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2014 CHF Reserve Allocations

Partner	Sector	Project	CHF Reserve Allocation
International Medical Corps UK	Health	Ensure uninterrupted access to life saving primary and reproductive health services for beneficiaries previously supported by Merlin in West Darfur	US\$ 140,000.00
ARC	Health	Continuation of Primary Health Care services for the population affected by conflict and displacement in South and East Darfur states	US\$ 210,000.00
Goal	Education	Provision of safe drinking water, gender sensitive sanitation and hand washing facilities for 3 School in Kutum- North Darfur	US\$ 139,356.00
ARC	Nutrition	Integrated Community based Management of Acute malnutrition Support to IDPs, in East Darfur and South Darfur States	US\$ 250,000.00
Total			US\$ 739,356.00

Ali Al-Zafari, RC/HC

Date

27/5/14

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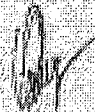
Common
Humanitarian
Fund


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Date: 25 May 2014

To: Ali Al-Za'tari, Humanitarian Coordinator

Through: Ivo Freijssen, Head of Office a.i., OCHA Sudan 

From: Yngvil Foss, OIC, Humanitarian Financing Section, OCHA Sudan 

Subject: Recommendation for Allocation from CHF Reserve to IMC for Provision of Uninterrupted Access to Life Saving Primary and Reproductive Health Services for Beneficiaries Previously Supported by Merlin in West Darfur

Please find enclosed application for funding from the Common Humanitarian Fund (CHF) Reserve Allocation from IMC. This request is for USD 140,000 (One Hundred Forty Thousand), in the Health Sector.

More than 262,000 persons have been newly displaced since the start of the year, and the situation is unlikely to abate in the near future. The health and nutrition status of the Darfur population has deteriorated due to the endemic conflict, poor access to safe water supply and sanitation and severe household food insecurity.

With Merlin's unplanned departure, the 10 clinics they run in West Darfur will have no access to essential medicines. This leaves 181,895 persons at risk of epidemics and death. Additionally, mothers and children will not have access to referral which could increase maternal and child death significantly. The SMOH have confirmed that they do not have financial and managerial capacity to provide the minimum package of PHC services in these clinics. The scale of the need for essential medicines, clinic supplies and equipment, supervision, and skilled staff exceed the resources of the SMOH.

In order to fill the gaps left by Merlin, IMC proposes to implement primary and reproductive health care programs in 10 clinics (Arara, Beida, Congo Haraze, Masterei A, Sisi, Zeina, Gellu, Abu Suruj, Kondobe, and Bir Dagig) formerly operated by Merlin in West Darfur. The period of the project is 4 months to cover the critical period between Merlin's exit and the start of IMC's anticipated OFDA funding. Specifically, IMC will offer a comprehensive package of primary health care services including outpatient consultations for all residents, IMCI for children under five, routine vaccinations (EPI), referral of severe cases to secondary care centers, provision of essential medicines, comprehensive maternal and child health services (ANC, clean and skilled delivery, PNC, BeMOC in Beida, Masterei and Congo Haraza), health and nutrition education, surveillance and epidemic management, and integrated nutrition programming.

OCHA has reviewed the submissions to ensure due diligence, and recommends the approval of the full amounts requested for this project from the CHF Reserve.



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Date: 25 May 2014
To: Ali Al-Za'tari, Humanitarian Coordinator
Through: Ivo Freijesen, Head of Office a.i., OCHA Sudan
From: Yngvil Foss, OIC, Humanitarian Financing Section, OCHA Sudan
Subject: Recommendation for Allocation from CHF Reserve to ARC for Continuation of Primary Health Care Services Previously Provided by Merlin for the Population Affected by Conflict and Displacement in South and East Darfur states

Please find enclosed application for funding from the Common Humanitarian Fund (CHF) Reserve Allocation from ARC. This request is for USD 210,000 (Two Hundred and Ten Thousand), in the Health Sector.

