

ANNUAL REPORT



International Federation of Red Cross and Red Crescent Societies
Fédération internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

SUDAN

July, 2001

This Annual Report is intended for reporting on the Federation's Annual Appeals only.

Appeal No. 01.12/2000

Appeal Target: CHF 4,560,000

Objectives, Achievements and Constraints

Disaster Response

The plight of Ethiopian and Eritrean refugees in the east and displaced people in Kassala, Kosti and greater Khartoum were the focus in 2000, with special attention on displaced women in five states.

The ongoing *Women in Development Programme* (WID) is intended to minimise the vulnerability of displaced and refugee women through promoting their self-reliance. Special emphasis is placed upon women headed households with a large number of dependants (7-12 children).

The overall objective with the ongoing *Khartoum Water and Sanitation project* is to increase and secure access to potable water and to provide hygiene promotion for displaced persons in the two IDP camps of El Salam and Wad El Bashir near Khartoum. Hence, training programmes are directed to the target groups to provide them with needy skills and knowledge in the areas of health, sanitation and hygiene. It is the intention that in the future, the water distribution scheme should be handed over to the local community. The project is a joint venture involving the Sudan Red Crescent Society (SRCS), the International Federation, and CARE International/US AID.

The SRCS state branches of Kassala and Gedaref, in co-operation with the Federation, UNHCR and COR, have been implementing the *refugee health programme* since 1993 and 1995 respectively. The beneficiaries of the programme are some 42,000 refugees of Eritrean origin who have been settled in the area since for some 30 years. In addition, beneficiaries include an estimated 30,000 Sudanese nationals, living in villages surrounding refugee settlements.

In the Wad Sherefei camp in Kassala these services are provided through four large outpatient clinics and one hospital with a capacity of 60 patients. As for the Gedaref region, the health services are provided through outpatient clinics in the five settlements of Hawata, Abu Rakhham, Wad Awad, Tenedba and Mafaza.

As a result of civil conflicts along the Sudanese eastern border with Eritrea, more than 27,000 persons in Kassala state were displaced in January 1998. Against this background, assessment/evaluation

missions involving the ICRC, the Federation and SRCS were carried out. Out of seven identified camps, it was decided that the SRCS (with Federation support) should take the responsibility for the *health services of the camps of Galsa (population 7,552) and Fedayeeb (population 6,024)*. However, people are also reported to be coming from settled villages around these camps in order to access the health services, so the clinics may be actually servicing up to as many as 38,000 people. The implementation of the Kassala Health project started as planned on 1st April 2000 with financial support from ECHO, and the new health clinics were fully operational by July.

The majority of displaced people in camps and squatter suburbs of *Kosti* town come from war and drought affected areas of southern and western Sudan already in the 1980s. Insecurity in the Upper Nile and Unity state did not improve which has prevented resettlement and caused further displacement during the period.

Objective 1: Raise targeted women's awareness of health problems and social development through promotion of their self-reliance.

Achievements

Four literacy classes were opened in El Gedaref and Western Kordofan states respectively. Some 395 women benefited from the classes, which were combined with weekly lectures in health education and home visits. A 10 day health education work shop for 20 participants was held in River Nile State.

Constraints

Lack of funds and community attitudes towards women's education.

Objective 2: Improve the income generating skills of the most vulnerable women groups, especially those who are heading households

Achievements

No achievement regarding the activities of handicraft, traditional handloom, sewing or kindergartens took place in the reporting year.

Constraints

Lack of funds.

Objective 3: Encourage women to participate in the economy

Achievements

Income generating activities took place in 3 of the targeted states. In Sinnar State, 40 women benefited from fish processing activities. 20 of these women were given loans to work in fish processing. 75 goats were given on loan to 15 women; 8 in Gedaref state and 7 in Western Kordofan state. In River Nile State, the state office funded two workshops for 50 women participating in food preservation.

Constraints

Lack of funds. The sustainability of the activities in the targeted areas is also hampered by limited means of transportation, communication and lack of further training.

Objective 4: Foster social relations among the participating women in order to promote a family atmosphere

Achievements

There were no achievements regarding the creation of small scale revolving funds projects.

Constraints

Lack of funds.

Objective 5: To increase and secure access to sufficient quantities of potable water for approximately 126,000 displaced people in El Salam and Wad El Bashir camps

Achievements

The availability of potable water decreased in both camps during the period under review. In the Wad El-Bashir camp, a daily average of 16,5 Lt/capita (432,890 Lt in total, 83% of target) was secured. The corresponding figures for the El Salam camp are 9,5 Lt/capita (950,000 Lt in total, 60% of target). The completion of a third bore hole and the extension of the pipe system in the El-Salam camp is expected to increase the water accessibility.

