the provision of safe water in Bidibidi, Imvepi and Palorinya refugees settlements	3	3
# of 20 litres jerry cans distributed in Imvepi and Bidibidi refugees settlements	17.273	12.000

# of study conducted to perform well yell testing and assessment for the realization of a motorized system at Kochi Water Treatment Unit, Bidibidi refugee settlement	1	1
Progress towards outcomes		
<p>As per revised Emergency Appeal, published on 24th December 2017, the following activities were planned to be implemented between December 2017 and June 2018:</p> <ul style="list-style-type: none"> - manage the Water Treatment Units (WTUs) in Enyau and Kochi, while gradually decreasing their water production; - manage the WTU in Palorinya; - repositioning of WTU: replenishment and storage. <p>Water treatment activities at Enyau (Imvepi refugees settlement), Kochi (Bidibidi refugee settlement) and Angalia-Chini (Palorinya refugees settlement) continue as per project document. Unfortunately WASH sector assumptions, on the base of which IFRC-URCS aligned its strategy, of gradually decreasing the level of water production in the period between January and June 2018, in parallel with the expected reduction in water trucking and development of alternative sources of water supply did not succeed in none of the refugee settlements in the West Nile.</p> <p>In the period between April 13th and May 18th the daily average of water production from Angalia-Chini WTU actually increased from 508 m³ to 726 m³, as a direct consequence of the dry season and the collapse of a certain number of boreholes in Palorinya refugee settlement. A similar situation was experienced in Kochi WTU and to a greater extend in Enyau WTU where IFRC-URCS had to refer in several occasions to UNCHR and WASH partners for re-directing trucks to alternative sites for lack of capacity in responding to the increased demand. These circumstances led in the period between December and March 2018 to unexpected higher running costs for water chemicals, fuel for generators, oil for pumps and pumps reparation. This situation, coupled with limited available Appeal funding, led to the situation where URCS could not continue to sustain WTU activities in Enyau and Kochi in the framework of the Appeal. Since April-May, UNHCR supports URCS with the financial means to manage these WTUs. the management of Angalia-Chini WTU is supported through the appeal with funds from the Swedish Red Cross, which will cover its running costs up to the end of June 2018.</p> <p>Although progress has been made in the realization of alternative and long-term solutions to phase out from the water trucking activity, the process is yet to be completed. Therefore, water treatment activities need to continue beyond June 2018. In order to avoid any interruption in water provision, discussions have already started with URCS, UNHCR and other stakeholders to advocate for their contribution to URCS WTUs up to the moment that more sustainable solutions will be identified and implemented.</p> <p>Due to the fact that the revised appeal was not fully funded, the repositioning of a WTU could not be implemented. A procurement for spare parts has been done to ensure functionality of the WTUs equipment's.</p>		
Output 1.2: Adequate sanitation which meets Sphere standards in terms of quantity and quality is provided to target population		
Indicators:	Target	Actual
# of HH latrines realized adopting a community-based approach in Imvepi and Bidibidi refugee's settlement	3.050	3.002
# of PSN latrines realized in Bidibidi and Imvepi refugees settlements	300	0
Progress towards outcomes		
<p>As per revised Emergency Appeal, published on 24th December 2017 the following activities were planned to be implemented between December 2017 and March 2018:</p> <ul style="list-style-type: none"> - Realization of 739 HH latrines in Imvepi and Bidibidi Refugees Settlements and realization of 177 PSN latrines in Imvepi Refugee Settlement (out of 3.050 HH latrines); - Realization of 300 PSN latrines in Imvepi and Bidibidi Refugees Settlement; - Construction of 3 child-friendly latrines in Imvepi RC; - Rehabilitation of 10 communal bath shelter and latrines in Imvepi Reception Center (RC); - Desludging of communal latrines in Imvepi RC; - Conduction of daily sanitation sessions on hygiene and sanitation in Imvepi RC. <p>As of January 2018, UNCHR and OPM requested partners to shift from emergency structures to semi-permanent / permanent structures. This implied a revision in the modality of intervention of IFRC-URCS. Due to the higher cost of permanent structures, the total target of HH latrines fixed as 3.050 (2.000 in Imvepi and 1.050 in Bidibidi), decreased to 1.785 in Imvepi (of which 7 emergency PSN latrines) and 1.217 in Bidibidi.</p> <p>In line with the new UNHCR and OPM guidelines for the realization of semi-permanent/ permanent PSN latrines, a revision in the modality of intervention was also considered necessary for the realization of 300 PSN latrines,</p>		

initially budgeted as emergency latrines. With the available budget, the target will decrease from 300 emergency latrines to 124 permanent structures for PSN.

