

CHF 2008

2008 Common Humanitarian Fund for Sudan

CHF Allocation Details by Sector

2008 Second Allocation Round

Monday, August 11, 2008

TOTAL CHF ALLOCATION: \$41,364,322

For further information on the Common Humanitarian Fund for Sudan please visit

www.unsudanig.org/workplan/chf

Project Coding:

Region Codes: [NP] = National Programmes, [S] = Southern Sudan, [D] = Darfur, [A] = Abyei, [BN] = Blue Nile, [SK] = Southern Kordofan, [E] = Eastern States, [KN] = Khartoum and Other Northern States

Assistance Category: (HER) = Humanitarian/Early Recovery (RD) = Recovery and Development

Cross Cutting Codes: [HIV] = HIV/AIDS, [Gnd] = Gender, [CB] = Capacity Building, [Env] = Environment, [ERA] = Early Reintegration Activities, [FA] = Foundational Activities (Darfur)

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
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Basic Infrastructure and Settlement Development

Total Sector Allocation: **\$679,000**

Southern Sudan **\$679,000**

Regional Sector Priorities

- Emergency repair of strategic transportation routes.
- Support to basic service delivery by constructing public infrastructure (priority: water and sanitation).
- Support service delivery in underserved and remote areas.
- Support projects with funding shortfall which have not been able to mobilize other resources.
- The projects meet the priorities outlined in the CHF policy paper.

- Allocation has been put on hold pending further decision of the sector

ACTED	SUD-08/BI28	\$436,500	<p>Note: Government has started building a road paralleling this allocation activities. ACTED and the sector lead are identifying another site and will revert mid Augusts with revised location.</p> <p>This project was ranked as the first priority of the sector during the first round, but was allocated only 370,000. Another 630,000 were pre-allocated to the second round. The project aims at conducting emergency repair on the Wau-Raja road, which are ongoing up to km 60 with the funding received last year and from the first allocation round. To date, 30 km of the road have been repaired, and the next 30 km are in progress since April following the receipt of the first allocation of 370,000. The 450,000 allocated through the second round would go towards the repair of the ensuing 40 km. If the project is not supported by this CHF round, it will run out of funding in August and will have to demobilize. Since the initial start up costs have been covered (which are usually considerable for road repair projects), further allocations will build upon current activities and go directly into the implementation of works. The project road continues to be a priority of GoSS, yet funding from other sources could not be secured to date. The aim of the works is to conduct emergency repairs to keep the road open during the rainy season.</p>	<ul style="list-style-type: none"> • Emergency repair of 40 km of roads along the Wau-Raga corridor 60-100 km) through cash for works, including filling of mudpits and potholes, reinforcement through gabions and rockfilling and compacting. • Maintain/repair of 4 bridges along the route. • Build and install 22 culverts. 	<ul style="list-style-type: none"> • 15 to 20 villages are opened. • Reduction in transportation time from Wau to Raga. • Small business are opened along the way. • Income provided through cash for work throughout the project. • Facilitation of movement of goods and services, economic recovery and reduction in prices of commodities. 	<ul style="list-style-type: none"> • Repair of 40 km of road. • Repair and maintenance of 4 bridges. • Construction of 22 culverts. 	<p>The repairs will be conducted from Km 60 (Ngomboro village) to Km 100 (Jamus village) along the Wau-Raga Road; the three main villages along this section are Ngorombo, Kpango and Ghana.</p> <p>-----</p> <p>Approximately 2,000 (about 1200 female and 800 male) or 60% of beneficiaries alongside the road will be involved in CFW activities.</p> <p>-----</p> <p>September 2008 - February 2009</p>
01-Jul-08	Emergency Road Repair and	<u>Project Budget</u>					
Index: 1218 [1]	Livelihood Support in Western Bahr el Ghazal - [S] - [Gnd][CB][Env][ERA] - (HER)	Q1: \$600,000					
		Q2: \$1,000,000 Q3: \$1,560,000 Q4: \$1,560,000					

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Solidarites SUD-08/BI54 01-Jul-08 Index: 1217 [2] Emergency Repair of Malakal's Water Treatment Plant and Network - [S] - [CB][ERA] - (HER)	\$242,500 <u>Project Budget</u> Q1: \$0 Q2: \$300,000 Q3: \$300,000 Q4: \$300,000	<p>This is a recently added project to the Work Plan which was not included during the first CHF allocation round, but is considered a high priority due to the nature of work, improve quality of water supply, and the number of beneficiaries (70,000) which can be reached with the amount of funding requested. The project can be implemented during the rainy season and is expected to show substantial impact by the end of 2008.</p>	<ul style="list-style-type: none"> • Survey and prioritization on the implementation of emergency repairs on the plant and network. • Discuss and sign a MOU with the local water authorities to define the role and responsibilities of Solidarités and the authorities on the implementation of emergency repairs. • Implement following emergency repairs identified to date (to be complemented by survey data): <ol style="list-style-type: none"> a. Installation of water meters. b. Repair of main distribution tank leaks. c. Change of 3 electric pumps engines filling the tanks. d. Repair of main network leaks identified in the course of the survey. e. Equip the water treatment plant laboratory. f. Conduct various other emergency repairs detected during the survey and all along the process. • Provide maintenance training to technical staff working in the plant and hand-over to local authorities. 	<ul style="list-style-type: none"> • 70,000 people supplied by the Malakal Water Treatment Plant have access to better water quality. • The production capacity of the Malakal Water Treatment Plant increases by at least 25% (estimated actual capacity 4,000 m3/day). • Increased capacity of staff working for the Urban Water Department and Water Treatment Plant through their involvement in the planning and implementation of the repair works. 	<ul style="list-style-type: none"> • Increase the water production capacity by at least 25%. Measurable by the water meters. (estimated actual capacity 4000 m3/day). • Increase the quality of the distributed water (80% analysis on conformity). • 70% of the Malakal treatment plant technicians succeed in the technical maintenance test following training (30 technicians estimated). 	Malakal, Upper Nile, Southern Sudan ----- The entire community supplied by the Water Treatment Plant of Malakal, both residents and returnees (70,000 persons estimated). ----- August - December 2008

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Common Services and Coordination						Total Sector Allocation: \$7,299,322
Abyei		\$75,000				

Regional Sector Priorities

Not available

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MERCY CORPS 06-Aug-08 Index: 1271	SUD-08/CCS26 \$75,000 <u>Project Budget</u> Q1: \$0 Q2: \$75,000 Q3: \$75,000 Q4: \$75,000	<p>This allocation was originally a CHF 2007 emergency allocation to rehabilitate the Abyei airstrip so that UNHAS could land fixed wing aircraft into Abyei thereby assisting humanitarian access into Abyei. Although delays in finalizing the PCA with the FMU nearly resulted in cancellation of this allocation in the first quarter of 2008, the humanitarian community advocated on behalf of this allocation. Armed conflict in Abyei in mid-May has halted many CHF projects. USAID has indicated they will completely rehabilitate the airstrip. Given that there has been a special allocation for Abyei in the CHF 2008 second allocation round to meet humanitarian requirements caused by the fighting, that this reallocation is towards a new project in a different sector, and that an additional two-month no-cost extension is required to complete this CHF 2007 emergency allocation, this allocation will be cancelled. The US\$75,000 will be reallocated under the CHF 2008 special allocation for Abyei listed in the CHF 2008 second round allocation policy paper.</p> <p>Following the heavy fighting around Abyei Town which started on May 13, 50,000 people were displaced mostly south and around Agok. In addition, the UN and NGOs that were operating from Abyei Town lost their premises and shifted their center of operations for the emergency response to Agok/Joljok. There are no UN premises or storage facilities in this area except for Mercy Corps. Mercy Corps compound in Joljok has served as the main common office, common accommodation and storage facility. Local authorities and the community as allocated land around Joljok for the common premise and warehouse. Three things are needed to support and sustain the emergency response for the displaced people. The first is the construction of a short feeder road to the premise and warehouse. This will also serve the Goal Health Clinic and is also requested by UNDSS in case of evacuation as the vehicles can't move out during the rainy season. The second is to build a fence around the common warehouse for the security of goods. This fence will also provide accommodation for national staff in particular drivers. The third is to up-grade the current borehole to a mini-water yard that provides water to the UN/NGOs agencies, the Goal clinic and surrounding community.</p> <p>While an Abyei agreement has been signed, agencies will continue to provide substantial services from Jol jok / Agok due to the large numbers of displaced populations and the continued insecurity in the region</p>	<ol style="list-style-type: none"> 1. Planning with local authorities and non-governmental organizations. 2. Contract the road to construction company. 3. Procure materials for water upgrade and fence. 4. Contract labor and provide technical oversight on completion of projects. 5. Interagency coordination: <ul style="list-style-type: none"> • UNICEF to upgrade the borehole • UNICEF to provide a small generator • SC-US to over see the set up of the water system • MC to subsidize the fuel/ operations and maintenance of the system • GOAL to provide oversight for the completion of the fence. 6. Assumptions and Challenges: <ul style="list-style-type: none"> • Access to materials and transport on time • Road company availability in the area is subject to the Agok airstrip project being contracted to the same company which is currently being negotiated with USAID contractor PADCO. 	<ul style="list-style-type: none"> • Feeder road to common premise, warehouse and PHCC. • Mini-Water yard to serve UN/NGOs, PHCC and Community. • Fencing for common warehouse. 	<ul style="list-style-type: none"> • 300 meter road to provide secure and all weather access to the GOAL clinic and common humanitarian agency premise 300. • Procurement for a fence around rubhalls to serve as inter agency warehouse for humanitarian response to displaced populations in Abyei. • Upgraded water system to increase access to the local community, medical support service provider and inter-agency compound. 	Joljok, Abyei area ----- Host and Displaced Community in Abyei area. ----- June - December 2008