A consultant engaged by CARE arranged a workshop for the SRCS, Federation and CARE. As a result, it was agreed that the SRCS' operational role should be strengthened and that CARE and the Federation should be responsible for monitoring and technical and financial support. Responsibility for obtaining spare parts and fuel will be shifted to SRCS. Procurement and contracting will follow in agreed stages. Sufficient time will be given to allow the SCRS to become familiar with CARE/USAid procedures.

Constraints

Frequent breakdown of water yards and the distribution pipe system. Delays in providing the technical and material maintenance support required with significant amounts of standing water as a result, due to old and poor equipment, cumbersome procurement procedures and organizational constraints.

Objective 6: Provide hygiene promotion to beneficiaries, well co-ordinated with other hygiene and health promotion delivered to the camp population.

Achievements

Throughout the year regular water samples were taken and tested from the bore holes of the two camps where the water was found to be clean and fit for human consumption at all times. Similar tests were carried out in a selected number of households with much more disappointing results. However, as a result of an intensified hygiene education campaign integral to the project, only 51% of the 40 samples taken in El-Salam during the last six months of the year were contaminated, compared to 57% of the 60 samples taken between January and July. In Wad El-Bashir, the result was invariable throughout the year and out of the 40 samples taken between January and June and July and December, 49% were contaminated.

Constraints

Lack of proper water storage facilities in the households has contributed to the contamination of the water.

Objective 7: Improve community engagement in the care and maintenance of the water supply system.

Achievements

In Wad El-Bashir and El-Salam the establishment of water committees has been an important first step in the process of involving the community in the management of the water supply infrastructures. These committees were trained and are now up and running. Initially, they were encouraged to take care of their own standpipes as well as to assist in the draining of standing water around the water points.

Constraints

Water committees are not always recognised by the IDP population.

Objective 8: To introduce a cost recovery mechanism in close co-operation with the local community and ensure that the relevant government authorities have a positive impact in enhancing their profile in the area.

Achievements

A steering committee made up of governmental water related bodies, the SRCS and CARE was responsible for the establishment of water committees and the introduction of a cost sharing system. The committee has had contacts with authorities as well as representatives of the IDP population.

Constraints

It is difficult to agree on a timetable for establishing the collection of fees. There remains strong resistance to start charging when all services in the past always have been free of charge.

Objective 9: To decrease morbidity and mortality rates in the refugee camps

Achievements

The three major diseases in the settlements of Gedaref were Malaria (22,091 cases), acute respiratory infections [ARI] with TB (11,449 cases), and diarrhoeal diseases (5,732 cases). 49 deaths occurred during the reporting year, the majority due to malaria and diarrhoeal diseases. In all, 504 inpatients were admitted in the reporting year. The five clinics at Gedaref also provided ante- and postnatal care for a total of 388 women. About 12,860 of the treated cases were non-resident.

At Wad Sherifei camp, an average of 7,500-8,000 patients (including camp and non-camp residents) were treated every month. The major causes of morbidity are the same as at Gedaref. The mortality rate at Wad Sherefei is about 0.24%.

Constraints

As there are no reports available of morbidity or mortality figures from previous years, it is difficult to accurately establish to what extent morbidity and mortality has decreased in the camps. The analysis of statistics is made further complicated by the fact that there is little consistency in the reporting format throughout the year.

Objective 10: To rehabilitate malnourished and disabled cases

Achievements

For the supplementary and therapeutic feeding programmes, special emphasis has been placed upon children under 5 with weight/height 60-80% and pregnant and lactating women. A total of up to 2,000 people/month benefited from the supplementary feeding programme at the Wad Sherefei camp in the first six months. At Gedaref, the same programme reached about 850 people/month. With regards to the therapeutic feeding programme, an average of 77 people/month benefited from this service in Wad Sherefei camp whereas comparative figures for Gedaref are 52 people/month.

Constraints

The supplementary feeding programme was closed down in Wad Sherefei in July and not restarted until October due to the absence of CSB.

Objective 11: To refer severely ill cases to towns nearby

Achievements

About 15 patients/month were referred to the hospitals of Kassala from the Wad Sherifei and the Gedaref camps alike. Most of the cases were referred for surgical operations.

Constraints

Despite the vast project area, the only vehicle available for hospital referrals is one single land cruiser pick up, which is used as an ambulance.

Objective 12: To promote public health awareness among the refugee population*Achievements*

Regular health activities have been carried out in the form of lectures and home visits on how to control malaria, diarrhoea, TB, ARI, dehydration, STD's and how to improve general sanitation.

