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Disaster Relief Emergency Fund (DREF) Sudan: Yellow Fever Outbreak

 International Federation
of Red Cross and Red Crescent Societies

**DREF operation n° MDRSD015
GLIDE n° EP-2012-000184-SDN
27 November 2012**

The International Federation of Red Cross and Red Crescent (IFRC) Disaster Relief Emergency Fund (DREF) is a source of un-earmarked money created by the Federation in 1985 to ensure that immediate financial support is available for Red Cross and Red Crescent emergency response. The DREF is a vital part of the International Federation's disaster response system and increases the ability of National Societies to respond to disasters.

CHF 247,437 has been allocated from the IFRC's Disaster Relief Emergency Fund (DREF) to support the Sudanese Red Crescent Society (SRCS) to complement the Ministry of Health (MoH) social mobilization efforts to general population and in delivering immediate preventive assistance to 53,359 households in 23 localities affected by Yellow Fever in the 5 Darfur States of Sudan. Un-earmarked funds to repay DREF are encouraged.

Summary: In the last two days of October 2012, a yellow fever outbreak was reported in the Darfur region initially affecting 17 localities with a total number of 98 suspected cases and 42 deaths. The outbreak progressed rapidly and has spread to other areas within days. So far, the outbreak has affected 23 localities across West, Central, South, North and recently East Darfur States. By 15 November 2012, Federal MoH and WHO reported the total number of cases as 374 with 110 deaths (case fatality rate of 29.4 percent).



SRCS volunteers spraying homesteads/Photo:SRCS

A request to the International Coordinating Group on Vaccine (ICG) for 4 million Yellow Fever (YF) vaccines received partial approval and made available 2,418,989 doses of YF vaccines, injection materials and operational costs to conduct immunisation campaigns. In total, 12 Localities with high case loads and high risk for rapid spread have been prioritised for initial vaccination campaigns.

This DREF operation aims at enabling the SRCS to scale up its social mobilization efforts to create awareness on basic facts for prevention and early treatment amongst the general population as well as complement the work of other key stakeholders supporting MoH and WHO vaccination campaigns before, during and after the vaccination campaigns.

This operation is expected to be implemented over three months, and will therefore be completed by 26 February 2013; a Final Report will be made available three months after the end of the operation (by 26 May 2013).

[<click here for the DREF budget; here for contact details; here to view the map of the affected area>](#)

The situation

On 29 October 2012, Sudan's Federal Ministry of Health (FMOH) notified WHO of a possible Yellow Fever outbreak in 17 localities in Central and South Darfur. In a few days a total of 98 suspected cases were reported, including 42 deaths, from the districts of Zalingei, Nertity, Wadisalih, Azoom, Nyala, Mershing, and Kass with 82.6 percent of the reported cases being from Central Darfur. New cases continued to emerge with cases being reported across the Darfur State. Blood samples were taken from 14 percent of suspected cases for testing, with 11 testing positive for yellow fever by RT-PCR at the Central Public Health Laboratory in Khartoum. Two positive samples were found in samples from each of Nertity and Wadi Salih locality (Central Darfur), 1 positive sample from each of Zalingei (Central Darfur), Genaina, Habila and Kernik (in West Darfur) and 3 positive samples from Kass locality in South Darfur. Samples tested for Crimean- Congo Hemorrhagic Fever (CCHF) and Chikungunya were negative.

According to FMOH and WHO, as of 13 November 2012, the outbreak is reported to have affected 23 localities in Central, South, West, North and East Darfur with 374 cases reported, including 110 deaths (case fatality rate of 29.4%).