It is worth mentioning that the modality of implementation of this latest activity will differ from the community-based approach adopted by the Appeal. The typology of the structure and materials required the signature of a service contract. To guarantee appropriation of infrastructures by beneficiaries, IFRC-URCS will continue undertaking sensitization and hygiene sessions with the beneficiary population.

The procurement process for the PSN latrines was delayed due to difficulties encountered with the identification of a supplier. This activity will therefore start only in June 2018 to be finalized in the month of July 2018.

Except for the realization of permanent PSN latrines, all the above sanitation activities were successfully executed as per revised Emergency Appeal.

Output 1.3: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population

Indicators:	Target	Actual
# of MHM kits procured and distributed in Bidibidi and Imvepi refugee's settlements	3,894	2,400
# of schools' hygiene clubs formed in Bidibidi and Imvepi refugees settlements	8	0
# of Global WASH events attended	2	3

Progress towards outcomes

As per revised Emergency Appeal, published on 24th December 2017 the following activities were planned to be implemented between December 2017 and March 2018:

- Training of 60 volunteers on PHAST;
- Training of teachers, parents' associations, health teachers on PHAST and PHASE;
- Establishment of 8 school hygiene clubs;
- Production of Information, Education and Communication (IEC) materials for schools and health centres;
- Participation in World water day.

Considering the WASH background of URCS volunteers, involved in the realization of Appeal activities since 2017, IFRC-URCS preferred to conduct an on the job PHAST training modality while continue undertaking hygiene and sanitation activities in the field.

As per the implementation of WASH related activities in schools, IFRC-URCS had to postpone the implementation due to:

- delay from UNHCR and OPM in the validation of schools (5 in Imvepi and 3 in Bidibidi) that were identified by IFRC-URCS to implement the WASH activities;
- delay from UNHCR and OPM in the allocation of alternatives schools (2 in Imvepi) whereas those identified were already supported by other humanitarian actors;
- delay from UNCHR on the validation of the MHM kit content, which has to be standardized among all humanitarian agencies;
- delay from UNHCR and OPM to validate the needs assessment criteria to be used for MHM kits distribution.

To date, 6 out of 8 schools were identified by IFRC-URCS and validated by UNHCR and OPM, while 2 schools need be allocated by UNHCR and OPM. In the schools identified, IFRC-URCS have already started discussions with School Management Committees (SMC), Parent and Teacher Associations (PATs) and Health teachers to prepare for the PHAST/PHASE training, which duration will vary from 3 to 5 days. All MHM kits, for a total of 1,438 were procured and transported to the field. URCS is collaborating with humanitarian agencies to coordinate and complement the efforts as the number of kits, for URCS as well as for other humanitarian agencies, is lower than the recorded field need. The distribution of MHM kits will be realized in complementarity with the hygiene and sensitization sessions at schools, in collaboration with SMCs, PTAs and Health Teachers trained.

Due to the delays as mentioned above, IFRC-URCS intend to implement WASH activities in school between June and July 2018.

Concerning the realization of IEC materials, sign posts with key messages were designed and procured. Part of them will be located in schools, others in health centers.

IFRC-URCS participated in World Water Day on March 22:

- supporting directly or through a steering committee Model homes with WASH non-food items (NFIs) including 1 basin of 25 litres, 1 jerry cans, 1 tippy taps and 1 soap;
- providing First Aid services at the main celebration venues;

- taking part in mass sensitization campaign, including cleaning campaigns;
- presenting water treatment process to UNHCR, OPM and humanitarian agencies in Enyau WTU.

It is important to mention that Austrian RC took over Sanitation activities in Imvepi Refugee Settlement starting from April 2018 on the base of a bilateral agreement with URCS.



Health

Outcome 2: The immediate risks to the health of affected populations are reduced

Indicators:	Target	Actual
% of people with improved knowledge on epidemic diseases	30%	N/A

Output 2.1: Target population is provided with rapid medical management of injuries and disease

Indicators:	Target	Actual
# of staff and volunteers trained on First Aid	46	48
# of First Aid procured	3	33

Progress towards outcomes

First Aid services continue to be delivered by URCS staff and volunteers trained in 2017 in occasion of public events and at community level.