Objective 13: To promote the living conditions of the population in the Gulsa and Fedayeeb IDP camps and the surroundings*Achievements*

The SRCS has concentrated on the urgent need of construction of new shelters for the most vulnerable in the camps. Priority was given to women headed households (estimated at 20%), elderly (5%) and severe physical and mental disabled (1%), all with no or very limited support by extended families. 260 shelters were built at Fedayeeb and 140 at Gulsa.

In addition, the SRCS Health Visitors have put efforts into sanitation and waste removal. Once a week, the community is mobilised with the collection and burning of waste.

Increased personal protection against malaria has been attended, with the distribution to targeted people, mainly pregnant women and children, of 1500 mosquito nets.

Constraints

External factors including forced evacuation due to conflict and security issues impeded plans of action and progress in improving the general living conditions of the IDPs.

Objective 14: To improve the capacity of the health centres*Achievements*

Two health clinics have been built in the camps of Gulsa and Fedayeeb. The clinics have been constructed using local materials in order to allow for closer identification when it comes to issues such as environmental hygiene and home/community health practices for the beneficiaries. It is anticipated that with time, the beneficiaries will replicate the safe practices in the clinics in their own homes.

Both clinics are well attended, but Gulsa had twice as many patients as Fedayeeb (15,310 as opposed to 8,726 between July-Dec.). This has been attributed to the fact that many people outside the catchment area are accessing Gulsa and that the camp is close to the refugees.

Analysis of statistics available indicates that Fedayeeb has seen a significant decrease in malaria morbidity and in Gulsa 19,7% of all consultations in the last six months regarded ARI as opposed to 48,1% prior to the completion of the clinics. There has also been significant progress in the combat against diarrhoeal diseases where morbidity has decreased by 30 % in Fedayeeb and 70 % in Gulsa.

STD's are reported more from Fedayeeb camp where there appears to be more openness amongst the beneficiaries in discussing this topic. This is a positive trend as the SRCS are beginning to "break the silence" around HIV/AIDS and plans for increased efforts in this area in the future.

Through the Health Visitors and growth monitoring sections of the clinics and with the support of WFP, malnutrition rates have remained stable in both camps.

Vaccination coverage has increased and 58% of the children at Gulsa and 86% of the children at Fedayeeb are now fully covered.

The reproductive health services have worked very well at Fedayeeb where by the end of the reporting year, almost every pregnant woman was registered and attending at least two ante-natal services and being followed up post-natally.

Constraints

Unlike Fedayeeb, Gulsa has not seen a decrease in malaria morbidity. Furthermore, because of lack of laboratory technicians, Gulsa has had to rely on clinical diagnosis for malaria morbidity rates and subsequently the data available show suspected malaria only.

The activities of dressings and injections could have been even more successful, were it not for the shortage of equipment. Likewise, the clinics have reported that they lack drugs, but there are some ongoing problems with logistics and distribution methods which will require some future training plans before such a conclusion can be sustained.

There has been a problem with mothers not having their RTHC when vaccinating their children, hence causing verification problems. Subsequently, the child vaccination coverage is probably higher than statistics show.

Objective 15: To raise the awareness of the communities through health education on sanitary conditions and control of communicable diseases

Achievements

The Health Visitors carried out a total of 448 regular health education sessions, reaching 4,586 beneficiaries, on the topics of: malaria, diarrhoeal diseases, breast feeding, ARI, harmful practices, vaccination, and sanitation. In addition, 13,897 home visits were carried out.

Constraints

Not all training activities could go ahead as planned, mainly due to resources having to be diverted due to internal strife and new arrivals of refugees, but also because of changes in MoH policy with regards to midwives being trained instead of TBA's.

Because of cultural issues, it was difficult to recruit and employ Health Visitors from the villages. Measurements have been taken to open up the role of women at Fedayeeb, starting with IGA.

Lack of educational materials is a problem, but this has been addressed with the development of a new health education video.

Objective 16: To raise the awareness of the IDP communities in Kosti through health education on sanitary conditions and control of communicable diseases

Achievements

First Aid Courses	1,660 trained (450 women)	1,635 persons (950 women) trained in 34 workshops (Kadogli, Ingaz & Goz). 98%
Primary Health Care training	1,300 trained (950 women)	1,428 persons (900 women) trained in 31 workshops (Kadogli, Ingaz, Goz and Dangkuc). 110%

Home Nursing	220 trained (140 women)	247 persons (125 women) trained in 8 workshops in Kadogli, Ingaz. 112%
Public sessions on Health Education	3,420 persons participating	5,390 addressed in 18 sessions conducted in Goz, Ingaz, Kadogli & Dangkuc. 158%

Objective 17: To improve the sanitation by construction of family pit latrines

Camp	Targeted	Digging completed	Female	Male	Latrines completed
Kadogli	400	400	94	306	400
Ingaz	200	200	33	167	171
Goz essalam	480	243	75	168	183
Dang Kuc	50	25	-	25	25
Communities	16	16			16
Total	1130	884	202	666	795

Total of slabs produced = 1,736 PCs

Constraints

The late start of the pit latrine construction is due to UNICEF/WES financial constraints and subsequent considerable delay in providing construction material. However, the construction started early November and was given top priority.