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Darfur							
\$1,900,000							
<i>Regional Sector Priorities</i>							
<i>Regional Priorities:</i>							
<ul style="list-style-type: none"> • Assistance to the newly displaced by the conflict. • Protection and protection monitoring (e.g. IDPs under threat of involuntary return/relocation). • Nutrition for the most vulnerable (TFC/SFP). • Maternal and child health. • Coordination and common services (facilitation and coordination). 							
<i>Common Service and Coordination Priorities:</i>							
<ul style="list-style-type: none"> • Timely assessment and information sharing. • Mitigating against issues that will cause further displacement (e.g. increased tensions over resources, resource depletion). • Support to the most affected and especially the vulnerable (e.g. timely information sharing for service delivery, rapid response to issues). • Coordination and facilitation of response, (including identifying of gaps). • Access, especially to under-served areas. 							
OCHA	SUD-08/CCS3	\$700,000	Operating in Darfur is becoming increasingly difficult. Attempting to secure access to the population especially the most vulnerable and in need is essential to ensure that there needs are met by the humanitarian community. In order to ensure effective efficient response to population needs, it is essential that organisations receive timely accurate information to plan and implement response, provided by OCHA. This allocation would ensure the capacity of the OCHA teams to respond quickly to areas requiring assessments, to facilitate interagency assessments, to plan interventions and to ensure that the issues are documented and shared with partners.	<ul style="list-style-type: none"> • Conduct action oriented analysis of humanitarian trends, especially in areas of recent displacement, high vulnerability or need. • Support to humanitarian missions and interagency assessments. • Provision of timely accurate information to partners. • Coordination of humanitarian activities ensuring consistency with IASC recommendations, as per the Humanitarian Reform. 	<ul style="list-style-type: none"> • Meetings held and minutes produced and shared in a timely manner. • Interagency assessment done, and reports shared. 	<ul style="list-style-type: none"> • Interagency coordination meeting weekly, chaired by OCHA, in each of the 3 Darfur State capitals and Zalingie. • Interagency agency management agency (IAMGs) held weekly, chaired by OCHA, minutes produced and shared. • Interagency assessments planned and conducted in a timely manner and reports shared with partners. 	Northern, Southern and Western Darfur, (including presence in EWD) ----- All vulnerable population in Darfur, including IDPs, refugees and needy. ----- July - December 2008
RCSO	SUD-08/CCS11	\$200,000	The project activities aim to strengthen coordination support within the context of the UN & Partners Workplan. More specifically, funding will be used to support sector and inter-sectoral livelihoods activities for which funding is currently unavailable. The resulting analyses and assessments will be shared amongst the UN & Partners in order to identify programming gaps, facilitate planning to address them and ensure a coordinated response to the needs/gaps identified.	<ul style="list-style-type: none"> • Coordination and capacity building of actors for response to gaps in livelihood programming. • Facilitate enhanced contextual analysis process among actors for planning early recovery related activities. • Promoting local partnerships and strengthening local capacities. 	INFORMATION PENDING	INFORMATION PENDING	Northern, Southern and Western Darfur States ----- Pastoralists, returnees, camp residents ----- July - December 2008

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UNEP 08-Jul-08 Index: 1264 [4]	SUD-08/CCS4 Darfur Aid and Environment - [D] - [HIV][Gnd][CB][Env][FA] - (HER)	\$120,000 <u>Project Budget</u> Q1: \$167,428 Q2: \$334,856 Q3: \$502,285 Q4: \$502,285	The project activities aim to strengthen coordination support within the context of the UN & Partners Work Plan in relation to management of the environment and natural resources, which we expect to be an important theme in the 2009 workplan. A strengthened full time presence in Darfur (as opposed to missions from Khartoum) will enable UNEP to to pursue this agenda more effectively. UNEP's intention is to increase presence in Darfur from September 2008. The CHF funds will support this mobilisation. This allocation is the funding amount requested by UNEP.	<ul style="list-style-type: none"> Establish Darfur environmental helpdesk and work directly with main actors. Build the capacity of agency environmental focal points and assist in the development of projects and environmental management plans by implementing agencies to enhance environment in Work Plan, particularly the Darfur Section. 	Natural resource management integrated with humanitarian and early recovery programming at field level leading to more sustainable livelihoods options for vulnerable groups, through improved balance between natural resources availability and livelihoods that depend on natural resources.	<ul style="list-style-type: none"> The CHF funding supports a UNEP presence in Darfur and therefore leverages higher value and impact from other outputs developed in UNEP's programme. This is funding a co-ordination role. Success would be measured by higher awareness and improved livelihoods programming by other actors. 	Northern, Southern and Western Darfur States ----- Pastoralists, returnees, camp residents ----- January - December 2008
UNHCR 08-Jul-08 Index: 1263 [3]	SUD-08/CCS9 Camp Coordination and Camp Management - [D] - [Gnd][Env] - (HER)	\$700,000 <u>Project Budget</u> Q1: \$3,832,130 Q2: \$7,762,130 Q3: \$12,115,940 Q4: \$12,115,940	As UNHCR expands its role to take over camp coordination from OCHA, identified as a regional Darfur priority, requires resources to be able to fully engage in this process. Camp coordination is currently at a critical stage with many INGOs pulling out and capacity building required for national NGOS to step in. Funds allocated through round two of CHF will go towards strengthening the camp coordination and management in all areas of current UNHCR operation and will expand to include additional camps currently being supported through INGOs. Clearly capacity building, in facilitation of sustainable service provision within the camps will be a focus of UNHCR activities.	<ul style="list-style-type: none"> Coordination of camp activities, training of agencies, advocacy, information management, coordination of provision of assistance to EVIs. 	NO INFORMATION PROVIDED.	NO INFORMATION PROVIDED.	Northern, Southern and Western Darfur States ----- NO INFORMATION PROVIDED. ----- July - December 2008
WFP (UNJLC) 08-Jul-08 Index: 1262 [2]	SUD-08/CCS1 Logistics Coordination and Information Management for the UN and Partners - [D][A][BN][SK][E][KN] - [CB] - (HER)	\$180,000 <u>Project Budget</u> Q1: \$500,000 Q2: \$700,000 Q3: \$728,419 Q4: \$728,419	Specifically UNJLC produces timely and essential logistics information which is directly relevant to the humanitarian operations in Darfur and shared through its coordination and information sharing activities. In support of coordination and facilitation of the humanitarian response UNJLC provides free common transport services, light vehicles convoys, and the UN air services. Furthermore this priority is directly met through the findings of UNJLCs logistics field assessments which are a prerequisite for humanitarian response. Finally, through its air operations, light vehicle convoys and common transport services UNJLC has been pivotal to the access of under served areas and is complimented by the coordination and information sharing activities. This amount is the full amount requested for Darfur-specific project activities.	<ul style="list-style-type: none"> Common logistics services include light vehicle convoys, land and air cargo transportation services and the coordination and facilitation of UNHAS/ UNMIS/ UNAMID air operations. Logistics field assessments including fuel survey, assessments of infrastructure, warehousing capacity, transport market impact studies and original research on logistics requirements. Coordination and sharing of essential logistics information directly relevant to the humanitarian operations in Darfur, through coordination meetings, mailing lists, UNJLC Sudan website, helicopter user meetings, regular bulletins and assessment reports. 	NO INFORMATION PROVIDED.	NO INFORMATION PROVIDED.	Northern, Southern and Western Darfur States ----- NO INFORMATION PROVIDED. ----- July - December 2008

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National Programmes		\$4,000,000					
<i>Regional Sector Priorities</i>							
<ul style="list-style-type: none"> This was special allocation identified by the Humanitarian Coordinator and the CHF Advisory Group. The UN Humanitarian Air Services is a common service vital to implementing humanitarian activities. A special meeting will be convened to ensure that more in-depth discussion takes place to address systemic issues related to UNHAS funding. The Humanitarian Coordinator requested convening the UNHAS Executive Board to also further discuss UNHAS-specific issues. 							
WFP 09-Jul-08 Index: 1136 [1]	SUD-08/CCS8 Humanitarian Air Service - [NP] - [HIV][Gnd][CB][Env] - (HER)	\$4,000,000 <u>Project Budget</u> Q1: \$18,000,000 Q2: \$36,000,000 Q3: \$77,143,809 Q4: \$77,143,809	This Special Allocation as indicated in the CHF 2008 policy paper dated 22 June 2008 is to address the funding shortfall in humanitarian air services operations in Sudan. Of the US\$77 million overall annual budget for 2008, UNHAS received US\$29 million by the time of the second round allocations. Monthly operational costs are US\$6.2; US\$4.2 million for Darfur alone which is where needs are greatest given the level of insecurity which dictates necessity for air travel. Since the humanitarian air services is a common service to the entire humanitarian community the CHF Advisory Group granted a special allocation outside the standard allocation model. While this grant will not meet UNHAS' full requirement this will complement other resource mobilization initiatives as discussed by the Humanitarian Country Team.	Complement other resources mobilized in contracting 16 fixed wing aircraft, 5 helicopters and the payment of aviation fuel for the period of 3 months.	<ul style="list-style-type: none"> Easy access to humanitarian community where insecurity or lack of road infrastructure would hinder reaching targeted community. Estimated 15,000 passengers to be transported per month. 	<ul style="list-style-type: none"> Access to 70% of locations in need of air transport capacity on a regular basis. Aircraft utilization of 70% on load capacity and contracted hours. 	National project ----- More than 200 agencies which include UN agencies, Embassies, Donor community, INGO and NGOs ----- 1 July - 30 September 2008
Southern Kordofan		\$548,322					
<i>Regional Sector Priorities</i>							
<p>To support UN and Partners recovery and relief activities. More specifically:</p> <ul style="list-style-type: none"> Support the scaling up of UN and Partner activities in Muglad area; Provide a point of contact for communities, local authorities and other actors in the area; and Support activities being undertaken by UNMIS (civil affairs) in support of the CPA. 							
RCSO 25-Jun-08 Index: 1137 [1]	SUD-08/CCS13 Strengthening of the Resident Coordinator Support System in Northern Sudan - [NP][A][BN][SK][E][KN] - [CB] - (RD)	\$548,322 <u>Project Budget</u> Q1: \$103,358 Q2: \$206,717 Q3: \$310,075 Q4: \$548,322	This funding will enable the establishment of an RCS office in Muglad as endorsed by the UNCT and reconfirmed by the CHF Advisory Group as a special targetted allocation.	<ul style="list-style-type: none"> Recruitment of staff as follows: 1 international Field Officer (P3) 1 National Coordination Officer NOB 2 Drivers Establishment of an operational office. 	<ul style="list-style-type: none"> Improved coordination of the UN and Partners activities in northwest Southern Kordofan. Increased UN and Partners programming. Improved engagement with local communities. 	<ul style="list-style-type: none"> Hire office staff. Procure required goods. Establish functional office. 	Al Muglad and northwest Southern Kordofan ----- Local communities, through enhanced UN and Partnerprogramming ----- 1 July 2008 - 30 June 2009

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Southern Sudan		\$776,000				
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Regional Sector Priorities

- To strengthen humanitarian coordination and increase emergency preparedness and response capacity through the support to UN Country Team, State Teams and Partners; the promotion of cross sector collaboration; increased coordination between UN and Partners and government counterpart efforts in emergency preparedness and response; facilitation of strategic planning processes; and support to common information and analysis systems.
- Special coordination duties include humanitarian response and emergency preparedness, early recovery foundation building, and security services to INGOs.