On May 31, 2014, MERLIN will officially end operations in Darfur. Merlin and Government of Sudan (GoS) has officially requested ARC to continue supporting health and nutrition services in South and East Darfur. The management of these facilities has since been handed over to ARC and Merlin has effectively pulled out and stopped providing support in most facilities as of May 1, 2014. This has created a crucial and urgent financial gap to adequately ensure that health services for target beneficiaries in East and South Darfur can continue uninterrupted. Merlin has liquidated and transferred its assets to the GoS and handed over operations and all related expenses, liabilities, and responsibility to ARC.

ARC proposes a continuation of provision of life-saving humanitarian assistance to IDPs in camps and gathering places through Water, Sanitation and Hygiene (WASH), health care and nutrition interventions following Merlin's effective exit from Darfur. A continuation of current programming is necessary because within existing camps service delivery has been weakened with new arrivals overwhelming available resources. ARC will continue the work in facilities previously supported by Merlin, consolidating the activities within Kalma and Gereida camps, and supporting villages in Adilla, Abu Karinka and Yassin localities in East Darfur region that have experienced recent violence.

ARC has submitted a proposal to USAID/OFDA to cover a majority of the additional support and programmatic costs. This process can take several months to complete, and in order to ensure that there is no interruption in health service provision, ARC is submitting this proposal for CHF Reserve Fund for the following urgent and essential life-saving activities previously carried out by Merlin:

- Providing primary health care services (treatment of communicable diseases, consultations, etc) at 11 PHCCs;
- Procuring and supplying essential drugs and non-medical supplies across 11 PHCCs on for 3 months;
- Conducting weekly community awareness sessions in target communities by Community Healthy Volunteers (CHVs) and daily health sessions at health facilities by health workers, to increase awareness and increase health service seeking behavior. Inclusion and participation of

- women, men, youths, disabled, elderly and all other vulnerable groups will be promoted;
- Procurement of BEmOC drugs and essential tonic;
 - Providing support ongoing capacity mentoring and coaching for 68 ARC and SMOH staff at health facilities based on the gaps identified;
 - Strengthening and expanding Health Information System in eight localities in (3 in East Darfur/5 in South Darfur) and at community level;
 - Rehabilitating 3 PHC facilities and 4 RH units (Yessin, Kalma and Gereda) in line with the MOH health map;
 - Rehabilitating Elfardous PHCC's Incinerator; and
 - Providing logistical support to MOH for cold chain management.

OCHA has reviewed the submissions to ensure due diligence, and recommends the approval of the full amounts requested for this project from the CHF Reserve.



OCHA

Humanitarian

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Date: 25 May 2014

To: Ali Al-Za'tari, Humanitarian Coordinator

Through: Ivo Freijssen, Head of Office a.i., OCHA Sudan

From: Yngvil Foss, OIC, Humanitarian Financing Section, OCHA Sudan

Subject: Recommendation for Allocation from CHF Reserve to GOAL for Provision of Safe Drinking Water, Gender Sensitive Sanitation and Hand Washing Facilities for 5 Schools in Kutum- North Darfur

Please find enclosed application for funding from the Common Humanitarian Fund (CHF) Reserve Allocation from GOAL. This request is for **USD 139,356 (One Hundred Thirty Nine Thousand Three Hundred Fifty Six)**, in the Education Sector.

Increased hostility and sporadic fighting between Government of Sudan armed forces and armed groups as well as inter-tribal violence in parts of Darfur has resulted in civilian casualties and new civilian displacement. According to Kutum authorities, it is estimated that approximately 20,000 individuals (8,000 male and 12,000 female) out of which 3,000 are school age children (1,500 girls and 1,500 boys) have arrived in camps and surrounding areas. A large number of IDP children are accessing or will access local education facilities which are already overwhelmed, and have no additional space for learning including use of toilet facilities.

GOAL conducted a rapid WASH assessment in October 2013 in schools in 6 villages in Kutum and El Waha rural areas: Ensiro, Kanfa, Umbgab, Gumbo, Kursi, Damrrat Umo which were reported to have been underserved in terms of WASH facilities. The assessment revealed that latrine coverage was 269 children /per latrine, which is below the SPHERE STANDARD. Most schools have no water source and are dependent on water sources which are located more than 1,000 meters away from the schools. In addition, these schools do not have proper hand washing facilities for the children.