The distribution of food items was estimated to 740 Mt, built on early information from WFP. However, WFP decided to involve other NGOs in some of the distributions, limiting the quantity to be distributed by the SRCS (through FFW) to some 255 Mt, of which almost 200 Mt was finally provided. This reduced the income with almost USD 3,000. Measures were taken to reduce the expense budget – mainly volunteer incentives and transportation – without severely hampering the final phase of the project. The SRCS Kosti also added own funds to cover unavoidable expenses outside the funds provided by USAID and WFP.

Objective 18: To improve infrastructure by rehabilitating health facilities

Achievements

Rehabilitation of Health facilities	3 Health clinics	3 were constructed (Goz, Dankouc) or rehabilitated (Kadogli). 100%
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Disaster Preparedness

Sudan's internal conflict plagues the country with disaster and mass population displacement. Disaster preparedness at strategic SRCS branches is meant to enhance the capacities of the targeted branches' ability to respond in the most timely, efficient manner to emergency situations and disasters. The strategic branches selected for the project are all located in the transitional sector between the northern and southern part of the country and hence hosting or expecting to receive a large number of IDPs.

Objective 1: To enable the target branches in preparing for and responding to emergency situations and disasters in a timely and effective manner.

Achievements

Regular training programs on assessment and reporting techniques have been carried out in order to highlight the specific needs of the targeted branches.

Constraints

Special training programs were delayed due to limited planning capacity at HQ and funds covering only three of the strategic branches.

Objective 2: To equip the SRCS with the technical capacity for disaster management and response as well as necessary materials, logistics and communication.

Achievements

Available funds have been distributed to meet the most urgent needs in the targeted branches. White Nile constructed office using funds of their own.

Branch	Office	Office furniture	Vehicle	HF radio	Computer
S. Kordofan	2001	2001	2001		
W. Kordofan	Yes	Yes	Yes	Yes	Yes
S. Darfur	Yes				
W. Darfur			Yes		
White Nile		Yes	Yes		Yes
Blue Nile					

Constraints

Difficulties in keeping office construction costs within budget limits. As a result, funds were not always adequate to cover planned capacity building elements.

Objective 3: The State Branch will work to become self-reliant within three years.

Achievements

The branches in W. Kordofan and S. Darfur have been working on plans for strengthening their Income Generating Activities

Constraints

Cash support to the branches have not been released in full, awaiting concrete and evaluated plans from the branches.

Humanitarian Values

The SRCS Elderly Programme is an integrated social development program that started in 1994 in the shanty area of Carton Barona in El Haj Yousif, Khartoum North. Its overall objective is to highlight the problems and needs of elderly people (+ 60) and to enhance their role in community development.

In December 1998 a project evaluation report found that the ultimate goals of the programme had been reached. Subsequently, the SRCS decided to transfer and expand the Carton Barona techniques

to other areas in the country. In the reporting year, an extensive study has therefore been carried out in order to produce base line data for project sites in five states: West Darfur, West Kordofan, Blue Nile, Kassala and Khartoum.

Objective 1: To obtain information about the needs of elderly aiming at their social development and increased role in the community

Achievements

Five needs assessments were carried out using the PRA approach. The five assessments were finalised by March and followed by a one day workshop where the findings were discussed and the continuation were given detailed planning. Five training courses were conducted for 125 people in the five targeted states. Five final needs assessment reports were received from the consultant.

Constraints

Due to a lack of funds the assessments were substantially delayed.

Objective 2: To prepare a Plan of Action with the elderly indicating areas for support

Achievements

A three days training course was carried out at each new project site. Great emphasis was placed upon establishing what participatory methodologies should be used in order for the messages of the training course to be easily conveyed to the participants. 125 volunteers, elderly people, community leaders and the SRCS staff took part in the training course which evolved around discussions of the recommendations of the Needs Assessment Survey Report and brain storming activities and inquiries by participants.

In the aftermath of this training course, five workshops for formulating project plans were conducted. As a result, a final work plan with small scale development activities were submitted from each new project site.

Constraints

The determined activities of the action plan are based upon the needs assessment carried out in the reporting year. However, substantial delays in funding might render some activities less applicable if too long a time passes between the needs assessment and the project implementation.