Output 2.2: Community-based disease prevention and health promotion is provided to the target population

Indicators:	Target	Actual
# staff and volunteers trained on Community Based and First Aid (CBHFA)	20	113
# volunteers and focal persons trained on Reproductive health	50	48
# reproductive health referral and follow-up made/month	50	120

Progress towards outcomes

As per revised Emergency Appeal, published on 24th December 2017 the following activities were planned to be implemented between December 2017 and March 2018:

- Training on Reproductive health for volunteers and focal persons;
- Awareness session and community dialogues on reproductive health, referral and follow-up;
- Development of IEC Material on reproductive health;
- Establishment of condom distribution points.

A 2 days training on Reproductive health for volunteers and focal persons was organized in Imvepi and Bidibidi refugee settlement, respectively on February 28th and March 1st and on March 2nd and 3rd, for a total of 48 participants (20 in Bidibidi and 28 in Imvepi).

Main objectives of the training were:

- To equip volunteers and focal persons with skills for promoting reproductive health among refugee and host communities;
- To promote good health seeking behaviours among the refugee and host communities in Yumbe district;
- To create a community-based platform for disease prevention and referrals.

Due to the different social and academic backgrounds of participants various methodologies were employed, including presentation, group discussions, experience sharing, field visits, role plays and practical demonstrations. With the aim of achieving the above-mentioned objectives the following topics were discussed:

- Introduction to Sexual and Reproductive Health (SRH), including factors affecting reproductive health and risk and consequences of reproductive health;
- SRH for adolescents: life skills and coping mechanisms;
- Prevention and treatment of common Sexual Transmitted Infections (STIs) / Sexual Transmitted Diseases (STDs) including HIV/AIDS;
- Family planning services in emergency settings;

- Sexual and gender-based violence (SGBV) in emergencies;
- Antenatal care, delivery and postnatal care in emergency;
- New-born care and child nutritional interventions in emergency settings;
- Volunteers roles and responsibilities in promoting reproductive health in communities;

It is important to underline that in order to guarantee sustainability of the action, in addition to URCS volunteers engaged in Health activities (10 in Bidibidi and 10 in Imvepi), Village Health Team' (VHT) members as well as community focal persons, equally divided in terms of gender and village of provenience, took part in the training and in the subsequent realization of the following activities:

- sensitization sessions on family planning with main focus on different family planning methods, including access to them and the importance of child spacing. Special attention was given to youth and teenage pregnancies which account for 30% in the region;
- awareness creation on SGBV with the engagement of local leaders for ensuring a wider impact;
- awareness sensitization of women on proper breastfeeding with special emphasis on exclusive breastfeeding for children under 6 months and breastfeeding up to 2 years;
- referral to humanitarian stakeholders implementing nutrition intervention, such as ACF, of serious cases of malnutrition and to health clinic in case of Severe Acute Malnutrition (SAM) cases;
- sensitization sessions on the importance of antenatal care (ANC) aimed at ensuring that the women, as well as men prioritize ANC for a safe delivery in order to reduce maternal and child mortality;

Throughout the implementation of the above-mentioned activities IFRC-URCS noticed a behavioural change from community members in particular related to the use of family planning methods as a way of spacing children and reducing unwanted pregnancies and referral practices to health centres for ANC services. The involvement of community members and in particular local leaders facilitated the dissemination of information and the realization of discussion of topics still considered as sensitive.

In the realization of the activities IFRC-URCS recorded the need to strengthen referrals and sensitization on safe delivery in health centres activities due to the high number of home deliveries. Moreover, the low number of sanitary pads distributed to young girls and women in comparison to the needs, complicated sensitization on menstrual hygiene practices.

As member of the Health working groups, IFRC-URCS adopted ICV and IEC materials currently in use by other stakeholders and provided mainly by UN agencies and Ministry of Health. Good collaboration aiming at a complementarity of actions in the field was established with other Health partners, including MTI, MSF, ACF, RMF and both Arua and Yumbe District Health Offices.

Due to the limited available funding, no condom distribution points were established although the idea was accepted by the community.

It is important to mention that the Canadian-Icelandic RC bilateral program with URCS incorporated the Reproductive Health activities in Imvepi Refugee Settlement starting from May 2018, with a strong focus on SGBV.