RCSO	SUD-08/CCS18	\$276,000	<ul style="list-style-type: none"> • The international and national NGO community is pivotal to the successful delivery of humanitarian and early recovery interventions in Southern Sudan. This CHF proposal seeks resources to support all NGOs in Southern Sudan, through the NGO forum, steering committee and secretariat. • The NGO resource centre provides communication and office services to all NGOs in Juba. It has proven instrumental in assisting the migration of NGOs from Nairobi to Juba, and is valued extremely highly by Partners. • Prior to the CPA, NGOs were offered a degree of legal protection through the Operation Lifeline Sudan agreement. Since OLS is no longer operational, and there is no NGO bill that has been passed through GoSS, the UN provides a degree of humanitarian legislative and service support to NGOs through the Humanitarian Assistance Group. This proposal includes the cost of a counterpart and liaison officer which manages this support. • In 2008, DFID agreed to support the internal coordination of NGOs through the NGO forum and secretariat. To ensure the continued level of coordination in this forum whilst the proposal was finalised, the NGO secretariat coordinator was funded for one month, until alternative sources of funding came through. 	<ul style="list-style-type: none"> • Participation of NGOs in humanitarian and early recovery coordination mechanisms in Southern Sudan. • Organization of NGO Forum Meetings. • Moderation of NGO Forum mailing list. • Sharing information on INGO presence and activities in southern Sudan with UN, Donors, GoSS. • Maintenance of the NGOs Resource Centre in Juba. • Systematic collection and regular exchange of relevant security and safety information with INGO members of the Humanitarian Assistance Group (HAG). • Organize and prepare analytical reports on security of INGO's, Organize, participate briefing/coordination security meetings on information exchange and coordination with INGOs. 	<ul style="list-style-type: none"> • NGOs deliver humanitarian assistance in close collaboration with UN agencies and state authorities. • INGO constantly informed on security and safety information in Southern Sudan. 	<ul style="list-style-type: none"> • NGO Forum meetings held monthly. • N. of INGOs security briefings organized. • N. of INGOs using the NGO Resources centre in Juba. 	Southern Sudan ----- National and international NGOs, humanitarian partners ----- January - December 2008
16-Jul-08 Index: 1220 [2]	Support to NGOs in Southern Sudan through the Establishment of NGO Resource Centres - [S] - No cross cutting - (RD)	<u>Project Budget</u> Q1: \$300,000 Q2: \$450,000 Q3: \$550,000 Q4: \$550,000					

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RCSO 16-Jul-08 Index: 1219 [1] SUD-08/CCS19 Strengthening of the Resident Coordinator's System in Southern Sudan - [S] - No cross cutting - (RD)	\$500,000 <u>Project Budget</u> Q1: \$1,782,273 Q2: \$1,782,273 Q3: \$1,782,273 Q4: \$5,627,377	<ul style="list-style-type: none"> Southern Sudan is still vulnerable to natural and man made disasters, ranging from floods and disease outbreaks, to displacement through conflict. Currently, each UN agency is not present in every state, and State Governments are very weak in coordination capacity. State RCSO offices have performed this coordination role in the field, supported by the UN OCHA Emergency Preparedness and Response Unit as necessary. The function of facilitating assessments, verification exercises and response missions for other UN agencies and Partners has improved the timeliness and efficacy of UN and Partner emergency response, and continues to play a critical role in emergencies. For example in Central Equatoria, a relatively well served state, 12 assessments were supported by the RCSO field office in 4 months, involving the assessments to inter-communal conflict affected populations, and the verification of outbreaks. From this analysis, a conservative estimate is that 40% of RCSO field staff time was spent performing Humanitarian coordination activities. 	<ul style="list-style-type: none"> Facilitate the finalization of emergency preparedness and response (EP&R) contingency plans in Jonglei, Western Bahr el Ghazal, Central Equatoria, Eastern Equatoria, Western Equatoria, Lakes. Facilitate the coordination of assessment missions in the states. Facilitate coordination meetings for emergency preparedness and response. Collect, synthesise and report information on humanitarian issues on a weekly basis, highlighting challenges and gaps as well as recommendations addressed to UN Country and State Teams. 	<ul style="list-style-type: none"> Contingency plans prepared and implemented. Humanitarian actors constantly informed on the humanitarian situation in the states. Coordination mechanisms in place to effectively respond to new emergencies in a timely manner. 	<ul style="list-style-type: none"> 6 contingency plans produced. N. of weekly reports produced. N. of coordination meetings held during emergencies. N. of joint assessment missions organized. 	Jonglei, Western Bahr el Ghazal, Central Equatoria, Eastern Equatoria, Western Equatoria, Lakes. ----- UN Country and State Teams, Humanitarian Partners, State authorities, population affected by emergencies ----- January - December 2008
Cross-sector Support for Return						Total Sector Allocation: \$1,919,550
Southern Sudan		\$1,919,550				
<i>Regional Sector Priorities</i>						
NO INFORMATION PROVIDED.						
IOM 25-Jun-08 Index: 1231 [1] SUD-08/RR10 Facilitating Sustainable Return of Sudanese - [NP][S][SK][KN] - [Gnd][CB] - (HER)	\$533,550 <u>Project Budget</u> Q1: \$942,643 Q2: \$13,136,189 Q3: \$14,778,212 Q4: \$16,420,235	Priority funding is required to support organised IDP movements within Southern Sudan. Funding is required to identify and contract transport capacity as well as provide medical screening, overnight assistance and protection escorts.	<ul style="list-style-type: none"> Coordinate a transport strategy for assistance to returns. Arrange and provide logistical support to the return process, including emergency assistance to vulnerable stranded IDPs. Establish and manage a network of way stations. Ensure medical screening of all organized IDPs. Provide emergency medical screening to vulnerable stranded IDPs. Organize the manifesting of all IDPs participating in organized movements. Provide operational and medical escorts on all convoys. Maintain a database of all IDPs assisted. 	<ul style="list-style-type: none"> Establish and maintain key way stations to support returns to and within Southern Sudan. Up to 10,000 IDPs assisted within south Sudan from places of displacement to areas of return. Up to 10,000 IDPs medically screened. Up to 1,000 stranded IDPs provided with emergency medical screening. Medical and operational escorts provided on all convoys. 	24,000 IDPs will be returned in safety and dignity.	EEQ, CEQ, Jonglei, Lakes, Warrap, WBEG, NBEG, WEQ ----- IDPs ----- March - December 2008

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IOM 07-Jul-08 Index: 1259 [2] SUD-08/RR13 Logistical Assistance to Repatriation Operations for Sudan - [NP][S][BN] - [Gnd] - (HER)	\$507,000 <u>Project Budget</u> Q1: \$1,317,416 Q2: \$1,756,554 Q3: \$1,979,723 Q4: \$2,195,692	<ul style="list-style-type: none"> The international response to the large-scale displacements from Abyei in mid May,2008 has faced significant logistical obstacles. The area where the displaced have settled is remote from (or has no access from) established logistical hubs, transport is scarce, and where available from local sources is cripplingly expensive. In order to overcome these critical obstacles, IOM has proposed to utilise the resources that it has already on the ground in terms of vehicles (trucks, fuel tanker) and mobile storage facilities, to provide support for the HC/RC and logistical sector lead (UNJLJC) to ensure support logistical services are available for all actors working to support the Abyei displaced – INGOs, UN and Sudanese governmental organizations. IOM immediately responded to the Abyei crisis in mid-May, 2008 by providing the much needed relief items like rub halls, tents, water bladder, water tank and other NFIs. The project is already providing essential logistical support to the humanitarian response and ensuring the timely delivery, storage and management of essential relief items for agencies active in the area and ensuring the overall sustainability of the Abyei emergency response. IOM has also established and manages a logistical hub in Turalei which is serving as a base to receive, manage and disperse relief items where they are needed most. <p>Positioning the logistics hub in Turalei is providing access along key supply routes in the area from Wau and the nearby air strip. Through a fleet of IOM operated 20-ton trucks, IOM is well positioned and meeting the requests from agencies to transport essential humanitarian relief items both within the affected area as well as facilitating the movement of such items from surrounding areas to key locations in the area of operation.</p>	<p>The project will serve to provide essential logistical support to the humanitarian response and ensure the timely delivery, storage and management of essential relief items for agencies active in the area and to ensure the overall sustainability of the Abyei emergency response. The project endeavours to continue providing support as follows:</p> <ul style="list-style-type: none"> Availability of ten 20 M ton trucks operated and managed by IOM for a smooth continuation of logistical support to the humanitarian agencies. Establishment of a logistical hub in the town of Turalei, Agok to serve the area of displacement. Full coverage of transport needs for the humanitarian agencies involved in the Abyei response. Establishment of a logistical hub in the town of Turalei to service displacement areas in Twic County. 	<ul style="list-style-type: none"> Provision of transport assistance to humanitarian agencies as well as a logistical base to ensure the safe, organized storage of humanitarian items in the area of concern. 	<ul style="list-style-type: none"> Ten 20 ton trucks operated and managed by IOM as well as one fuel tanker to service the fleet. Establishment of a logistical hub in the town of Turalei. The project endeavours to continue providing support for as long as funds are available. 	<ul style="list-style-type: none"> WBeG-Wau (as main fleet base). Twic County, Warrab State. Agok/Abyei, Abyei and its environs. <p>-----</p> <p>The project is targeting some 50,000 Abyei displaced and the host community (estimated over 40,000 persons) to be served by improved logistical coordination of agencies.</p> <p>-----</p> <p>May - September 2008</p>
IOM 25-Jun-08 Index: 1232 [2] SUD-08/RR6 IDP Tracking Programme for Sudan - [NP][S][A][SK][KN] - [Gnd][CB] - (HER)	\$200,000 <u>Project Budget</u> Q1: \$1,715,000 Q2: \$1,960,000 Q3: \$2,205,000 Q4: \$2,450,000	<p>Based on figures for returns in 2007, spontaneous returns outnumber the organised returns by a ratio of more than 6:1. A reliable and constant monitoring mechanism is required to trace these returnees in order to ensure that they can be provided with humanitarian and reintegration support.</p>	<p>This project supports the the following kinds of return tracking:</p> <ul style="list-style-type: none"> Tracking en route, tracking at transports hubs and main routes (land and river) in Southern Sudan - Juba, NBeG, Shambe. Area of return tracking, tracking through visiting of potential return villages in order to gather direct data on returnees. 	<p>Tracking data will provide population movement data to serve as the basis for:</p> <ul style="list-style-type: none"> Alerts for assistance for large groups of people on the move. Build basic demographic profile of Southern Sudan and highlight tre. 	<p>75,000 spontaneous returnees will be tracked.</p>	<p>All 10 states of Southern Sudan</p> <p>-----</p> <p>Returnees and local host communities in under served areas heavily impacted by returns</p> <p>-----</p> <p>March - December 2008</p>