Health and Care

The overall objective of the *Home Based Child Health Care project* is to reduce human suffering in terms of morbidity and mortality among infants and children under five by raising women's awareness of their children's health situation as well as their capacities to care for them in terms of treatment and /or visits to a health clinic.

The project is targeting the most vulnerable of women, notably women-headed households with a large number of dependents. At present, the project is active in 4 states of the Sudan: Khartoum state, River Nile, Kassala and Gezira.

In general, *reproductive health* is very poor among women in the displaced camps. The maternal mortality rate is high, 556/100,000. Hence, the overall objective of this project is to reduce suffering among the women in the displaced camps by improving their awareness and reproductive health characteristics. At present, the project is being implemented in four clinics in Khartoum state and two clinics in Gezira state.

With an average prevalence rate of 38 %, *malaria* is still the main cause of outpatient visits to the health facilities and it is reported as a major cause of death among different population groups. The

transmission of malaria is affected not only by the physical conditions of the country but also by socio-economic factors such as nutritional status, housing conditions, sleeping habits, educational level and war.

The overall objective of the project is to reduce the malaria morbidity rate to a minimum. In reaching this objective, the SRCS engages itself in both preventive and curative activities and provide vital health services to the needy communities. Great emphasis is placed upon community involvement and the volunteers of the targeted state branches have an important role in the project implementation.

After having been implemented in three IDP camps, Elsalam, Jebal Aulia and Wad El-Bashir, in Khartoum State during a pilot phase the project was evaluated by a joint team from the Federation, the SRCS and the MoH. As a result of this evaluation it was recommended that malaria control activities would continue and expand to other areas. Subsequently, the project as of today also covers IDP camps in Kosti city, 260 kilometres south of Khartoum, and it provides preventive and curative health services for a total of almost 210,000 people.

Objective 1: To produce base line information for planning, monitoring and evaluation purposes.

Achievements

The planned field visits to Kassala, Gezira, River Nile and Khartoum State were postponed. Some initial data collection has nevertheless been carried out in River Nile and Khartoum States.

Constraints

Lack of funds.

Objective 2: To train local SRCS volunteers in training their respective communities in the basics of home based child care.

Achievements

450 training courses for 15,000 volunteers were planned. 209 courses for 5,423 participants have been carried out (approximately 35% of the target). These were funded by the States offices themselves. 4 community training courses for 100 participants were cancelled.

Constraints

Lack of funds.

Objective 3: To develop and produce IEC material with the purpose of increasing community awareness and participation in the project.

Achievements

Educational material, posters and pamphlets have been developed but not printed.

Constraints

Lack of funds.

Objective 4: To upgrade the abilities of health workers in SRCS clinics in the target areas.

Achievements

The four instructor training courses for 100 health workers were not implemented.

Constraints

Lack of funds.

Objective 5: Reduce the suffering from pregnancy related health problems amongst displaced women.

Achievements

The following table summarises the achievement of activities carried out in order to reduce the suffering from pregnancy related health problems amongst displaced women.

Health Activities	No. of beneficiaries	
	Khartoum State Jan - Dec	El Gezira State Jan-June
Ante natal Care	4307	246
New Birth	673	153
Postnatal Care	1147	183
Family Planning services	5296	/
Distribution of oral contraceptives	/	118

Constraints

Due to lack of funds none of the planned health activities during the last six months have been implemented in El Gezira State.

Objective 6: Clarify the importance of and increase the awareness of the community on reproductive health.

Achievements

Almost 20,000 health education sessions have taken place in the reporting year.

Objective 7: Establish a proper health information system

No achievements have been reported due to lack of funds.

Objective 8: To produce baseline data for monitoring and evaluation purposes in the target areas

Achievements

Twice a year the SRCS distribute a survey regarding malaria monitoring to all bodies responsible for clinical services in the project areas. In the Khartoum project area, the malaria prevalence among the patients to the clinics is reported to have decreased from 24.5 % in 1999 to 22.9% in 2000.

Constraints

Some NGOs have initially been reluctant to give away statistics. After having been fully informed about the purpose of the survey there has, however, generally been few problems in receiving the requested information.

Objective 9: To train SRCS volunteers and community in malaria control activities

Achievements

The field officer and the project co-ordinator conducted regular meetings with volunteers and community leaders. In Kosti, a 7 day workshop was conducted together with the local health authorities. 25 SRCS volunteers and 15 community leaders participated in this training session. In Khartoum, 30 volunteers have had 3 weeks of training in the impregnation of mosquito nets.

Constraints

Since only 43.3 % of the budget was covered in October 2000, the planned refresher courses in malaria control activities had to be cancelled.