Output 2.3: Epidemic prevention and control measures carried out

Indicators:	Target	Actual
# of Long lasting insecticidal nets distributed, including awareness raising on their use	700	9,000 (additional donation AmRC)
# volunteers and focal persons trained on Epidemic control	50	49
# of common diseases referral and follow-up made	50	80

Progress towards outcomes

As per revised Emergency Appeal, published on 24th December 2017 the following activities were planned to be implemented between December 2017 and March 2018:

- Conduction of training in epidemic control for volunteers and focal persons;
- Identification and procurement of facilitation materials for focal persons;
- Development and reproduction of ICV and IEC materials.

A 2 days training on Epidemic control and response for volunteers and focal persons was organized in Bidibidi and Imvepi refugee settlement, respectively on February 28 and March 1st and on March 2nd and 3rd for a total of 49 participants (20 in Bidibidi and 29 in Imvepi).

The training manual utilized was the one designed by IFRC with support from National Societies, approved by the World Health Organization (WHO) as a community-based training manual.

Main objectives of the training were:

- To acquire knowledge and skills on Epidemic Control to prevent and respond to epidemic outbreaks in the refugee settlements;
- To understand and effectively apply Epidemic Control for Volunteers (ECV) principles;
- To define volunteers' roles and responsibilities during Epidemic Control operations;

- To share experiences on community work.

Due to the different social and academic backgrounds of participants various methodologies were employed, including lecture/teaching, experience sharing, group works and practical demonstrations.

With the aim of achieving the above-mentioned objectives the following topics were discussed as per follow:

- Day 1: i) Introduction to Epidemic Control to Volunteers; ii) What is an Epidemic? iii) Infection Cycle; iv) The spread of diseases; v) What accelerates diseases to spread and become epidemic?; vi) Vulnerability and Epidemics; vii) Water related diseases and how to control infections; iix) Diseases that cause epidemics and ix) Disaster and Epidemics;
- Day 2: i) Principles of Epidemics (Assessment); ii) Epidemic Response Cycle (Preparedness, Alert, Action and Evaluation); iii) Understanding Risks; iv) Volunteers and Epidemics (Importance of Volunteers, Role of Volunteers); v) Actions in Epidemic control and vi) Epidemic Control Tool Kit.

Considering IFRC-URCS intervention in the WASH sector, special attention was given to the topic concerning water related diseases.

It is important to underline that in order to guarantee sustainability of the action, in addition to URCS volunteers engaged in Health activities (10 in Bidibidi and 10 in Imvepi) Village Health Team' (VHT) members as well as community focal persons, equally divided in terms of gender and village of provenience, took part in the training and in the subsequent realization of the following activities:

- awareness sessions on control and prevention of malaria which accounts for 17% of morbidity in the region, activity to be scaled up in conjunction with the beginning of the rainy season in order to reduce malaria incidences;
- demonstration on proper use of mosquito nets, as during door to door visits and community consultations their improper or incorrect use was observed;
- awareness sessions on personal hygiene aimed at reducing poor hygiene related infections like skin infections, common among children, and candidiasis, common among women;
- awareness sessions on food hygiene aimed at reducing diarrheal diseases, which accounts for 5% of morbidity in the region, and food poisoning;
- community dialogue on control and prevention of Sexual Transmitted Diseases (HIV/AIDs, Syphilis, Gonorrhoea, Hepatitis B, herps and Candidiasis) focusing especially on youth and the women who represent the most vulnerable and affected categories;
- community/ health facility-based surveillance as a way of curbing disease outbreak though continues identification and reporting of suspected cases.

Throughout the implementation of the above-mentioned activities IFRC-URCS noticed a behavioural change from community members in particular related to the use of mosquito nets and to the referral to health centres for testing and treating STIs. On the other note IFRC-URCS noticed a low level of immunization uptake as the majority of mothers' request for immunization services only when children are already sick.

As member of the Health working groups, IFRC-URCS adopted ICV and IEC materials currently in use by other stakeholders and provided mainly by UN agencies and Ministry of Health. Good collaboration aiming at a complementarity of actions in the field was established with other Health partners, including MTI, MSF, ACF, RMF and both Arua and Yumbe District Health Offices.

Due to the limited available funds, no facilitation materials were procured for VHT' members and focal persons.

It is important to notice that Canadian-Icelandic RC took over Epidemic control activities in Imvepi Refugee Settlement starting from May 2018 on the base of a bilateral agreement with URCS.



