

# DREF operation final report



## Sudan: Acute Watery Diarrhoea Epidemic

DREF operation n° MDRSD005

GLIDE n° EP-2008-000086-SDN

17 March 2009

The International Federation's 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 Red Crescent response to emergencies. 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.

**Summary:** CHF 249,344 (**USD 239,744** or **EUR 154,387**) was allocated from the Federation's Disaster Relief Emergency Fund (DREF) on 11 June 2008, to support the Sudanese Red Crescent Society (SRCS) in delivering assistance to some 160,000 beneficiaries, in response to an Acute Watery Diarrhoea (AWD) epidemic in Central and Eastern Equatoria, Southern Sudan.

A total of 100 Sudanese Red Crescent Society volunteers were trained on AWD prevention and control.

The volunteers consequently reached the target population with safe household water treatment, health education and hygiene promotion activities.



**SRCS volunteers carrying out water chlorination at a river bank in Juba**

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## The situation

Southern Sudan has been experiencing Acute Watery Diarrhoea outbreaks almost yearly. Epidemics of AWD and/or cholera occurred in 2006 and 2007 as well. The latest outbreak of Acute Watery Diarrhoea affected Central and Eastern Equatoria states. By the end of the epidemic, a total of 1,175 cases were reported with 33 deaths, giving a case fatality rate of 2.8 percent.

In February 2008, the Ministry of Health (MoH) first confirmed outbreak of Acute Watery Diarrhoea in Owinj Kibul and Magwi Payams in Magwi County in Eastern Equatoria State which up surged again in June 2008. In May 2008, the Ministry of Health reported a sharp increase of suspected cases in Juba, the affected areas mainly being Nyakuron, Jebel Kujur, Customs Market all of them in Munuki Payam, as well as Kator (central) and Lologo in Kator Payam. The common features about these outbreaks are that they mainly occur in

households whose main water sources are open dug wells, unprotected springs and rivers. Furthermore, the household latrine coverage was as low as one percent.

The SRCS with support from the Federation, Partner National Societies and national authorities, participated in the response to the AWD epidemic for three months duration. Their actions focussed on health education and hygiene promotion, chlorination of water at the water collection points, safe household water treatment and clean up campaigns for garbage in public places and residential areas. The communities at risk were provided with buckets to use for safe water storage and washing soap.

## Red Cross and Red Crescent action

Sudanese Red Crescent Society as a member of the Epidemic Task Force participated in several meetings organized by the Government of South Sudan's MoH, State MoH and partners World Health Organization (WHO), Médecins Sans Frontières (MSF), United Nations and GOAL to draw an effective plan of action for response to the AWD outbreak and agreed on priority activities.

Furthermore, the National Society also participated in meetings with MoH to assess the needs for adequately responding to the AWD epidemic outbreak in the two states, Central and Eastern Equatoria. The Ministry of Health together with other partners working in the health sector like MSF conducted treatment of cases in all the affected states.

The SRCS volunteers in collaboration with MoH carried out health education, hygiene promotion and community awareness creation on Acute Watery Diarrhoea and its prevention and control. Furthermore, home visits were made to increase reach and also demonstrate safe household water treatment with water maker.

A total of 100 volunteers were trained to carry out the planned intervention activities. The SRCS volunteers made home visits to a total of 23,948 households. An estimated number of 160,000 persons were reached with key messages both during home visits and talks in public places. A total of 574,955 water maker sachets were distributed for household water treatment.

The Sudanese Red Crescent Society interventions were complimentary to MoH and other partners' efforts in the control of this epidemic.

## Progress towards objectives

**Goal: To contribute to the control of the Acute Watery Diarrhoea epidemic outbreak in Central and Eastern Equatoria States and prevent its spread to other areas.**

### Water, sanitation and hygiene promotion

**Objective 1: To improve access to safe water at the household level in the affected areas**

#### Achievements

The Sudanese Red Crescent Society mobilized and trained 100 active volunteers (70 in Juba town and 30 in Torit town) on social mobilization, methodologies for imparting AWD key messages educating communities on health, hygiene, cholera prevention and chlorination of water containers at water collection points, identification of suspected cholera cases and referring them to health centres. Although the AWD messages were printed in English, they were communicated in the local Arabic understandable by all residents in Juba and Torit.