Objective 10: To develop and produce IEC materials for community awareness and increase participation in the project

Achievements

Throughout the year, a total of 1,800 pamphlets and posters with health education messages were produced and distributed to schools, health centres and public places within the Khartoum camps. 95% of the planned IEC-sessions were realised and health education was received by 114,625 IDPs between January and July and another 113,807 in the last six calendar months.

Further endeavours towards increased community participation in the project was ensured by the continuation of home visits. 19,064 such visits were carried out by the project's volunteers, targeting all community groups so as to increase their awareness in terms of prevention and personal protection against malaria. By the end of the year, an evaluation on the impact of health education in raising community awareness was carried out. The results of the report show that 79% of the target population had been informed of the malaria control message.

Objective 11: To introduce larvicidal activities and house spraying

Achievements

At the beginning of the year a partnership for digging and maintaining drains was signed with CARE International. The water drains were dug during the rainy seasons and CARE provided community volunteers with food for work. Concerning the vector control activities, most of the water pools around the water pumps or the bore holes were sprayed regularly with abate larvicide to achieve the source reduction of mosquito breeding. On the basis of the activity plan some houses were also sprayed with insecticide.

Constraints

Due to the lack of funds, most of the vector control activities had to be implemented on a smaller scale than planned. Therefore, only 25% of the activities planned in this area could be implemented. Consequently, it is expected that present project achievements might be mitigated, resulting in an increase in malaria incidences during the coming reporting period.

Objective 12: To upgrade the ability of health workers in the local SRCS centres in malaria diagnosis and treatment

No achievements during the reporting period. The refresher courses for 24 health workers were cancelled due to lack of funds.

Objective 13: To provide curative services for the target populations

Achievements

The SRCS clinics in the camps provided continuous services of laboratory and medical investigations as well as treatment. During the reporting year, 56,564 patients benefited from the clinical services. 13,007 cases of malaria were reported. Most pregnant women benefited from prophylactic services and received chloroquine tablets during their fourth, fifth and sixth month of pregnancy.

Constraints

Irregular transfer of funds. With the support of the UNICEF the effects of reduced clinical services could, however, be mitigated and the provision of the most vital anti-malarial drugs was safeguarded.

Institutional and Resource Development

To follow-up on the decision of decentralization, the SRCS needs to put more efforts into capacity building of its branches and HQ alike. Training, logistical and material support have been identified as areas of priority. The objectives of the decentralization remain:

- To ensure full participation of the SRCS volunteers in the decision making process
- To have strong branches with the capacity to carry out the Mission of the SRCS
- Community mobilisation aiming at promoting volunteerism, self-help and self-reliance.

As this project is one of the concrete answers to meeting the strategic goal of institutional development of the Strategic Workplace 2000-2004, it will continue for a period of at least five years.

Objective 1: Develop and promote the Society's human resources

Achievements

Designing of a performance appraisal system for all staff. A workshop was organised on in February, with the view to ensure active participation of SRCS management staff in the identification, categorisation, and definition of performance and behavioural variables that effectively measure the performance of SRCS staff. The performance appraisal system (PAS) has already been used to assess the performance of the staff for the year 2000.

Assessment of SRCS staff and volunteers training needs. After discussion sessions with the consultant, a master training plan was approved.

Constraints

The carrying out of a feasibility study on the SRCS Training Centre had to be postponed due to the delay of funds.

Objective 2: Develop the society's financial resources to attain self-reliance

Achievements

Terms of Reference for a comprehensive study on the SRCS financial management system has been approved. A plan for developing the Society's commercial activities has been initiated by the Executive Committee.

Constraints

The study has been delayed and will take place early 2001.

Objective 3: Design an adaptive organisational structure for the SRCS

Achievements

Development of a new organisational structure in collaboration with the Federation delegation and the SRCS' top management to help the SRCS headquarters in its role as the Society's technical core. Job descriptions designed for each position. A new salary scale and a comprehensive PRC system (Personal Related Costs) has also developed to become an important element in high calibre staff recruitment and retention.

Constraints

Due to lack of funds, neither the organisational structure, nor the salary scale have been implemented.

Objective 4: Carry out a state branch capacity assessment*Achievements*

This task was carried out together with the training needs assessment. The SRCS teams were involved in the process of field survey and data collection, while the consultant developed the questionnaire, analysed the data, and finalised the report.

Constraints

So far, no constraints have been experienced.

Objective 5: Design and install a management information system (MIS) at SRCS headquarters*Achievements*

A local area network (LAN) has been designed for the SRCS headquarters. This LAN will be the cornerstone towards attaining a Management Information System (MIS). An orientation workshop has been conducted concerning the use of computers and information technology. 12 members of staff from the state branches and 3 from the HQ senior staff participated.