Table 1: Suspected cases of yellow fever: Attack rate (AR) and case fatality rate (CFR) per locality in affected localities in Greater Darfur from 2 September to 11 November, 2012

State	Locality	no of cases	Attack rate	deaths	CFR
South Darfur	Nyala	4	0.7	0	0%
	Sharq Algabal	8	5.4	7	87.5%
	Kass	18	8.5	4	22.2%
	Mershing	2	0.5	1	50%
	Kubum	4	1.3	0	0%
	Rehaid Albirdy	2	0.9	0	0%
Central Darfur	Zalingei	81	26.5	20	24.7%
	Wadisalih	41	23.6	13	31.7%
	Azoom	63	126.1	20	31.7%
	Nertity	64	46.3	17	26.6%
	Mukjer	2	2.1	0	0%
	Bendisi	5	9.6	0	0%
	Um Dukhun	2	1.5	1	50%
West Darfur	Genaina	12	14.9	5	41.7%
	Beidha	14	18.7	4	28.6%
	Habila	12	24.8	10	83.3%
	Kernik	21	6.1	6	28.6%
	Forbranga	4	5.8	0	0%
	Jebel Moon	1		0	0%
North Darfur	Saraf Omra	4	3.1	1	25%
	Alseraif	7	12.3	0	0%
	Elfashir	1	0.2	0	0%
East Darfur	Yassin	1	1.1	0	0%
	Total Locality	374	8.8	110	29.4%

To curb the spread, the Ministry of Health (MOH) at state and national levels, with support from other government agencies and WHO constituted emergency coordination mechanisms to monitor disease trends and establish response actions. Humanitarian partners working in Darfur including SRCS are part of this

coordination mechanism. One of the key actions called for by FMOH and WHO was the vaccination of 3.6 million people across the 23 affected localities to curb the spread of the disease.

The FMOH requested for 4 million Yellow Fever vaccines from the International Coordinating Group on Vaccine (ICG) who approved partially the provision of 2,418,989 doses of YF vaccines, injection materials and the operational costs. Following this, FMOH revisited their vaccination plan and decided to initially vaccinate 12 localities on the basis of high case loads and high risk of spread due to high mobility of the population.

The FMOH requested the SRCS to take a lead role in social mobilisation and preventive measure campaigns in addition to complementing the work of the other humanitarian agencies, relying on their volunteer network to implement the vaccination campaigns.

This DREF operation therefore aims to enable SRCS meets its commitment to implement outbreak containment activities, including vector control and awareness campaigns to complement the vaccination campaign efforts of the FMOH in all 23 localities targeting villages where they have volunteer presence in order to reach approximately 53,359 people directly through house to house visits. The operation also aims to reach the general population indirectly through mass media advocacy campaigns in order to prevent further spread of the disease at community and individual level.

This operation is expected to be implemented over three months to be completed on 28 February 2013 starting prior to commencement of vaccination campaign and continuing after the immunization campaign to ensure comprehensive mop up and case definition efforts are carried out in the target areas.

Coordination and partnerships

The Ministry of Health (MoH) at Federal (Khartoum) and states levels convened emergency coordination meetings with all humanitarian partners operating in Darfur States for reporting, monitoring of response progress and soliciting for support. SRCS participates in these meetings at both Khartoum and state level.

The FMOH and WHO jointly organised a meeting to share the revised vaccination plan with humanitarian partners providing assistance in Darfur States. Commitments to support these efforts were made as follows:

- MSF Switzerland: Azoom, Wadi Saleh and Zalingay
- MSF Spain: Saraf Omra and Al Seraif
- MSF Belgium: Kass
- Save the Children: Habila, Kernik, Baida and El Genaina
- ICRC: Nertiti and Jebel Mara. Additionally, ICRC committed to work with the FMOH to airlift vaccines from Khartoum to different capitals in Darfur

Red Cross and Red Crescent action

From the onset of the outbreak, SRCS has activated its Emergency Response Action teams at the 3 Darfur branches and at headquarter (Khartoum) level who have in turn put on alert 3,000 volunteers out of its 45,356 volunteer network across the Darfur States. With the first suspected cases reported, the SRCS headquarters sent six medical doctors to the affected areas to support MoH and SRCS field teams to respond.

Additionally, SRCS convened a meeting to inform the ICRC and IFRC of her response plans to the epidemic and to solicit their support where both committed to support to the SRCS efforts. SRCS and IFRC shared information with all their partners on the emerging Yellow fever outbreak including the issuance of a DMIS alert.