Project Details		CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
UNHCR 25-Jun-08 Index: 1233 [3]	SUD-08/RR8 Establishment/Management of Way Stations and Dispersal of Returnees from Way Stations to Final Destinations - [S] - [HIV][Gnd][CB] - (HER)	\$679,000 <u>Project Budget</u> Q1: \$6,000,000 Q2: \$8,500,000 Q3: \$9,380,087 Q4: \$9,380,087	The majority of returnees (84%) UNHCR estimates to be covered under this project in 2008 are girls, boys, women and elderly persons. These are groups of persons who are often the most vulnerable persons returning to a post conflict society. Assistance at way stations and in organized return to returning refugee women, girls, boys and elderly, including HIV/AIDS awareness, is an important form of protection-in-transit to existent or potentially vulnerable groups and is critical to their early reintegration in Southern Sudan. The construction of way stations and the management of these facilities not only provides a transit center for refugees returning home, but often provides the most valuable and largest potentially undesignated and/or unspecialized infrastructure in communities of high return. Upon completion of returns the way stations could be used for social services including schools, health centers, etc. as may be determined by the local authorities.	<ul style="list-style-type: none"> Construct/maintain and manage way stations in Southern Sudan. Assist returnees with transport from the way stations to the nearest drop off points in their areas of return. 	Return of displaced women, men, girls, boys and elderly in safety and dignity including provision of HIV/AIDS awareness.	76,400 refugee women, men, girls, boys and elderly returned home in safety and dignity, appropriate to their individual needs and potential vulnerabilities.	Mabaan, Pagak, Nassir (Upper Nile); Bor (Jonglei); Kapoeta, Nimule, Magwi (Eastern Equatoria); Juba, Yei, Kajo Keji (Central Equatoria) ----- <ul style="list-style-type: none"> Refugee girls, 0-4 years old, 7,563; 5-17 years old, 14,745 Refugee boys, 0-4 years old, 7487; 5-17 years old, 15,285 Refugee women, 18-59 years old, 17,037 Refugee men, 18-59 years old, 12,071 Refugee female elderly, 60+ years old, 1,757 • ----- January - December 2008

Education and CultureTotal Sector Allocation: **\$1,442,218****Abyei****\$200,000**Regional Sector Priorities

- Ensuring the continuation of educational activities especially during the current rainy season and restoration of normalcy.

UNICEF 25-Jun-08 Index: 1253 [1]	SUD-08/E41 Access to Quality Basic Education in Abyei Area - [A] - [HIV][Gnd][CB][Env] - (HER)	\$200,000 <u>Project Budget</u> Q1: \$899,000 Q2: \$1,099,000 Q3: \$1,194,000 Q4: \$1,194,000	To facilitate emergency education to the IDPs and returning population to Abyei during the rainy season.	<ul style="list-style-type: none"> Provision of tents with reinforcement items for rain for emergency education activities for Abyei. 	<ul style="list-style-type: none"> 12 schools in Agok. Schools in Abyei and surrounding areas are supported with additional learning spaces and reinforcement to accommodate children. At least 5,000 children directly benefit from the learning spaces. 	<ul style="list-style-type: none"> 100 tents provided with reinforcement items (plastic sheets, etc.) 	Agok and Abyei and surrounding villages (will shift with population) ----- IDP children and children of host communities and schools. Direct beneficially at least 5,000 children. ----- July - September 2008
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Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
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Southern Kordofan		\$150,000				
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Regional Sector Priorities

- Abyei Emergency Response: Muglad was given an envelope of \$500,000 to address urgent needs.

<p>UNICEF 27-Jul-08 Index: 1249 [1]</p>	<p>SUD-08/E69 Quality Basic Education for Children in Southern Kordofan - [SK] - [HIV][Gnd][CB][Env] - (HER)</p>	<p>\$150,000 <u>Project Budget</u> Q1: \$1,315,000 Q2: \$1,845,000 Q3: \$3,216,000 Q4: \$3,216,000</p>	<p>Out of the \$4 million envelope for the Abyei emergency response, \$500,000 was set aside for organizations working on-the-ground in Muglad to address the most urgent needs.</p>	<ul style="list-style-type: none"> • Construct 4 cement and stone classrooms, rehabilitate 13 classrooms "preschool" and equip them with tables and chairs for teachers and bench/desks for pupils. • Provide educational materials (50 pupil kits (g 1-4) 50 teacher classroom kits, and 50 rec kits, playing sets to 650 children. • Train 100 teachers on child-centred teaching and learning approaches, English, mathematics, Arabic and HIV/AIDS prevention. • Train 15 School Education Committee members on knowledge and skills for child-friendly school management and awareness on HIV/AIDS prevention (2 days). • Conduct 2 enrolment drive targeting girls in 2 locations, in collaboration UNICEF Prog Communications section. • Conduct 3 monitoring visits to school and project sites to identify gaps and assess status of educational activities. 	<ul style="list-style-type: none"> • 13 classrooms "preschool" rehabilitated in IDP/returnee areas and 4 classrooms constructed in disadvantaged communities, improving classroom environment and facilitating enrolment of 2,000 children. • Teaching and learning resources provided to 15 schools enabling 2,000 children to participate more actively in the teaching and learning process. • 100 basic education teachers in IDP/returnee areas communities with increased knowledge and skills on child-centred teaching and learning approaches, English, mathematics, Arabic and HIV/AIDS prevention. • 15 School Education Committees in IDP/returnee areas communities with increased knowledge and skills on child-friendly school management and awareness on HIV/AIDS prevention. 	<ul style="list-style-type: none"> • 4 classrooms constructed and 13 rehabilitated. • Education materials provided to 2,000 children. • 100 teachers trained. • 2 enrollment drive conducted. • 15 PTA committees established. 	<p>Muglad, Southern Kordofan ----- 2,000 children (50% girls,) in first grade in basic education will benefit (650 children for pre school, 400 nomads) from low enrolment groups IDPs and returnee in Muglad and more than 400 teachers will benefit of improving teaching and learning environment, including participatory teaching and learning process in quality education. ----- July - December 2008</p>
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Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
Southern Sudan		\$1,092,218				
<i>Regional Sector Priorities</i>						
<ul style="list-style-type: none"> • Procurement and distribution of educational materials (teaching and learning). • Construction of learning spaces. 						
SC-UK 07-Jan-08 Index: 1223 [1]	SUD-08/E111 Improving the Quality of Basic Education for Children in Southern Sudan - [S] - [HIV][Gnd][CB][Env][ERA] - (HER)	\$388,000 <u>Project Budget</u> Q1: \$803,636 Q2: \$1,205,449 Q3: \$1,607,251 Q4: \$1,607,251	This project had requested \$1.16m inter alia for 960 children benefiting from 3 new schools of 24 classrooms rehabilitated, latrines constructed, boreholes drilled, and 6,000 items of furniture supplied; the training of teachers, head teachers and women did not fall under the current CHF first tranche 2008 priorities. Costs for Operations, Admin and Recovery were deemed very high, but costs for three schools were suitable. A school for Lakes and one for Jonglei would also duplicate other projects. It had been proposed to allocate \$450 000 for this project for two schools in Upper Nile and the third in Western Bahr-el-Ghazal. The recommendation is that SC/UK be allocated \$400,000 for two schools in Upper Nile, a high priority state, where building costs are higher than most others, as the period for construction is limited and it would be easier to administer the project in one state rather than two.	<ul style="list-style-type: none"> • Procure building materials and construction activities. 	<ul style="list-style-type: none"> • Two 8-classroomed schools constructed. 	<ul style="list-style-type: none"> • Two 8-classroomed schools constructed. <p>Jonglei State, Wurod and Nyirod Counties ----- 640 girls and boys ----- July - December 2008</p>
Stromme Foundation 07-Jan-08 Index: 1224 [2]	SUD-08/E115 Community-Based Education Interventions - [S] - [HIV][Gnd][CB][Env] - (HER)	\$200,000 <u>Project Budget</u> Q1: \$423,064 Q2: \$846,128 Q3: \$1,269,192 Q4: \$1,269,192	The proposal sought \$225,000 for 8 classrooms to be constructed at Good Hope Primary School in Unity State. This is a priority state with no other proposals submitted, and the cost of construction deemed fair as materials are far more expensive in northern areas of Southern Sudan. The recommendation is that Stromme Foundation be allocated \$200,000 for this project (as had previously earlier proposed) as Unity is one of the key states.	<ul style="list-style-type: none"> • Procure building materials and construction activities. 	<ul style="list-style-type: none"> • One 8-classroomed school constructed. 	<ul style="list-style-type: none"> • One 8-classroomed school constructed. <p>Unity State ----- 320 girls and boys ----- July - December 2008</p>
UNICEF 25-Jun-08 Index: 1267 [1]	SUD-08/E124 Child Friendly Schools - [S] - [HIV][Gnd][CB][Env] - (RD)	\$155,198 <u>Project Budget</u> Q1: \$800,000 Q2: \$1,700,000 Q3: \$2,195,230 Q4: \$2,195,230	To provide learning spaces is one of the sector priorities. The construction of a primary school in Akobo therefore fits into the overall sector priority. The life skills training provided is part of the child friendly school packages whereby schools receive not only a hardware packages but also the software which will enable children to make positive, healthy behaviour changes and lifestyle choices.	<ul style="list-style-type: none"> • Construction of 4 classrooms, 1 teachers' office and a store. • Conduct life skills training to promote an environment that is clean, healthy, protective inclusive and stimulating for children. • Joint planning: conduct joint planning sessions involving key stake holders in Akobo County, ensuring the overall responsibility for coordination and supervision is led by the County Authorities. • Community capacity building: through establishment of technical support teams within the communities and conduct of training in the planning and management of integrated services. 	<ul style="list-style-type: none"> • A four-classroom child friendly school including teachers office and store is constructed. • Promotion and creation of environments that are clean, healthy, protective, inclusive and stimulating for children. • Equitable positioning of basic services across communities and establishment of joint management bodies (including equal representation of gender and age groups) to plan and manage the services. 	<ul style="list-style-type: none"> • Construction of four classroom, one teachers office and a store. • Life skills, CAAF, hygiene promotion, health messages, HIV/AIDS and girls education provided to 397 girls and 940 boys. • Strengthened coordination enhanced capacity of communities, convergent and integrated delivery of basic services. <p>Akobo County, Jonglei State ----- 397 girls and 940 boys ----- 12 months implementation timeline from September 2008 - September 2009</p>