Constraints

The installation of the network has been postponed until year 2001 due to delays in carrying out a study of the SRCS' financial system.

Objective 6: Provide immediate infra structural assistance at State Branch level.*Achievements*

With support from the Federation delegation, the SRCS has managed to secure 7 HF base stations and 2 VHF systems for Khartoum and Kassala. In addition, computers have been provided to some state branches.

Coordination and Management

The Country delegation in Sudan is not operational. This is underlining the advisory and consultative role vis-à-vis the National Society.

Objective 1: To support and encourage the capacity building of the Society, both at Headquarters level and in the State Branches.*Achievements*

With the Society a comprehensive Reform Program for strengthening the Headquarters has been developed and introduced to participating National Societies. Several training opportunities offered to State Branch Directors, branch staff and volunteer leaders. A consultancy study on strengthening the SRCS Logistics System was carried out.

Constraints

Limited capacity within the National Society to prepare detailed implementation plans resulting in poor response from potential donors.

Objective 2: To extend technical assistance for the developing of new programmes and project models.*Achievements*

The delegation's Health Delegate assisted in introducing the ARCHI process, aiming at injecting the concept in the Health and Care program. Sudan was selected ARCHI pilot and a report was prepared for the Ouagadougou conference.

Constraints

Lack of funds have delayed the rapid introduction of ARCHI.

Objective 3: To strengthen cooperation between the three components of the Movement.*Achievements*

Management meetings carried out every second month, attended by the SRCS senior management, the Federation HoD and FAD and ICRC HoD and Cooperation Delegate.

Objective 4: Supporting the SRCS in strengthening its disaster preparedness capacities and, in times of emergencies, initiate the necessary coordination for an optimal disaster response .*Achievements*

Following the 1999 floods emergency, some stockpiling of late incoming supplies was accepted by concerned donors. During the Eritrean refugee emergency from end of May, Federation recruited a Relief Delegate.

Objective 5: To be the natural coordinating body for assistance to the SRCS from within the Movement.*Achievements*

Bilateral projects and bilateral delegates is benefiting from the service of the delegation. There has been a close and fruitful coordination between the Federation and the bilateral delegates from Spanish Red Cross as well as visitors from a large number of participating National Societies.

Conclusions

The ambitions of the National Society is much greater than funds available from donors will allow. Even with the unfavorable response - less than 40% - it is clear that the capacity of the Society has been stretched to the limit. In order to improve project performance and ensure sustain ability, there is an urgent need of training at all levels, starting from the Headquarters. As the goal of strengthening the SRCS' capacity is part of a five year plan, it is too early to expect substantial results. It should however be noted that if expected program results are to be reached, participating National Societies should be encouraged to establish a more long-term approach to supporting the SRCS. The SRCS, on its part, would promote such a development by addressing key problems including the attainment of self-reliance.

This being said, it should be noted that SRCS is one of the more developed and capable National Society in Africa. Its large number of trained and committed volunteers represent a great potential not only to the Society itself but to the vulnerable people of Sudan.

Ongoing insecurity issues with access problems made the monitoring of the project at times very difficult. The health delegate was evacuated twice in a six month period. Again, in October and November, conflict issues pulled attention away from the IDPs, particularly in terms of planned training.

For further details please contact: Martin Fisher, Phone: 41 22 4440; Fax: 41 22 733 03 95; email: fisher@ifrc.org

All International Federation Operations seek to adhere to the Code of Conduct and are committed to the Humanitarian Charter and Minimum Standards in Disaster Response (SPHERE Project) in delivering assistance to the most vulnerable.

For further information concerning Federation operations in this or other countries, please access the Federation website at <http://www.ifrc.org>.