Protection, Gender and Inclusion

Outcome 3: The wellbeing of staff, volunteers and beneficiaries is increased.

Indicators:	Target	Actual
# of complaint and feedback mechanism established and functional	1	1

Output 3.1: PSS activities for staff and volunteers carried out in Imvepi Bidibidi and Rhino Refugee Settlement

Indicators:	Target	Actual
# of PSS trainings for ToT conducted	2	2

# of PSS sessions conducted by trained PSS ToT volunteers	N/A	272
# of individual and collectives counselling sessions for volunteers and staff conducted by PSS officer	N/A	21
Progress towards outcomes		
<p>As per revised Emergency Appeal, published on 24th December 2017 the following activities were planned to be implemented between December 2017 and March 2018:</p> <ul style="list-style-type: none"> - Trainings and refresher sessions on protection (PSS, CP & GBV); - PSS activities for staff and volunteers; - Implementation of protection feedback and complaint mechanism; - Realization of Self Care Day <p>A five days refresher training targeting 13 PSS volunteers was conducted in Arua between February and March covering Psychosocial support, Child protection and Sexual and Gender Based Violence topics. Main goal of the training was to strength volunteers' skills and knowledge in rolling out protection interventions in Bidibidi, Imvepi and Rhino refugees settlements.</p> <p>Between December and March 2018 six psycho education sessions were conducted by URCS PSS officer in favour of 122 (54 male and 68 female) volunteers in Bidibidi, Imvepi and Rhino refugee settlements. Main topics included psychological distress & stress and burn out. The sessions enabled volunteers to identify indicators of distress, stress and burnout and give advices on how to manage and where to seek for help when there is no positive recovery. Thanks to individual and group sessions, as well of the refresher training for 13 PSS volunteers, volunteers now have the ability to identify stress in colleagues and provide peer to peer support.</p> <p>Although materials to manage staff and volunteer protection feedbacks and complaint mechanisms were not purchased due to delay in the procurement process, URCS PSS officer did respond to 21 cases reported by volunteers managing them on a case by case basis.</p> <p>In the month of February, a football match between URCS volunteers reseeding in Imvepi base camp and URCS community-based volunteers was conducted as a stress management activity.</p> <p>The Canadian and Icelandic RC took over and scaled up PSS activities in Imvepi, Bidibidi and Rhino Refugees Settlements starting from May 2018 on the base of a bilateral agreement with URCS.</p>		
Output 3.2: PSS activities for beneficiaries		
Indicators:	Target	Actual
# of gathering places identified through community dialogues to be used as Child Friendly Spaces in Bidibidi and Imvepi refugees' settlement	15	15
# of Child Protection Committees' members trained on Child Protection principles	120	0
# of awareness sessions on Psychosocial support, Child Protection and Sexual and Gender Based Violence conducted IN Bidibidi, Imvepi and Rhino refugee's settlements	72	21
Progress towards outcomes		
<p>As per revised Emergency Appeal, published on 24th December 2017 the following activities were planned to be implemented between December 2017 and March 2018:</p> <ul style="list-style-type: none"> - Identification through community dialogues of gathering places to be used as Child Friendly Spaces (CFS) - Upgrading and equip gathering places to be used as CFS - Revive and conduct refresher training for Child Protection Committee - Conduct PSS Activities (Life Skills: education, recreational and counselling) for children, adolescents and adults - Conduct awareness sessions on protection (PSS, GBV and CP), identification, referral and follow up. <p>15 gathering places to be used as CFS were identified across the three settlements thanks to the involvement of 317 (75 male and 232 female) People of Concerns (PoC) in community dialogues. As per the focus groups discussion conducted community members welcome the idea of establishing a common space for children within their community inclusive education equipment and recreation, essential to promote psychosocial wellbeing through sports activities. Although in the implementation period no gathering space was equipped, URCS volunteers conducted mobile life skills and recreation activities involving 620 children focusing in particular on peer resistance, self-awareness, self-esteem, assertiveness and communication skills. Parallel to the assessment of gathering spaces, URCS volunteers identified 60 people (42 male and 18 female) that are part of child protection committees, to be capacitated on the base of ad hoc training.</p> <p>On the base of knowledge acquired during the 5 days training on PSS, CP and GBV, URCS PSS volunteers conducted 21 awareness sessions in Imvepi, Bidibidi and Rhino refugee settlement reaching 1630 people (690 male</p>		

and 940 female). The activity allowed to increase community awareness on psychosocial problems, child protection issues and the effects of SGBV. More awareness raising on protection issues need to be conducted and the protection structures needs motivation to be able to effectively conduct awareness in the community.