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UNICEF 07-Jan-08 Index: 1225 [3]	SUD-08/E126 Increased Access to Basic Education - [S] - [HIV][Gnd][CB][Env][ERA] - (HER)	\$349,020 <i>Project Budget</i> Q1: \$6,000,000 Q2: \$7,500,000 Q3: \$7,725,000 Q4: \$7,725,000	It was proposed to make up for the shortfall of \$800,000 on the original recommended allocation of \$2,000,000, the committee's recommendation is that UNICEF be allocated a further \$600,000. UNICEF is the only agency that procures bulk educational materials for distribution through partners and MOEST-GOSS.	• Procure and distribute teacher kits, student kits, school bags, 15 tents.	• Teaching and learning materials distributed to all schools in the 10 states of Southern Sudan.	• 1,750 teachers kits. • 1,750 students kits and 50,000 school bags, and 15 school tents procured.	All 10 states of Southern Sudan ----- 140,000 girls and boys ----- July - December 2008

Food Security and LivelihoodsTotal Sector Allocation: **\$9,063,550****Abyei \$500,000***Regional Sector Priorities*

• Food Security and Livelihoods (FSL) for the currently displaced population from Abyei and the surrounding villages, after the conflict in may in Abyei all of the population from Abyei and surrounding villages was displaced, the majority of this population moved south to Agok and other locations in Twic County, Warrab State. WFP is currently support this displace population with a General Food ration so as to alleviate hunger and protect fragile livelihood while this population is displaced.

WFP 25-Jun-08 Index: 1266 [1]	SUD-08/FSL31 Food Assistance - Conflict Affected and Displaced Populations - [S][D][A][BN][E][KN] - [Gnd][FA] - (HER)	\$500,000 <i>Project Budget</i> Q1: \$1,123,068 Q2: \$4,492,273 Q3: \$7,857,753 Q4: \$7,857,753	When IDPs return to Abyei they will have very limited access to food, employment will be limited, saving will have been spent during their long period of displacement, markets will take time to reestablish. The Abyei population were not traditionally dependent of agriculture production. Some crop may remain in the ground in surrounding villages but after the long period of displacement there is little chance for any of these crops to remain.	• General Food Distribution (GFD) to 15,000 returning IDPs.	• Reduce hunger and sustain livelihood during the initial period of return.	• GFD to 15,000 returning IDPs for a two-month period.	Abyei and surrounding villages ----- 15,000 IDPs ----- From the time IDPs start to return for a two-month period, as the time of writing IDPs have not started to return in significant number, therefore firm date are not yet available.
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Blue Nile \$650,000*Regional Sector Priorities*

• Provide access to food aid for vulnerable and highly food insecure groups and increasing the resiliency of livelihood coping mechanisms.
• Promote and strengthen livelihoods coping mechanisms through livelihoods diversification and income generating activities.
• Enhance and improve food security through agriculture (mostly horticulture) diversification support in the winter season.
• Support to natural resources management and rehabilitation and prevention and mitigation of natural resource conflict.
• Food security and livelihood assessment.

ADRA 01-Jul-08 Index: 1140 [6]	SUD-08/FSL129 Support Household Food Security and Livelihoods Among Returnees and Sedentary Communities in Geissan, Blue Nile - [BN] - [HIV][Gnd][CB][Env][ERA] - (HER)	\$200,000 <i>Project Budget</i> Q1: \$200,000 Q2: \$350,000 Q3: \$500,000 Q4: \$500,000	Assessments carried out in early 2008 indicated the strong need for interventions in Geissan locality. In partnership with the Canadian Food Grains Bank, a school feeding programme is operating, as part of the first phase of an expanded food security program in Damazine and Geissan localities. The supplementary funding will bridge the two phases and secure initiation of phase two. While continuing to emphasis activities that reduce acute food insecurity, the funding will strengthen activities which restore and maintain household food security.	• Distribute (restock) animals to selected families • Train farmers in improved farming skills • Establish model gardens and nurseries • Facilitate tree planting	• Increased productivity due to improved access to seeds, tools and improved methods. • Improved income due to increased animal production. • Improved nutritional status due to milk and food provided by increased access to animals. • Improved nutrition	• 1,500 animals distributed to 500 families. • 500 farmers trained in improved farming techniques and provided with seeds and tool. • 7 tree nurseries established and providing for local tree planning activities. • 6,000 fruit trees distributed and strategy.	7 villages in Geisan Locality (Blue Nile) ----- 500 HHs (2,500 individuals) ----- November-December 2008
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Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
<p>FAO</p> <p>01-Jul-08 Index: 1138 [2]</p> <p>SUD-08/FSL5 Support to Marginalized HHs Through Promoting and Strengthening Livelihoods Coping Mechanisms Including IGAs in Blue Nile State - [BN] - [Gnd][CB][ERA] - (HER)</p>	<p>\$350,000</p> <p><u>Project Budget</u> Q1: \$500,000 Q2: \$700,000 Q3: \$700,000 Q4: \$700,000</p>	<p>Between January and April 2008, some 5,524 refugees were repatriated from Ethiopia to Samari, Challi, Wadega and Bellia in Kurmuk Locality. 14,000 vulnerable returnees were re-verified and registered for food assistance during the hunger gap and 1,700 spontaneous returnees were registered in Kelly. Minimal service provision throughout the state has been exacerbated by floods and funding gaps. 59% of the planned crop and vegetable seeds have been prepositioned however, additional funding for winter season cultivation is necessary to strengthen the food security throughout the state.</p>	<ul style="list-style-type: none"> • Provision of basic agricultural inputs for winter season cultivation. • Provision of fishing and veterinary services support. 	<ul style="list-style-type: none"> • The project will support reintegration through food security and IGA activities targeting the affected population to strengthen livelihoods. • The assistance will mitigate and decrease the effects of resource based conflicts. 	<ul style="list-style-type: none"> • 5,524 returning refugees from Ethiopia. • 24,700 vulnerable returnees (including spontaneous returnees). 	<p>Damazine, Kurmuk, Gissan, Bou, Resseris, Tadamon Localities (Blue Nile State) ----- 5,524 returning refugees from Ethiopia 24,700 vulnerble returnees (including spontaneous returnees) ----- July-December 2008</p>
<p>WFP</p> <p>01-Jul-08 Index: 1139 [5]</p> <p>SUD-08/FSL31 Food Assistance - Conflict Affected and Displaced Populations - [S][D][A][BN][E][KN] - [Gnd][FA] - (HER)</p>	<p>\$100,000</p> <p><u>Project Budget</u> Q1: \$153,618 Q2: \$614,473 Q3: \$1,074,819 Q4: \$1,074,819</p>	<p>In April 2008 a food security assessment was conducted in Kurmuk County, Blue Nile. Results of the assessment included high rates of malnutrition and that 86 percent of the households are in a food security situation where their lives are at risk. The lean season is from May to August, and situation in the coming six months is not likely to improve but get worse due to little food production combined with isolation during the rainy season that makes transportation almost impossible. The recommendations of the report were to increase food rations for beneficiaries to 100% (currently at 50%) during the lean season. Total requirement to meet the increased food rations is \$299,355; WFP requested \$100,000 from CHF.</p>	<ul style="list-style-type: none"> • Provide a total of 285 MT of additional food commodities (238 MT cereals, 26 MT pulses, 16 MT v.oil and 5 MT salt) 	<p>Registered and verified vulnerable beneficiaries in Kurmuk Locality provided with additional food commodities during the period June to Sept 2008.</p>	<ul style="list-style-type: none"> • 8,000 beneficiaries provided with 285. • 1MT of additional food commodities. 	<p>Borfa, Gindi, Challi, Kulanoguru, Pudom, Korbodi, Surkum, Zeriba, Ora, Kurmuk, Kelli, and Korot (Blue Nile State) ----- 8,000 food insecure beneficiaries ----- July-September 2008</p>

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Darfur **\$6,100,000**

Regional Sector Priorities

- To reduce acute food insecurity among vulnerable populations.
- To promote and strengthen livelihoods coping mechanisms with emphasis on food security and livelihood assessments and support to winter season production.