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INTERNATIONAL FEDERATION OF RED CROSS AND RED CRESCENT SOCIETIES					
				Interim report	
				Annual report	
				Final report	
Appeal No & title: 01.12/2000 Sudan					
Period: year 2000					
Projects: PSD002, 003, 004, 005, 011, 160, 162, 501, 502, 512, 582					
Currency: CHF					
I- CONSOLIDATED RESPONSE TO APPEAL					
FUNDING	CASH		KIND & SERVICES		TOTAL INCOME
	Contributions	Reallocations	Goods/Services	Personnel	
Appeal budget	4'559'596				
less					
Cash brought forward	751'735				
TOTAL ASSISTANCE SOUGHT	3'807'861				
Contributions from Donors					
British RC (DNGB)	56'804				56'804
British RC (DNGB)	33'024				33'024
Cyprus RC (DNCY)	55				55
ECHO - SUDAN Kassala H	197'977				197'977
German RC (DNDE)	23'915				23'915
Kuwait RC (DNKW)	85'166				85'166
Kuwait RC (DNKW)	42'579				42'579
Kuwait RC (DNKW)	42'579				42'579
Norwegian Govt. via RC (DG)	52'110				52'110
Norwegian Govt. via RC (DG)	1'985				1'985
Norwegian Govt. via RC (DG)	1'985				1'985
Norwegian Govt. via RC (DG)	43'425				43'425
Norwegian Govt. via RC (DG)	52'110				52'110
Norwegian Govt. via RC (DG)	1'655				1'655
Norwegian RC (DNNO)	5'790				5'790
Norwegian RC (DNNO)	221				221
Norwegian RC (DNNO)	221				221
Norwegian RC (DNNO)	5'790				5'790
Norwegian RC (DNNO)	4'825				4'825
Norwegian RC (DNNO)	184				184
Swedish Govt. via RC (DGN)	10'674				10'674
Swedish Govt. via RC (DGN)	25'900				25'900
Swedish Govt. via RC (DGN)	21'348				21'348
Swedish Govt. via RC (DGN)	51'800				51'800
Swedish Govt. via RC (DGN)	21'348				21'348
Swedish Govt. via RC (DGN)	51'800				51'800
American RC (DNUS)		17'333			17'333
American RC (DNUS)		26'667			26'667
American RC (DNUS)		6'633			6'633
Austrian RC (DNAT)		48'415			48'415
British RC (DNGB)		49'182			49'182
Finnish RC (DNFI)		50'000			50'000
Irish Govt (DGIE)		80'755			80'755
Irish Govt (DGIE)		20'705			20'705
Japanese RC (DNJP)		85'357			85'357
Monaco RC (DNMC)		2'367			2'367
Norwegian Govt. via RC (DGNNO)		55'000			55'000
Spanish RC (DNES)		50'000			50'000
Swedish Govt. via RC (DGNSE)		55'000			55'000
Australia				40'246	40'246
Great Britain				16'098	16'098
Sweden				60'123	60'123
TOTAL	835'269	547'414		116'467	1'499'150
Coverage	21.9%	14.4%		3.1%	39.4%
II - Balance of funds					
				Opening balance	751'735
				CASH INCOME Rcv'd	1'382'683
				CASH EXPENDITURE	-2'016'680

				CASH BALANCE	117'738

Sudan						ANNEX 1
APPEAL No. 01.12/2000		PLEDGES RECEIVED				28.03.2001
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
CASH						
REQUESTED IN APPEAL CHF ----->				4560000		TOTAL COVERAGE 49.5%
Balance carried forward from 1999				751734		
Reallocation of Income				85357.41		
Reallocation of Income				48414.9		
AMERICAN - RC		75000	USD	132750	19.12.00	TENTS AND BLANKETS
BRITISH - RC		12800	GBP	33152	03.03.2000	FAD DELEGATE, 50% COSTS
BRITISH - RC		70000	GBP	177100	18.12.00	BRANCH DEVELOPMENT PROG.
CYPRUS - RC				55	13.01.2000	
ECHO		255000	EUR	400988	07.04.2000	ECHO/SDN/2000/01002
KUWAIT - RC		100000	USD	157400	17.04.2000	
NORWEGIAN - GOVT/RC		1100000	NOK	220388	23.08.00	WOMEN, REPRODUCTIVE HEALTH, DECENTRALIZATION & SRCS BRANCH DEVELOPMENT, MGT & CO- ORDINATION
SWEDEN - RC/GOVT		400000	SEK	75840	30.05.00	DP
SWEDEN - RC/GOVT		400000	SEK	5840	30.05.00	MALARIA CONTROL
SWEDEN - RC/GOVT		200'000	SEK	37920	30.05.00	WOMEN & DEVELOPMENT
UNDP		9000	USD	14652	26.02.01	SPHERE PROJECT
SUB/TOTAL RECEIVED IN CASH				2141591.31	CHF	47.0%
KIND AND SERVICES (INCLUDING PERSONNEL)						
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
Australia	Delegate(s)			40'246		
Great Britain	Delegate(s)			16'098		
Sweden	Delegate(s)			60123		
SUB/TOTAL RECEIVED IN KIND/SERVICES				116467	CHF	2.6%
ADDITIONAL TO APPEAL BUDGET						
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
SUB/TOTAL RECEIVED				0	CHF	
THE FOLLOWING PROJECTS ARE LINKED TO THIS APPEAL:						
PSD002, PSD003, PSD004, PSD005, PSD011, PSD160, PSD162, PSD501, PSD502, PSD512, PSD582.						