As previously mentioned, Canadian-Icelandic RC took over and scaled up protection prevention activities in Imvepi, Bidibidi and Rhino Refugees Settlements starting from May 2018 on the base of a bilateral agreement with URCS.

Strengthen National Society

Outcome 5: Capacity of the Ugandan Red Cross Society to respond to the emergency and needs of the affected population is strengthened

Indicators	Target	Actual
# of National Disaster Response Team' members deployed	8	14
# of financial system rolled out (Navision)	1	1
Imvepi base camp infrastructures (accommodation and office space) improved	1	0

Progress towards outcomes

As per revised Emergency Appeal, published on 24th December 2017 the following activities were planned to be implemented between December 2017 and March 2018:

- Complete roll out of Navision
- Improve Imvepi base camp

As per Navision roll out, URCS conducted several sessions to field staff on the use of the system.

As per the Improvement of Imvepi base camp IFRC-URCS had to postpone the implementation of the activity due to delays in the process of:

- procurement of PSS items (indoor and outdoor) to be used by URCS staff and volunteers in the base camp, as well as by URCS volunteers conducting PSS mobile activities within the refugee settlements of intervention;
- procurement of infotainment equipment for which technical specifications were discussed between URCS CEA officer and IFRC-NDRT CEA on mission in support to the South Sudanese operation in the month of March 2018, in order to adapt it to needs and context;
- identification of suppliers for the realization of accommodation and office spaces for staff and volunteers, including sanitary infrastructures, in Imvepi base camp.

Concerning this last point, delays are mainly related to the decision-making process on design infrastructures, as well as choice of material to use, which had to be in line with new identified needs in terms of accommodation and office spaces vis-à-vis to context development and thus URCS intervention.

The above-mentioned procurements will be initiated in the month of June and activities implemented between June and September 2018.

D. BUDGET

See budget annexed to the report.



Click here for:

- Previous Appeals and updates
- Emergency Plan of Action (EPoA)

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For In-Kind donations and Mobilization table support:

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- Fiona Gatere, PMER Coordinator at the IFRC Nairobi Office, fiona.gatere@ifrc.org, +254 780 771 139

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 (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian 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:



Save lives.
protect livelihoods,
and strengthen recovery
from disaster and crises.



Enable **healthy**
and **safe** living.



Promote social inclusion
and a culture of
non-violence and peace.

Disaster Response Financial Report

MDRUG038 - Uganda - Population Movement

Timeframe: 26 Aug 16 to 30 Jun 18

Appeal Launch Date: 26 Aug 16

Interim Report

Selected Parameters

Reporting Timeframe	2016/8-2018/4	Programme	MDRUG038
Budget Timeframe	2016/8-2018/6	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

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		2,958,238				2,958,238	
B. Opening Balance							
Income							
Cash contributions							
<i>American Red Cross</i>		4,511				4,511	
<i>Austrian Red Cross</i>		86,887				86,887	
<i>British Red Cross</i>		440,190				440,190	
<i>China Red Cross, Hong Kong branch</i>		25,152				25,152	
<i>Icelandic Red Cross</i>		254,142				254,142	
<i>Icelandic Red Cross (from Icelandic Government*)</i>		172,425				172,425	
<i>Japanese Red Cross Society</i>		109,346				109,346	
<i>Norwegian Red Cross</i>		162,772				162,772	
<i>Red Cross of Monaco</i>		10,667				10,667	
<i>Swedish Red Cross</i>		151,676				151,676	
<i>The Canadian Red Cross Society</i>		826				826	
<i>The Canadian Red Cross Society (from Canadian Government*)</i>		150,531				150,531	
<i>The Netherlands Red Cross</i>		583,452				583,452	
<i>The Netherlands Red Cross (from Netherlands Government*)</i>		65,510				65,510	
C1. Cash contributions		2,218,088				2,218,088	
Inkind Goods & Transport							
<i>American Red Cross</i>		75,447				75,447	
C2. Inkind Goods & Transport		75,447				75,447	
Inkind Personnel							
<i>British Red Cross</i>		19,613				19,613	
<i>Swedish Red Cross</i>		10,787				10,787	
<i>The Canadian Red Cross Society</i>		29,632				29,632	
C3. Inkind Personnel		60,032				60,032	
C. Total Income = SUM(C1..C4)		2,353,567				2,353,567	
D. Total Funding = B + C		2,353,567				2,353,567	