The SRCS branch in West darfur (which has the highest record of cases reported) has produced and distributed 1,000 information, education and communication (IEC) health messages and leaflets in El Geneina locality through the volunteers,. Furthermore, 100 SRCS volunteers have conducted health promotion sessions in 6 localities and, in collaboration with the local authority, 50 volunteers have participated in spraying campaigns in Forbaranga locality. Another 20 volunteers were trained by MoH in vector spraying techniques. In South Darfur branch, 20 volunteers provided essential basic health care for patients admitted in isolation rooms in Nyala hospital.

The International Federation, through its country office in Khartoum continues to work closely with the National Society by supporting its staff and volunteers in all their activities to ensure that management as well as operational issues are directed and implemented according to the principles and core values of the Red Cross Movement to meet the needs of the most vulnerable.

The IFRC health advisor will be deployed to the regional office and if necessary to Khartoum to provide training to the NS, and will identify possible specialized agencies to partner with in order to provide specialized training to the NS staff and volunteers.

The East Africa Regional Office will conduct a review of this operation in order to draw lessons that would inform other similar operations in the region.

The needs

The Darfur States has a population of approximately 8 million people the majority of whom have no YF vaccination, a key priority is to prevent a generalized epidemic and ensure proper case management. Vaccination campaigns are planned in 12 high risk localities following the approval of 2,418,989 doses of YF vaccines from the ICG. While this might ensure the immediate curbing of spread, the need for generalized preventive measures across all 23 localities where YF cases have been reported remains.

Immediate needs: This DREF aims at making use of the network of volunteers located in all the 23 localities to scale up social mobilization efforts for prevention through vector control (spraying and distribution of mosquito nets) and mass media campaigns.

Longer-term needs: Over the last five years, with support from the IFRC and other Movement partners, SRCS has built SRCS volunteers in various skills in disaster risk reduction (DRR) and disaster management across all the Darfur States. To ensure continuity of the ability to respond effectively to these chronic and recurring emergency situations there is a need to continue enabling the SRCS volunteer network with skills, tools and means to continue to be available as first responders within their communities.

The proposed operation

Emergency health	
Outcome: Most vulnerable communities in the 23 YF affected localities have increased their resilience to YF outbreaks through enhanced awareness of the basic facts including the need for early treatment and use of Insecticide Treated Mosquito Nets.	
Outputs	Activities planned
<ul style="list-style-type: none"> Preventive measures at individual level in place and the population are aware of the epidemics. 	<ul style="list-style-type: none"> Train 10 SRCS staff (From HQ and Darfur Branches) on epidemic control for volunteers (ECV) tool kit including case surveillance and case referral. Mobilize and train 300 volunteers in basic facts of Yellow Fever outbreak including contact tracing and case referral. Conduct house to house awareness campaign to raise the community awareness on the basic facts of yellow fever and the related preventive measures Conduct public awareness campaigns on yellow fever through public service announcements approaches relevant to specific context. Procure and distribute Insecticide Mosquito nets to 30,300 households (2 nets per family). Continue the collaboration and coordination with the MoH, WHO and other stakeholders including movement partners responding to the epidemic prevention activities such as: sensitization, referrals, and education and vector control activities

Water, Sanitation and Hygiene	
Outcome: The spread of the outbreak is minimized through the provision of vector control activities in 23 localities.	
Outputs	Activities planned
<ul style="list-style-type: none"> Vector control measures at community level in place, community sensitized and mobilized in 21 localities. 	<ul style="list-style-type: none"> Mobilize and provide refresher training for 50 volunteers in the safe use of spraying equipment. Train 260 Red Cross volunteers from 23 Darfur Localities on hygiene and sanitation.

	<ul style="list-style-type: none"> • Procurement of 50 insecticide spraying equipments • Procurement of safety clothing and other material for use by the volunteers during spraying campaigns • Conduct insecticide spraying campaigns including treating existing standing water in 23 localities.
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Logistics	
Outcome: Provision of logistical support in line with the operational priorities to reinforce and facilitate timely delivery of humanitarian assistance	
Outputs	Activities planned
<ul style="list-style-type: none"> • Coordinated mobilization of goods, reception of all incoming goods and efficient dispatch of goods to the final distribution points. 	<ul style="list-style-type: none"> • Support the procurement and mobilization of emergency stocks and control supply movements to distribution points. • Provide logistical support in transportation of supplies, staff and volunteers in the response sites of the crisis as required.