<p>CARE 14-Jul-08 Index: 1185 [1]</p>	<p>SUD-08/FSL26 Integrated Community Based Food Security and Livelihoods Project in Southern and Western Darfur States - [D] - [HIV][Gnd][CB][Env][FA] - (HER)</p>	<p>\$250,000 <u>Project Budget</u> Q1: \$250,000 Q2: \$440,000 Q3: \$530,000 Q4: \$530,000</p>	<p>The second round of allocation will fully fund the project and allow it to fully realize its objectives. Vegetable crops and winter crops represent a significant source of seasonal income and offer employment opportunities for women and those without land. The current allocation will continue to enhancing livelihoods activities targeting mainly poor and the most vulnerable households with access to land achieve improved agricultural production and start new income generating activities to improve economic security, reduce aid dependency, and cultivate resilience in the population.</p>	<ul style="list-style-type: none"> • Income Generating activities targeting mainly women. • Establish small scale irrigations for winter season production and environmental conservation. • Capacity building for farmers through Farmers Field Schools. • Capacity Building of LNOs and VDCs. • Environmental conservation through planting of fruit tree. • Provide extensions services through progressive farmers. • Provide of seeds and tools for winter season production. 	<ul style="list-style-type: none"> • 40,000 vulnerable farming households improved food security through increased crop production, accessing seeds and tools and IGA activities in West and South Darfur. • 1,000 HH met their household food needs through increased knowledge in food production, and income generation activities. • 1,000 HH improved environmental conservation through increased environmental awareness, distributed and planted tree seedlings, and piloted revived systems for rangeland management. 	<ul style="list-style-type: none"> • Well established and participatory local committees throughout project implementation. • 40,000 HHs produced their own food. • 10,000 tree seedlings produced and distributed; 1000 HH from the 3 communities have improved environmental conservation through increased environmental awareness, distribution and planted tree seedlings. • 500 trained farmers benefited from ToT in Farmers Field School the project sites. 1000 vulnerable families have access to IGA grants through VDCs. 	<p>Western and Southern Darfur ----- Most vulnerable household ----- July - December2008</p>
<p>FAO 14-Jul-08 Index: 1187 [3]</p>	<p>SUD-08/FSL14 Supporting Livelihoods Enhancement and Natural Resource Base Restoration and Protection In Affected Areas of the Greater Darfur Region - [D] - [HIV][Gnd][CB][Env][FA] - (HER)</p>	<p>\$2,925,000 <u>Project Budget</u> Q1: \$4,000,000 Q2: \$7,500,000 Q3: \$9,647,000 Q4: \$9,647,000</p>	<p>The poor cereal harvest in 2007/08 and associated sharp rise of the prices observed in the region is expected to further aggravate structural food insecurity problem in the region. Intensifying localized food security and livelihoods monitoring /assessment is critical for early identification and response to further deterioration of food security indicators and to inform programming. Given current shortfalls in distribution, ensuring winter season crop and vegetable production is pivotal to strengthening household food security and generating income. The project targets female HoH, promotes safer income generating activities and environmental degradation related to unsustainable IGAs.</p>	<ul style="list-style-type: none"> • Food security monitoring, raise awareness of deteriorating FSL situation. • Develop and disseminate livelihoods assessments guidelines and conduct assessments. • Provide winter vegetable production inputs and materials. • Support efficient water utilization and management system and agro forestry schemes. • Enhance animal health care in camps, and consolidate community-based services. • Provide supplementary feeding to most vulnerable animals during lean period. • Rehabilitate veterinary centers and units. • Facilitate targeted IGAs. 	<ul style="list-style-type: none"> • Increased vulnerable communities' own food production. • Enhanced income generation mechanisms enhanced among women. • Natural resources degradation prevented and rehabilitated. • Livestock assets protected and restored for the most vulnerable and marginalized HHs. • Food security and livelihoods situation well understood and information shared. 	<ul style="list-style-type: none"> • 8,000 HH supported with agricultural inputs and are producing. • 1,000 HH with priority to female headed households receive support for income generations. • At least 200,000 multipurpose tree seedlings are produced and distributed. • 25,000 livestock holders supported with preventive and curatives services. • CAHW trained; Darfur-wide FSL assessment conducted with partners. 	<p>Northern, Western, and Southern Darfur ----- Vulnerable rural population ----- July - December 2008</p>

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
WFP 14-Jul-08 Index: 1186 [2]	SUD-08/FSL31 Food Assistance - Conflict Affected and Displaced Populations - [S][D][A][BN][E][KN] - [Gnd][FA] - (HER) \$2,925,000 <i>Project Budget</i> Q1: \$73,995,450 Q2: \$295,981,800 Q3: \$517,722,710 Q4: \$517,722,710	<p>Ongoing insecurity and the poor harvest, resulted in new displacement and new arrivals to IDP camps in Northern, Western and Southern Darfur. Approximately 100,000 additional beneficiaries in camps will require assistance throughout the year. A poorer than expected 2007-2008 cereal harvest in Darfur, has increased food insecurity in the rural areas. Up to 800,000 additional people will require seasonal assistance. Additional food requirements result from the inclusion of additional beneficiaries in the original caseload and earlier than planned initiation of seasonal support. FSL partners will conduct the Darfur Food Security and Livelihoods Assessment in October 2008. Assessment findings will outline interventions by all stakeholders engaged in the Darfur FSL sector response.</p>	<ul style="list-style-type: none"> Seasonal support to vulnerable populations. Assistance to additional displacement and new arrivals to IDP camps. 	<ul style="list-style-type: none"> Conduct regional Food Security and Livelihoods Assessment, in addition to seasonal food aid support for vulnerable populations, and for new arrivals to IDP camps. 	<ul style="list-style-type: none"> 800,000 seasonal beneficiaries. 100,000 new IDP camp arrivals. 	Northern, Western, and Southern Darfur ----- Vulnerable rural population and new IDPs ----- July - December 2008

Eastern States	\$775,000
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Regional Sector Priorities

- Ensure timely and adequate provision of food to the most vulnerable among the flood affected people during two months.
- Protect livelihoods and restore assets for flood affected communities.
- To restore agricultural and livestock production capacities of the flood affected farmers, livestock owners and vulnerable Households in the flood affected areas.

FAO 08-Jul-08 Index: 1154 [1]	SUD-08/FSL32 Emergency Food Security and Livelihoods Support to Targeted Crisis-Affected Vulnerable Residents, IDPs and Refugees in Eastern Sudan - [E] - [HIV][Gnd][CB][Env][ERA] - (HER) \$50,000 <i>Project Budget</i> Q1: \$1,350,000 Q2: \$2,000,000 Q3: \$2,300,000 Q4: \$2,300,000	<p>The needs assessments will be conducted under the leadership of FAO and participation of line Ministries and NGOs/agencies partners. The assessments will use secondary information while household interviews, key informant interviews and Focus Group Discussions will be conducted in order to collect primary data on households level activities; agricultural and livestock marketing and community level agricultural and livestock activities. The assessments will supplement existing data collected earlier in the year, and will identify harmful affects of floods to livelihoods and provide an outline for appropriate response.</p>	<p>The activities to be undertaken would involve preparation of tools/questionnaires to be used, identification of enumerators particularly from Government extension staff and others, carry out training for a few days (at least three) on the methodologies of assessment, questionnaires, data collection, etc., data analysis and report writing on the findings.</p>	<p>Immediate needs of affected population, clearly identified, and appropriate response needs articulated.</p>	<p>Assessments completed, and needs articulated.</p>	Eastern States, Blue Nile, Southern Kordofan State ----- Flood-affected population ----- July-August 2008
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Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
FAO 14-Jul-08 Index: 1145 [2] SUD-08/FSL32 Emergency Food Security and Livelihoods Support to Targeted Crisis-Affected Vulnerable Residents, IDPs and Refugees in Eastern Sudan - [E] - [HIV][Gnd][CB][Env][ERA] - (HER)	\$225,000 <u>Project Budget</u> Q1: \$1,350,000 Q2: \$2,000,000 Q3: \$2,300,000 Q4: \$2,300,000	The FSL sector meeting in Eastern States reviewed the projects submitted, and recommended to the FSL Steering Committee in KRT that this project receive funding. The FSLSC used the project prioritization tool, to rank the four projects submitted to Eastern States. This project was ranked high in meeting overall sector priorities and had already received CHF funding. The additional funds will strengthen and ensure ongoing activities are fully realized including livestock and agricultural support activities. This project will contribute to the support of new asylum seekers, refugees and vulnerable host communities.	<ul style="list-style-type: none"> • Provision of essential agricultural inputs to support the winter season cultivation. • Promotion of IGAs, through training and provision of necessary supplies and equipment. • Enhance alternative source of cooking energy; equipments, awareness raising and training. 	The project will create livelihood opportunities for targeted beneficiaries, in terms of recovery, re-integration and return to their place of origin. It will mitigate and decrease the effects of resources based conflicts.	1,840 returnee, IDP, and vulnerable host community HH and 5,000 ex-combatants (from Eritrea)	Kassala and Red Sea State ----- Vulnerable groups among returnees, ex-combatant, refugees, IDPs and host communities, with focus on female headed households. ----- July-December 2008
UNHCR 14-Jul-08 Index: 1146 [3] SUD-08/FSL134 Support to Refugees and Refugee Hosting Areas in Eastern Sudan (FSL Component) - [E] - [CB][Env] - (HER)	\$175,000 <u>Project Budget</u> Q1: \$1,399,608 Q2: \$2,099,413 Q3: \$2,754,164 Q4: \$2,754,164	The FSL sector meeting in Eastern States reviewed the projects submitted, and recommended to the FSL Steering Committee in KRT that this project receive funding. The FSLSC used the project prioritization tool, to rank the four projects submitted to Eastern States. This project was ranked high in meeting overall sector priorities. This project will provide a stop gap until the provision of food assistance to new asylum seekers and targeted refugees is conducted. Within the context of providing seed money for vulnerable groups, funds for the purchase of food for newly-arrived refugees, pending receipt of WFP food ration cards.	<ul style="list-style-type: none"> • Provide financial assistance as seed money/ food for new arrivals. 	New refugees and asylum seekers will be able to buy food until food aid is available.	17,000 refugees and asylum seekers	Kassala, Red Sea and Gedaref State ----- Refugees and asylum seekers ----- July-December 2008
WFP 08-Jul-08 Index: 1155 [2] SUD-08/FSL31 Food Assistance - Conflict Affected and Displaced Populations - [S][D][A][BN][E][KN] - [Gnd][FA] - (HER)	\$100,000 <u>Project Budget</u> Q1: \$1,195,800 Q2: \$4,783,200 Q3: \$8,366,634 Q4: \$8,366,634	The needs assessments conducted with the participation of line Ministries and NGOs/agencies partners. The assessments will use secondary information while household interviews, key informant interviews and Focus Group Discussions to determine affected population and inform emergency programming.	Transportation of food aid to flood affected population.	Food aid provided to affected population.	20,000 flood-affected beneficiaries	Eastern States ----- Flood-affected population ----- September - December 2008