In the light of the above situation, the project will ensure that five targeted schools have safe drinking water, sanitation and hand washing facilities for children and teachers. Urgent activities to be implemented are:

1. Supplying water in schools through drilling borehole with hand pumps in five schools;
2. Construction of gender sensitive (separate latrines considering girls and boys sensitivity and cultural issues) school latrines with hand washing facilities in five schools;
3. Conducting Ground Water Monitoring for target schools in collaboration with WES/SWC and Directorate for Ground Water Monitoring;
4. Conducting regular water quality testing and liaise with WES to ensure chlorination of contaminated points, and;
5. Working with locality, MoH environmental health department, and WASH/School committees to develop community action plans for solid waste management.

OCHA has reviewed the submissions to ensure due diligence, and recommends the approval of the full amounts requested for this project from the CHF Reserve.



Date: 25 May 2014
To: Ali Al-Za'tari, Humanitarian Coordinator
Through: Ivo Freijssen, Head of Office (i.), OCHA Sudan
From: Yngvil Foss, OIC, Humanitarian Financing Section, OCHA Sudan
Subject: Recommendation for Allocation from CHF Reserve to ARC for Integrated Community Based Management of Acute Malnutrition Support to IDPs, in South and East Darfur states

Please find enclosed application for funding from the Common Humanitarian Fund (CHF) Reserve Allocation from ARC. This request is for USD 250,000 (Two Hundred and Fifty Thousand), in the Nutrition Sector.

On May 31, 2014, MERLIN will officially end operations in Darfur. Government of Sudan (GoS) has officially requested ARC to continue supporting health and nutrition services in South and East Darfur. The management of these facilities has since been handed over to ARC and Merlin has effectively pulled out and stopped providing support in most facilities as of May 1, 2014. This has created a crucial and urgent financial gap to adequately ensure that nutrition services for target beneficiaries in East and South Darfur can continue uninterrupted. Merlin has liquidated and transferred its assets to the GoS and handed over operations and all related expenses, liabilities, and responsibility to ARC.

ARC proposes a continuation of humanitarian assistance to IDPs, returnees and host communities with water, sanitation and hygiene (WASH), health care and nutrition interventions thereafter, following MERLIN's effective exit from Darfur. A continuation of current programming is necessary, because within existing camps service delivery has been weakened with new arrivals causing local authorities and other organizations to struggle in providing essential services. ARC will continue the work previously supported by MERLIN, consolidating the activities within Kalma and Gereida camps, and supporting villages in Adilla, Abu Karynka and Yessin localities in East Darfur region that have experienced recent violence.

The Sudan Household Health Survey 2010 (hereafter referred to as SHHS 2010), the most recent national survey conducted in Sudan, estimates that 500,000 children under five suffer from severe malnutrition, and up to two million children are stunted.¹ The recent nutrition surveys conducted in South and East Darfur confirm the SHHS 2010 results. According to the nutrition and health survey completed by MERLIN in September 2012 in Belail locality, which includes Kalma Camp, the GAM rate was at 24.6%, with SAM at 5.4%. The SAM results have shown that in Yessin, GAM and SAM rates are beyond the emergency threshold (19.4% GAM and 5.7% SAM). In El Neem camp, which borders El Ferdous and Assalaya localities, GAM levels were at 23.3%, SAM at 4.9%, and MAM at 18.4% (Tearfund July 2012). The joint nutrition survey (SMOH/UNICEF/ARC July 2012) in El Salam locality showed GAM at 18.4%, SAM at 4.5%, and MAM at 13.9%.

ARC has submitted a proposal to USAID/OFDA to cover a majority of the additional support and programmatic costs. This process can take several months to complete, and in order to ensure that there is no interruption in health service provision, ARC is submitting this proposal for CHF Reserve Fund for the continuation of essential life-saving nutrition activities previously carried out by Merlin as described in the attached proposal.

OCHA has reviewed the submissions to ensure due diligence, and recommends the approval of the full amounts requested for this project from the CHF Reserve.