Communications - Advocacy & Public Information	
Outcome. Steady flow of timely and accurate information between the field and other partners is maintained	
Outputs	Activities planned
<ul style="list-style-type: none"> • Smooth flow of information on the operation is ensured for all concerned stakeholders, including beneficiaries and partners supporting the operation. 	<ul style="list-style-type: none"> • Produce news releases, public service announcements, fact sheets, video and photographs for publication on all relevant media outlets at local, national and international level as appropriate. • Hire competent spokespersons for the operation and link them to the media and key stakeholders. • Launch a nationwide mass media campaign on YF basic facts. • Produce weekly information bulletins for dissemination to key partners and stakeholders • Organise media field trips to affected areas as appropriate • Monitor media coverage on YF and SRCS response to the emergency informing relevant departments on emerging trends. • Produce final documentary and/or conduct a lessons learned workshop on the SRCS response and intervention throughout the emergency situation.

Contact information

For further information specifically related to this operation, please contact:

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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.

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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.
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DREF OPERATION

APPEAL

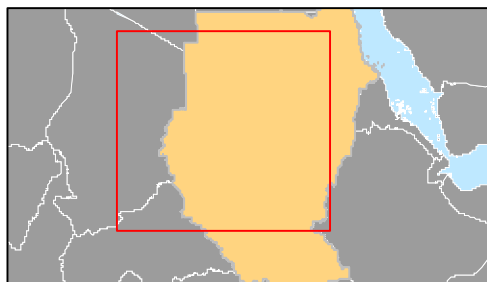
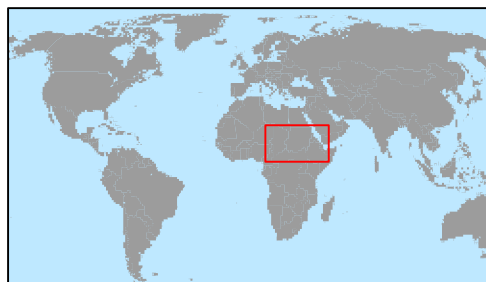
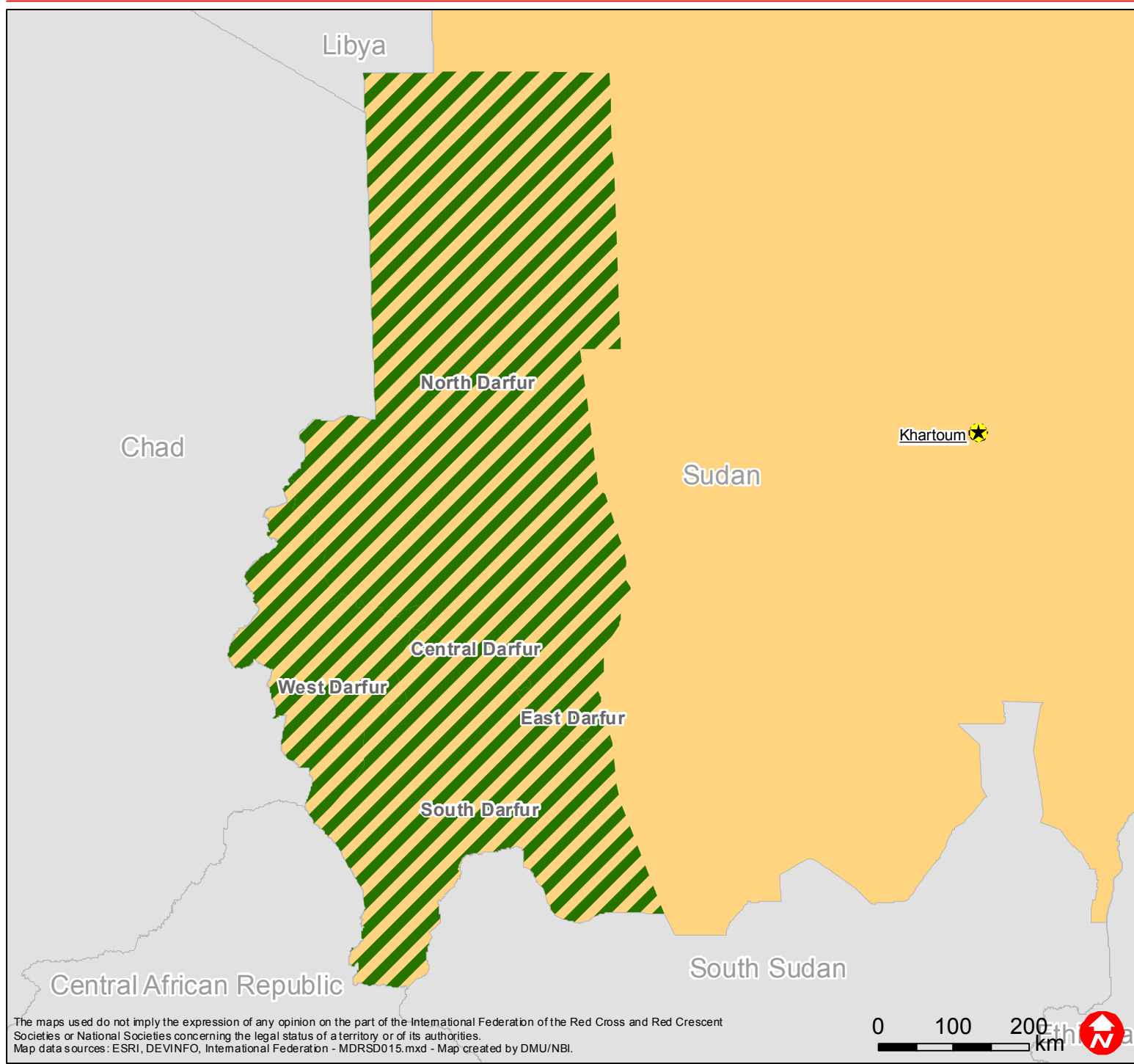
Sudan Yellow Fever Outbreak

