

Appeal 2008-2009



International Federation
of Red Cross and Red Crescent Societies

Sudan

Appeal No. MAASD001

3 January 2007

This appeal seeks CHF 15,199,000 (USD 13,595,000 or EUR 9,212,000) to fund programmes to be implemented in 2008 and 2009.

In a world of global challenges, continued poverty, inequity, and increasing vulnerability to disasters and disease, the International Federation with its global network, works to accomplish its Global Agenda, partnering with local community and civil society to prevent and alleviate human suffering from disasters, diseases and public health emergencies.



Sudanese Red Crescent Society volunteers build shelter in Gezira state. International Federation/FACT.

Current context

Marked by high insecurity, widespread poverty and recurrent natural disasters, Sudan with a population of 36 million people, ranks as number 141 out of 177 countries and territories on the 2006 Human Development Index. For the past fifty years, Sudan has suffered internal conflict. In the western region of Darfur, 2 million people¹ (one third of the population) have been displaced by the conflict that broke out in 2003. Meanwhile, South Sudan is struggling to rebuild and recover from more than two decades of civil war which left 2 million people dead, 4 million displaced and more than 600,000 living as refugees outside the country.

Sudan is a disaster prone country, with one emergency succeeding another. During the last five years, the SRCS has been engaged in disaster response actions for floods (almost annually), meningitis, cholera, drought, yellow fever, explosion, refugees and returnees. About 17 percent of Sudanese children under the age of five are underweight. Health care spending is the lowest in sub Saharan Africa at USD14 (CHF 17) per capita, per annum².

The SRCS will continue reviewing disaster management plans and policies, reinforcing national and branch based disaster response teams and conducting vulnerability and capacity assessment (VCA) in selected high-risk areas. In southern Sudan, the National Community Health Volunteer Programme (NCHVP) is expected to concentrate on hygiene promotion and water/sanitation. The decentralized system implemented by the SRCS requires strong state branches covering all states and a guiding and supportive Head office as a competent core of the Society. To achieve this, focus will be on establishing new branches in the South and strengthening existing branches in need of support.

¹ World Disasters Report (2006); focus on neglected crises, pg.30

² Source: Human Development Report (2006)

Programme summary

The Transitional Programme for Sudan is a continuation of already initiated efforts to meet humanitarian challenges in the country through the Transitional appeal 2006-2007. It seeks to address the following programmes in line with the Global agenda goals: Disaster Management, Health and Care, Capacity Development and Humanitarian Principles and Values. Targeting an estimated population of seven million (almost 20 percent of the total population), some six million will be reached through the NCHVP. Approximately 100,000 people will be assisted through the returnee's assistance project.

Disaster Management

The SRCS plans to embark on disaster preparedness through the DM policy and planning development. Having the capacity to mobilize emergency response in most parts of the country, its disaster response plan will focus mainly on the returnees' assistance programme.

The main expected outcomes of the programme are to increase SRCS capacity to respond to floods, returnees and health epidemics at national and local levels, increase resilience of vulnerable returnees to environmental risks through provision of basic non-food items and improve the health situation of returnees and host communities.

Health and Care

The National Community Health Volunteer Programme (NCHVP) is a comprehensive 3-5 year community based approach to managing community based first aid (CBFA), communicable disease prevention and surveillance, public health in emergencies, HIV/AIDS, hygiene, water and sanitation and blood donor recruitment. It is based on a substantial number of locally recruited and trained volunteers. The SRCS, through the NCHVP, plans to increase awareness on HIV and AIDS, increase SRCS capacity to scale up HIV awareness and prevention activities, reduce vulnerability of communities to water related diseases, reduce disease morbidity due to malaria in the targeted communities, increase routine immunization coverage of children under 5 years and pregnant women and reduce morbidity and mortality from public health emergencies through timely and adequate response. In southern Sudan, the NCHVP is expected to concentrate on hygiene promotion and water/sanitation. The sustainability of the NCHVP will be closely linked to the transfer of capacity to beneficiary groups and local communities by the volunteer teams.