The volunteers carried out hygiene promotion and health education in the affected areas. This was done through home visits as well as public talks. A total 574,955 sachets of water maker, 20,026 pieces of soap and 14,950 plastic water buckets were distributed to the beneficiaries.

The SRCS deployed 15 volunteers at three water collection points along the River Nile in Juba for chlorination of water. Most citizens living along the river collect water for domestic consumption directly from the contaminated river, which manifests a potential health risk. The volunteers would chlorinate water immediately after collection, as a demonstration and also give instructions to the person collecting water at the same time.

**Objective 2: To increase awareness on good hygiene practices and sanitation in the affected communities.**

## Achievements

The Sudanese Red Crescent Society volunteers distributed to the community key messages on AWD and its prevention and control in the affected areas. The volunteers also carried out hygiene education and promotion in the targeted areas. This was done through home visits as well as public talks. During house to house visits, hygiene promotion materials were distributed.

In order to address the problem of poor garbage disposal in the affected areas, especially in the urban residential areas and market places, SRCS volunteers organized clean up campaigns with involvement of the community. In Juba and Torit the campaign involved hiring of trucks and volunteers cleaning up and disposing of garbage to designated dumping areas outside the towns. As a result of the hygiene promotion and sanitation awareness created, many families requested for digging tools so that they can embark on the making of their own household pit latrines.

The improved hygiene practices and environmental sanitation as a result of hygiene promotion and clean up campaigns contributed to the control of the epidemic. It is envisaged that if the community continues with good hygiene practices, there will be low diarrhoeal disease incidences in these areas. However, access to basic sanitation facilities needs to be improved.

## Emergency health

**Objective 1: To increase community awareness on AWD and/or cholera and its prevention and control in Central and Eastern Equatoria States, Southern Sudan.**

## Achievements

The Sudanese Red Crescent Society volunteers carried out health education on AWD prevention and control in the affected communities. This was done through public talks and during home visits. Materials with key AWD messages were distributed in the community. A total of 23,948 households were visited by the volunteers. An estimated number of 160,000 persons were reached with key messages both during home visits and during talks in public places. The increased awareness on AWD contributed to the control of the epidemic. The increased community awareness made it possible for this community to report early any suspected case in future.

## Challenges

- Low access to sanitation facilities in the affected areas prompted some community members to request for support with digging tools.
- Logistical challenges to access the affected areas were experienced especially in Eastern Equatoria, occasioned by continued rainfall at the time.
- It was difficult to communicate with the deaf when passing on key messages.

## Conclusion

### Lessons learned

The health education and hygiene promotion contributed to the control of the epidemic in these areas. There is need to implement water and sanitation programme as a developmental activity in the affected state so as to prevent and mitigate the risk of repeated outbreaks of AWD in the areas and its spread. Because of poor access to safe water and adequate sanitation there is a potential risk of AWD outbreaks recurring in these areas especially in the rainy season.

The operation did portray a positive image of the National Society as the majority of the people highly appreciated the efforts of the SRCS volunteers in contributing to control of the AWD epidemic. However, there is still great need for dissemination on the Red Cross / Red Crescent Movement to the communities. The trained volunteers have the ability to continue with hygiene promotion and health education on AWD prevention.

## How we work

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

<p>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".</p>	<p><b>Global Agenda Goals:</b></p> <ul style="list-style-type: none"> <li>• Reduce the numbers of deaths, injuries and impact from disasters.</li> <li>• Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.</li> <li>• Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.</li> <li>• Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.</li> </ul>
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## Contact information

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

- **In Sudan:** Sudanese Red Crescent Society, Osman Gaffar Abdalla, Secretary General, Khartoum phone: +24983784889; email: [srcs\\_sg@yahoo.com](mailto:srcs_sg@yahoo.com)
- **In Sudan:** Keti Khurtsia, Ag. Country Representative, Country Representation, Khartoum. phone: +249183771033; Fax: +249183770484; email: [keti.khurtsia@ifrc.org](mailto:keti.khurtsia@ifrc.org)
- **In Kenya:** Dr. Asha Mohammed, Head of Eastern Africa Zone, International Federation, Nairobi, email: [asha.mohammed@ifrc.org](mailto:asha.mohammed@ifrc.org); Telephone: +254.20.283.51.24, Fax: +254.20.271.27.77
- **In Geneva:** John Roche, Operations Coordinator for Africa Region; phone: +41.22.730.4527; fax: +41 22 730 0395; email: [john.roche@ifrc.org](mailto:john.roche@ifrc.org)