		DREF Grant Budget CHF
Budget Group		
500	Shelter - Relief	0
501	Shelter - Transitional	0
502	Construction - Housing	0
503	Construction - Facilities	0
505	Construction - Materials	0
510	Clothing & Textiles	0
520	Food	0
523	Seeds & Plants	0
530	Water, Sanitation & Hygiene	11,500
540	Medical & First Aid	0
550	Teaching Materials	4,000
560	Utensils & Tools	33,000
570	Other Supplies & Services	32,400
578	Cash Disbursements	0
	Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES	80,900
580	Land & Buildings	0
581	Vehicles	0
582	Computer & Telecom Equipment	0
584	Office/Household Furniture & Equipment	0
587	Medical Equipment	0
589	Other Machinery & Equipment	0
	Total LAND, VEHICLES AND EQUIPMENT	0
590	Storage, Warehousing	4,100
592	Distribution & Monitoring	3,600
593	Transport & Vehicle Costs	9,360
594	Logistics Services	0
	Total LOGISTICS, TRANSPORT AND STORAGE	17,060
600	International Staff	0
661	National Staff	0
662	National Society Staff	0
667	Volunteers	79,875
	Total PERSONNEL	79,875
670	Consultants	15,000
750	Professional Fees	0
	Total CONSULTANTS & PROFESSIONAL FEES	15,000
680	Workshops & Training	14,000
	Total WORKSHOP & TRAINING	14,000
700	Travel	8,000
710	Information & Public Relations	7,500

730	Office Costs	0
740	Communications	5,000
760	Financial Charges	2,000
790	Other General Expenses	3,000
799	Shared Office and Services Costs	0
Total GENERAL EXPENDITURES		25,500
830	Partner National Societies	0
831	Other Partners (NGOs, UN, other)	0
Total TRANSFER TO PARTNERS		0
599	Programme and Services Support Recovery	15,102
Total INDIRECT COSTS		15,102
TOTAL BUDGET		247,437



Sudan: Yellow Fever



 Affected States