Project Details		CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
WFP 14-Jul-08 Index: 1144 [1]	SUD-08/FSL31 Food Assistance - Conflict Affected and Displaced Populations - [S][D][A][BN][E][KN] - [Gnd][FA] - (HER)	\$225,000 <u>Project Budget</u> Q1: \$1,195,800 Q2: \$4,783,200 Q3: \$8,366,634 Q4: \$8,366,634	The FSL sector meeting in Eastern States reviewed the projects submitted, and recommended that this project receive funding. The FSLSC used the project prioritization tool, to rank the four projects submitted to Eastern States. This project was ranked high in meeting overall sector priorities. This project will contribute to the provision of food assistance to new asylum seekers and targeted refugees. WFP planned to provide food assistance to 2300 asylum seekers/month, however the number of new asylum seekers/month has more than doubled to 5300 necessitating an additional 291.6 MT of food from July to December 2008. Additionally, the planning figure of 37,000 targeted refugees has been surpassed by 3,000 which requires an additional 194 Mt of food.	• General Food Distribution	Physical well-being of refugees and asylum seekers ensured.	40,000 refugees and 5300 asylum seekers per month provided with food aid.	Kassala and Gedaref State ----- Asylum seekers and refugees. ----- July-December
Southern Kordofan		\$630,000					
<u>Regional Sector Priorities</u>							
<ul style="list-style-type: none"> • Provide access to food aid for vulnerable and highly food insecure groups and increasing the resiliency of livelihood coping mechanisms. • Promote and strengthen livelihoods coping mechanisms through livelihoods diversification and income generating activities. • Enhance and improve food security through agriculture (mostly horticulture) diversification support in the winter season. • Support to natural resources management and rehabilitation and prevention and mitigation of natural resource conflict. • Food security and livelihood assessment. 							
CARE 01-Jul-08 Index: 1142 [2]	SUD-08/FSL52 Livelihoods and Food Security Re-Establishment Project - [SK] - [Gnd][CB][Env][ERA] - (HER)	\$200,000 <u>Project Budget</u> Q1: \$200,000 Q2: \$500,000 Q3: \$700,000 Q4: \$700,000	This project focuses on increasing food production and improving food security among both returnees and residents. In response to the gap in crop production, the activities mentioned above will help improve production quality and quantity. Additionally, the project addresses the scarcity of vegetables that affects the balance diet of a bigger population and represents a significant source of seasonal income especially for women and those can access bigger market towns as well as winter season crops which offer employment opportunities for women and those without land. The additional inputs will improve agricultural production which in turn will contribute to improved economic security, a reduction in aid dependency, and cultivates food security resilience.	<ul style="list-style-type: none"> • Agriculture extension services • Training in and inputs for vegetable production • Training in pest control • Post harvest activities 	<ul style="list-style-type: none"> • Improved crops and vegetable production, improved nutritional status among the beneficiaries, better farming, harvest and post harvest practices. 	<ul style="list-style-type: none"> • 140 kg of vegetable seeds. • 10,000 pieces of hand tools and irrigation equipments procured and distributed to 2,000 households. • 500 individuals trained in vegetable production, pest control, harvest and post harvest practices. 	Kadugli, Dilling, Lagawa Localities (Southern Kordofan State) ----- 1,200 returnee households (both organized and spontaneous) 800 host community ----- July-December 2008

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
FAO 27-Jul-08 Index: 1250 [1]	SUD-08/FSL53 \$80,000 <u>Project Budget</u> Q1: \$4,000,000 Q2: \$5,000,000 Q3: \$5,600,000 Q4: \$5,600,000	Out of the \$4 million envelope for the Abyei emergency response, \$500,000 was set aside for organizations working on-the-ground in Muglad to address the most urgent needs.	<ul style="list-style-type: none"> Procure veterinary supplies and shipped to the area. Organize and support CAHWs with equipment. Carry out vaccination campaign and provide veterinary services to livestock owners. Carry out extension camps and disseminate extension message. Disseminate peace building culture among livestock owners. 	<ul style="list-style-type: none"> 150,000 head of cattle vaccinated against 2 endemic diseases and 100,000 small ruminant vaccinated against sheep pox. Livestock owners received veterinary services through trained CAHWs. The most killing diseases under control and production increased. Extension message spread among livestock owners and awareness raised. Peace building culture disseminated among livestock owners. 	<ul style="list-style-type: none"> 450,000 doses of vaccines procured and distributed. 5,000 units of veterinary drugs procured and distributed. 300 units of CAHWs kits and 250 units of vaccination and treatment kits procured and distributed. 3 wet season extension camps conducted, peace culture and extension messages disseminated. CAHWs organized and supported. 	al Muglad and Meiram Administrative Units, Abyei ----- Livestock owners ----- August - December 2008
FAR 01-Jul-08 Index: 1141 [1]	SUD-08/FSL55 \$150,000 <u>Project Budget</u> Q1: \$200,000 Q2: \$300,000 Q3: \$400,000 Q4: \$400,000	The project addresses recommendations of the Interagency Rapid Food Assessment that indicated a great need for increased income to enhance food security. Unsustainable livelihood practices of selling firewood, charcoal and grass will be addressed by the project, and offset by increased community awareness, and increased support to new income generating schemes. The \$400,000 project was allocated \$250,000 by CHF for agricultural inputs and the initiation of IGA trainings. The additional \$150,000 will address both humanitarian and longer term environmental and food security needs in the area. The additional allocation will fully fund the project.	<ul style="list-style-type: none"> Income generating projects/credit to improve their basic livelihoods. Windbreaker seedlings, shade and fruit trees distributed to communities targeting schools, clinics, irrigation sites, community establishments. Communal forestry units established. Environmental conservation campaigns. Workshops for local leaders conducted in environmental conservation. Bi-laws produced by local leaders to govern environmental practices in communities. 	<ul style="list-style-type: none"> Increased household income. Increased vegetable and poultry production and therefore increased HH food security. Increased environmental awareness of community leaders and children and environmental protection laws passed. 	<ul style="list-style-type: none"> 150 HHs participated in IGAs. 3,500 HHs have increased knowledge and practices of natural resource management. 3,500 HHs supported with FFW/FFA to initiate environmental conservation and IGAs. 2 Fruit tree seedling nurseries established with a total of 6,400 fruit tree seedlings. 	Dilling Locality, Dilling County ----- At least 5,000 HHs received environmentally sustainable livelihoods support ----- July-December 2008
WFP 01-Jul-08 Index: 1143 [3]	SUD-08/FSL31 \$200,000 <u>Project Budget</u> Q1: \$0 Q2: \$0 Q3: \$0 Q4: \$546,558,517	SK experienced heavy rain fall and floods in 2007 (July/August) that weakened food security situation of the affected HHs. About 80% of the HHs in SK depend on agriculture. The heavy rains and water lodging destroyed the crops resulting in poor and low yields. In response to this natural calamity there was a call for an interagency rapid food security assessment to ascertain the impact. The SMOA post harvest report states that 2007 crop performance and yields was lower than 2006. Further, WFP VAM interagency rapid food security assessment in March 2008 revealed that 35% of the HHs were severely food insecure; and 41% were moderately food insecure. Most of these severely food insecure HHs were reported to be returnees.	777.6 MT of assorted food is required to cover the hunger gap period during the month of June to September 2008.	<ul style="list-style-type: none"> Most vulnerable provided with food aid during the hunger gap. 	32,000 Beneficiaries provided with 777.6 MT of food aid	Al Akhwal, Kurum, Remaila in Kadugli; Kao, Naro, Askut, Fungor in Abu Gabeiha (Southern Kordofan State) ----- 32,000 vulnerable beneficiaries ----- July-September 2008