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# International Federation of Red Cross and Red Crescent Societies

MDRSD005 - Sudan - Cholera

Final Financial Report

Selected Parameters	
Reporting Timeframe	2008/1-2009/2
Budget Timeframe	2008/1-2008/12
Appeal	MDRSD005
Budget	APPEAL

All figures are in Swiss Francs (CHF)

## I. Consolidated Response to Appeal

	Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL
<b>A. Budget</b>		249,345				249,345
<b>B. Opening Balance</b>		0				0
<b>Income</b>						
<u>Other Income</u>						
<i>Voluntary Income</i>		249,344				249,344
<b>C5. Other Income</b>		249,344				249,344
<b>C. Total Income = SUM(C1..C5)</b>		249,344				249,344
<b>D. Total Funding = B + C</b>		249,344				249,344
<b>Appeal Coverage</b>		100%				100%

## II. Balance of Funds

	Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL
<b>B. Opening Balance</b>		0				0
<b>C. Income</b>		249,344				249,344
<b>E. Expenditure</b>		-249,344				-249,344
<b>F. Closing Balance = (B + C + E)</b>		0				0

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**III. Budget Analysis / Breakdown of Expenditure**

Account Groups	Budget	Expenditure					TOTAL	Variance
		Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination		
A							B	A - B
<b>BUDGET (C)</b>		<b>249,345</b>					<b>249,345</b>	
<b>Supplies</b>								
Water & Sanitation	205,587		123,232				123,232	82,356
Utensils & Tools			43,615				43,615	-43,615
Other Supplies & Services	7,650							7,650
<b>Total Supplies</b>	<b>213,237</b>		<b>166,847</b>				<b>166,847</b>	<b>46,390</b>
<b>Transport &amp; Storage</b>								
Storage			7,150				7,150	-7,150
Distribution & Monitoring			4,203				4,203	-4,203
Transport & Vehicle Costs	5,355		21,073				21,073	-15,718
<b>Total Transport &amp; Storage</b>	<b>5,355</b>		<b>32,427</b>				<b>32,427</b>	<b>-27,072</b>
<b>Personnel</b>								
National Staff			6,207				6,207	-6,207
National Society Staff	1,132		20,469				20,469	-19,337
<b>Total Personnel</b>	<b>1,132</b>		<b>26,675</b>				<b>26,675</b>	<b>-25,543</b>
<b>Workshops &amp; Training</b>								
Workshops & Training	2,193							2,193
<b>Total Workshops &amp; Training</b>	<b>2,193</b>							<b>2,193</b>
<b>General Expenditure</b>								
Information & Public Relation	5,814		6,828				6,828	-1,014
Office Costs			324				324	-324
Communications	306		51				51	255
Financial Charges			-521				-521	521
Other General Expenses	5,100		506				506	4,594
<b>Total General Expenditure</b>	<b>11,220</b>		<b>7,187</b>				<b>7,187</b>	<b>4,033</b>
<b>Programme Support</b>								
Program Support	16,207		16,207				16,207	0
<b>Total Programme Support</b>	<b>16,207</b>		<b>16,207</b>				<b>16,207</b>	<b>0</b>
<b>TOTAL EXPENDITURE (D)</b>	<b>249,345</b>		<b>249,344</b>				<b>249,344</b>	<b>1</b>
<b>VARIANCE (C - D)</b>			<b>1</b>				<b>1</b>	

**International Federation of Red Cross and Red Crescent Societies**

MDRSD005 - Sudan - Cholera

Selected Parameters	
Reporting Timeframe	2008/1-2009/2
Budget Timeframe	2008/1-2008/12
Appeal	MDRSD005
Budget	APPEAL

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**IV. Project Details**

Project	Name	Opening Balance	Income	Expenditure	Closing Balance	Budget	Variance
		A	B	C	A + B + C	D	D - C
<b>Goal 2: Health and Care</b>							
PSD027	Sudan AWD/Cholera	0	249,344	-249,344	0	249,345	1
<b>Sub-Total Goal 2: Health and Care</b>		<b>0</b>	<b>249,344</b>	<b>-249,344</b>	<b>0</b>	<b>249,345</b>	<b>1</b>
<b>Total</b>	<b>Sudan - Cholera</b>	<b>0</b>	<b>249,344</b>	<b>-249,344</b>	<b>0</b>	<b>249,345</b>	<b>1</b>