Capacity Development

Communication is one of the main challenges faced by the SRCS as the country is vast and roads are in poor condition. To strengthen the programming capacity of the Society, the Federation has seconded a Programme Manager to the SRCS with an overall responsibility for programme planning. This appeal therefore focuses on strengthening governance and management and branch/headquarters development.

It is expected that the following outcomes will be realized by the end of 2009:

- Increased presence through a countrywide network of branches appropriately resourced (with personnel, volunteers, finance and office equipment);

- Increased service delivery by SRCS to the most vulnerable populations;

- Strengthened relationship between SRCS governance and management;

- SRCS management systems are strengthened at headquarters and branch levels.

Principles and Values

The SRCS recruits staff and volunteers from all sectors of the community and strives to maintain a balance with regards to place of origin, religious belief and age. The SRCS also strives to maintain a gender balanced composition of its volunteers.

The SRCS strives to put the Fundamental Principles of the Red Cross and Red Crescent and Humanitarian Values in practice. The National Society also plans to engage in public relations and promote its services.

The main results expected from the implementation of the programme include:

- Increased respect of the RC/RC emblem throughout Sudan;
- Strengthened SRCS information and public relations/communications capacity;
- Increased public understanding of the SRCS role, mandate and activities;
- Reduced stigma and discrimination towards people living with HIV/AIDS.

For more information please go to: [detailed 2008 to 2009 National Society support plan](#), [planning and resource summary matrix](#), and the [budget summary](#)

Needs

Programmes	2008 budget (CHF)	2009 budget (CHF)	Total budget (CHF)
Disaster Management	1,617,103	1,850,265	3,467,368
Health and Care	3,849,880	3,756,562	7,606,442
Capacity Development	1,039,169	1,079,761	2,118,930
Principles and Values	278,075	213,831	491,906
Coordination	744,385	770,053	1,514,438
Total	7,528,612	7,670,472	15,199,084

Working in partnership

Collaboration between SRCS, the Federation, partner societies in Sudan and external actors is geared towards learning, updating experience, information sharing and exchange of ideas at different levels. Supported by the Federation, the National Society is working closely with other partners and stakeholders in the country: Partner National Societies, ICRC, the Sudanese Government and UN agencies.

The SRCS currently manages a number of bilateral partnerships with the following Partner National Societies: Saudi Red Crescent (Primary Health Care and Water in North and South Darfur) Iranian Red Crescent (health care in West Darfur), Spanish Red Cross (emergency intervention projects in water and sanitation, and capacity building in North, South and West Darfur, Blue Nile); Danish Red Cross (Water/Sanitation and health in Bahr el Ghazal); German Red Cross (emergency health activities for IDPs in Khartoum State and WatSan and health activities in Sennar, White Nile, Bahr el Ghazal states); Netherlands Red Cross (primary health care in Khartoum, North Kordofan, Kassala and Central Equatoria states as well as HIV and AIDS projects in Khartoum and Kassala); Norwegian Red Cross (Water/Sanitation, agriculture and capacity building in Red Sea state) and a consortium of the Norwegian and Swedish Red Cross societies in Yirol, Lakes state.

At community level, SRCS is committed to improving communities' ownership and management of health services through the NCHVP. It works closely with community health committees to effectively manage and plan health activities. Establishing and strengthening Operational Alliance for the NCHVP will contribute to programme sustainability and ensure successful implementation of the programme.

How we work

All International Federation assistance seeks to adhere to the [Code of Conduct](#) and is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering quality and accountable assistance to the most vulnerable. For support to or for further information concerning Federation programmes or operations in this or other countries, or for a full description of the national society profile, please access the Federation's website at <http://www.ifrc.org>

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

Global Agenda Goals:

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

Contact information

For further information, contact:

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