* 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		2,353,567				2,353,567	
E. Expenditure		-1,739,903				-1,739,903	
F. Closing Balance = (B + C + E)		613,663				613,663	

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Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

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)			2,958,238			2,958,238		
Relief items, Construction, Supplies								
Shelter - Relief			2,533			2,533	-2,533	
Construction Materials	12,634		17,468			17,468	-4,833	
Clothing & Textiles	5,600		69,442			69,442	-63,842	
Water, Sanitation & Hygiene	551,860		329,362			329,362	222,497	
Medical & First Aid	3,524		1,686			1,686	1,837	
Teaching Materials	15,610						15,610	
Utensils & Tools	62,862		28,912			28,912	33,950	
Other Supplies & Services	85,141		2,558			2,558	82,584	
Total Relief items, Construction, Sup	737,231		451,961			451,961	285,270	
Land, vehicles & equipment								
Vehicles	9,599		8,799			8,799	800	
Computers & Telecom	27,048		7,006			7,006	20,042	
Office & Household Equipment	7,293						7,293	
Total Land, vehicles & equipment	43,940		15,805			15,805	28,135	
Logistics, Transport & Storage								
Storage	2,477		7,920			7,920	-5,443	
Distribution & Monitoring	17,845		19,953			19,953	-2,108	
Transport & Vehicles Costs	155,453		146,530			146,530	8,923	
Logistics Services	13,000		16,743			16,743	-3,743	
Total Logistics, Transport & Storage	188,775		191,146			191,146	-2,371	
Personnel								
International Staff	340,400		248,008			248,008	92,392	
National Staff	39,000		19,968			19,968	19,032	
National Society Staff	621,531		194,329			194,329	427,202	
Volunteers	330,978		139,755			139,755	191,223	
Total Personnel	1,331,909		602,060			602,060	729,849	
Consultants & Professional Fees								
Consultants	73,499		48,089			48,089	25,410	
Professional Fees	47,839						47,839	
Total Consultants & Professional Fees	121,338		48,089			48,089	73,248	
Workshops & Training								
Workshops & Training	75,898		11,630			11,630	64,268	
Total Workshops & Training	75,898		11,630			11,630	64,268	
General Expenditure								
Travel	82,475		69,006			69,006	13,469	
Information & Public Relations	36,905		13,618			13,618	23,287	
Office Costs	85,332		28,157			28,157	57,175	
Communications	34,615		4,614			4,614	30,001	
Financial Charges	5,165		6,643			6,643	-1,478	
Other General Expenses			262			262	-262	
Shared Office and Services Costs	34,105		29,364			29,364	4,741	
Total General Expenditure	278,597		151,664			151,664	126,934	
Operational Provisions								
Operational Provisions			148,519			148,519	-148,519	
Total Operational Provisions			148,519			148,519	-148,519	
Indirect Costs								

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Budget Timeframe	2016/8-2018/6	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

All figures are in Swiss Francs (CHF)

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)			2,958,238			2,958,238		
Programme & Services Support Recove	180,550		101,062			101,062	79,488	
Total Indirect Costs	180,550		101,062			101,062	79,488	
Pledge Specific Costs								
Pledge Earmarking Fee			12,067			12,067	-12,067	
Pledge Reporting Fees			5,900			5,900	-5,900	
Total Pledge Specific Costs			17,967			17,967	-17,967	
TOTAL EXPENDITURE (D)	2,958,238		1,739,903			1,739,903	1,218,335	
VARIANCE (C - D)			1,218,335			1,218,335		

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Interim Report

Selected Parameters

Reporting Timeframe	2016/8-2018/4	Programme	MDRUG038
Budget Timeframe	2016/8-2018/6	Budget	APPROVED
Split by funding source	Y	Project	*
Subsector:	*		

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 management	2,958,238		2,353,567	2,353,567	1,739,903	613,663	
Subtotal BL2	2,958,238		2,353,567	2,353,567	1,739,903	613,663	
GRAND TOTAL	2,958,238		2,353,567	2,353,567	1,739,903	613,663	