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline	
Southern Sudan		\$408,550					
<i>Regional Sector Priorities</i>							
<ul style="list-style-type: none"> • Improve targeting of the most vulnerable households especially female headed households for food aid and agricultural inputs. • Provide food, agricultural inputs and other livelihood support inputs to IDPs, returnees and host communities. • Protect livelihoods of vulnerable host communities especially female headed households through targeted approach assistance. • Promoting access to land and mitigate resources based conflicts in collaboration with Government and other key partners as a means to support resettlement and reintegration of returnees and IDPs. • Improve crop, livestock, and fisheries production by IDPs, returnees and host communities. • Improve access to food production inputs and techniques at households' level. 							
FAO 25-Jun-08 Index: 1221 [1]	SUD-08/FSL79 Livelihoods Recovery for Returnees, IDPs and Vulnerable Households through Access to Land for Production and Settlement - [S] - [Gnd][CB][Env][ERA] - (HER)	\$208,550 <u>Project Budget</u> Q1: \$280,420 Q2: \$482,020 Q3: \$482,020 Q4: \$482,020	<p>Access to land by returnees, IDPs and vulnerable population for agricultural and livelihood related activities is crucial for return and reintegration of returnees and IDPs. There has been little attention or support to the issue of access to land especially for returnees, IDPs and vulnerable host communities and land disputes resolution. Thus, the project aim to address access to land by returnees, vulnerable persons as well as supports government to create an environment for equitable access to land by all stakeholders, land disputes resolution and contributing to land policy development process.</p>	<ul style="list-style-type: none"> • Conduct training for 150 civil and traditional leaders in land disputes resolution. • Organise and conduct information dissemination workshops for stakeholders on land and property rights in two states and three counties. • Organise and conduct training for 15 trainers in land and property rights. • Conduct workshop on land and property rights in 5 counties. • Assess extent of competing land claims and by who in order to develop guidelines for resolving disputes through traditional mechanisms. • Create regular dialogue with local authorities to assess mechanism for access to land by returnees, IDPs and vulnerable resident households particularly women headed households in rural, peri-urban and urban area. 	<ul style="list-style-type: none"> • Improved access to land by returnees and vulnerable population for enhanced agricultural and livelihood activities. • Sustainable food production by returnees and vulnerable resident population increased for 10,000 households. • Access to land by women and women headed households is improved. 	<ul style="list-style-type: none"> • Needs assessment conducted in three priority states; assessment on access to land and conflict transformation carried out in three priority states. • Training in ARD for 150 traditional and civil administrators in three states carried out; workshop on land and property rights conducted in 2 states and 3 counties. • 15 trainers in land and property rights trained and land rights information dissemination conducted in at least 5 counties and training in ARD for 150 traditional and civil administrators in 3 states carried out. 	Eastern Equatoria (Magwi County), Central Equatoria (Juba and Yei counties), Jonglie (Bor County) and Northern Bahr el Ghazal ----- <ul style="list-style-type: none"> • Direct beneficiaries include 10,000 households of returnee and vulnerable population; 50% of which are female headed households. • Indirect beneficiaries are resident population in Northern Bahr el Ghazal, Jonglie and Eastern Equatoria states receiving the returnees. ----- June - December 2008
World Vision 25-Jun-08 Index: 1222 [2]	SUD-08/FSL122 Poultry Restocking project for Women in Western Equatoria - [S] - [HIV][Gnd][CB][Env][ERA] - (HER)	\$200,000 <u>Project Budget</u> Q1: \$300,000 Q2: \$350,000 Q3: \$375,000 Q4: \$400,000	<ul style="list-style-type: none"> • Western Equatoria State has received large numbers of returnees since the signing of the CPA in 2005. Attributed to its proximity to Central Africa Republic and Uganda, 156,400 returnees were received into the State between 2004 and 2007. FAO/WFP projected the return of an estimated that 67,000 returnees (refugees and IDPs) will return to the state in 2008. The returnees, majority of who are spontaneous often arrive with nothing and often require assistance from humanitarian organizations to enable them get back on their feet. Furthermore, the increased food demand owing to the returnee influx from CAR and DRC continues to cause escalation of market prices for food commodities. • The project is designed to improve poultry production and productivity of especially female headed HHs in Western Equatoria; CHF resources will facilitate timely procurement of inputs as well as successful implementation of the planned activities. This project will enhance early recovery opportunities especially for women. 	<ul style="list-style-type: none"> • Provide training on various poultry management and productions skills. • Provide critical inputs including vaccines and improved poultry breeds into local poultry system to improve productivity. • Co-ordinate with MOARF at State and GoSS to ensure no risk of disease outbreak as a result of project activities. 	<ul style="list-style-type: none"> • 3,000 HHs resourced with improved poultry breeds and trained in improved poultry management. 	<ul style="list-style-type: none"> • 3,000 HHs reached with improved poultry breeds. • 3,000 HHs trained in improved poultry management. 	Yambio and Ezo Counties, Western Equatoria ----- 3,000 HHs (15,000 women) ----- June - December 2008

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
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Health and Nutrition

Total Sector Allocation: **\$9,086,185**

Abyei **\$250,000**

Regional Sector Priorities

- Ensuring access to health care services.
- Revitalization of the damaged health system.

UNICEF 25-Jun-08 Index: 1254 [2]	SUD-08/HN169 Integrated Essential Health Services for Conflict-affected Populations in Abyei - [A] - [HIV][CB][ERA][FA] - (HER)	\$100,000 <u>Project Budget</u> Q1: \$400,000 Q2: \$600,000 Q3: \$999,320 Q4: \$999,320	These funds will be used to increase the access of conflict-affected populations in Abyei to essential primary health care services.	<ul style="list-style-type: none"> • Procure and provide essential PHC supplies and equipment (PHC kits, IMCI drug kits, IMCI equipment) for conflict-affected populations in Abyei and surrounding areas. 	<ul style="list-style-type: none"> • Resumption of PHC services for conflict-affected populations. • Increased access and quality of PHC services. 	<ul style="list-style-type: none"> • 25,000 returnees and host communities in Abyei have access to PHC services. 	Abyei Area ----- 25,000 people ----- <ul style="list-style-type: none"> • Procurement of supplies and equipment by end September 2008. • Provision of supplies and equipment by mid October 2008.
WHO 25-Jun-08 Index: 1255 [1]	SUD-08/HN158 Increased Access to Health Care Services in the Abyei Area for Returnees, IDP's Vulnerable Groups and Host Community, through Establishment and Strengthening of a Sustainable Local Health Care System - [A] - [HIV][Gnd][CB] - (HER)	\$150,000 <u>Project Budget</u> Q1: \$250,000 Q2: \$380,000 Q3: \$570,000 Q4: \$570,000	Filling critical gap in emergency health care for 50,000 population in Abyei Area by supporting the first level referral health facility services	Functional rehabilitation of hospital in Abyei, i.e. outpatient department, surgical ward, lab/emergency room.	<ul style="list-style-type: none"> • Functional hospital in Abyei. 	<ul style="list-style-type: none"> • Functioning OPD emergency services for 50,000 people. 	Abyei Town ----- 50,000 population ----- August - December 2009

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline	
Blue Nile		\$462,000					
<i>Regional Sector Priorities</i>							
<ul style="list-style-type: none"> • Ensuring access to health care services at primary care level i.e. maternal and child care and emergency services. • Floods season preparedness and emergency response in conflict areas including pre-positioning of emergency supplies. • Hygiene promotion interventions to mitigate and protect against water-borne and vector-borne disease. • Nutrition to the most vulnerable (TFC/SFC). 							
UNICEF 08-Jul-08 Index: 1194 [5]	SUD-08/HN173 Integrated Essential Health Services for Conflict-affected Populations in Blue Nile State - [BN] - [HIV][Gnd][CB][ERA][FA] - (HER) <u>Project Budget</u> Q1: \$300,000 Q2: \$500,000 Q3: \$744,333 Q4: \$744,333	\$200,000 <u>Project Budget</u> Q1: \$300,000 Q2: \$500,000 Q3: \$744,333 Q4: \$744,333	Blue Nile State has been affected by years of civil war which has left the region with severely damaged infrastructure. It is estimated that 235,000 people of the 800,000 population have been directly affected by the civil war, fleeing the state to refugee camps in neighboring Ethiopia and to internally displaced person (IDP) locations within the state and within other states. Almost 75% of the population of the state live in rural areas. It is estimated the total number of people that are internally displaced in the state is 165,000 people and 50% will slowly return to their homeland if the security situation remains calm. Services across health, water and sanitation in the state are poor, or non-existent, in areas where services are critically required. An UNICEF 'basic services by state' ranking exercise ranked the Blue Nile State among the lowest states in the country with regard to availability of basic social services. The funding priorities in Blue Nile State remain focused on rehabilitation of its infrastructure and facilities to provide basic services to its population.	<ul style="list-style-type: none"> • Provide refresher training for 50 VMWs in Bau and El Kurmuk. • Rehabilitate 2 PHC units in CFCI communities. • Provide 100 VMW kits and 2500 LLITNS. • Organise establishment of 2 school clubs. • Provide supplies and equipment for school clubs, condu 	<ul style="list-style-type: none"> • 50 VMWs trained and provide comprehensive ANC for 2,200 pregnant women in Bau and El Kurmuk. • 2 PHC Units rehabilitated. • 2,500 pregnant women will receive a package of ANC. • School health programme in 2 sites will be strengthened. • Improved inf 	<ul style="list-style-type: none"> • 2,200 pregnant women will receive a comprehensive package of ANC. • School health programme in the localities of Bau and El Kurmuk will be provided with an integrated package that includes IMCI/ORT, IYCF/GMP, vitamin A supplementation, home management of 	Bau, Gaisan and Al Kurmuk in Blue Nile State ----- 230,000 persons including 117,370 children <5 years in conflict-affected areas ----- • Organise school clubs (August - December 2008) • Provide supplies (September - December 2008) • Conduct peer education (September - December 2008) • Refresher training for VMWs (August - September 2008) • Rehabilitation of PHC units (August 2008) •
UNICEF 08-Jul-08 Index: 1193 [1]	SUD-08/HN175 Blue Nile Emergency Nutrition and Recovery Project - [BN] - [HIV][Gnd][CB] - (HER) <u>Project Budget</u> Q1: \$75,000 Q2: \$100,000 Q3: \$142,310 Q4: \$142,310	\$100,000 <u>Project Budget</u> Q1: \$75,000 Q2: \$100,000 Q3: \$142,310 Q4: \$142,310	The fund will be used to support lifesaving activities to procure supplies and build the MOH capacity to manage and treat severely and moderately malnourished children using the national quid lines and protocols. Please note nutrition sector did not receive any fund during the first CHF allocation. No commitment from donor to support to Blue Nile. This allocation is the minimum funding required to reach target by the end of the year.	<ul style="list-style-type: none"> • Procurement of nutrition supplies/equipment (F100, F75, plumpy nut, resomal and drugs, micronutrients supplement. • Training of MOH staff TFC and SFC, guidelines and implementation. 	<ul style="list-style-type: none"> • Improved nutritional status in children under-5 and decreased mortality as a result of appropriate treatment. 	500 severely malnourished children between 6-59 months are treated according to appropriate protocols.	Blue Nile State ----- 500 severely malnourished children 6-59 months old ----- July - December 2008
WHO 08-Jul-08 Index: 1195 [6]	SUD-08/HN160 Improve Access to Quality Health Care Services for Affected Population and Host Community by Strengthening the Health Care Delivery System - [BN] - [HIV][CB][Env] - (HER) <u>Project Budget</u> Q1: \$300,000 Q2: \$400,000 Q3: \$500,000 Q4: \$500,000	\$162,000 <u>Project Budget</u> Q1: \$300,000 Q2: \$400,000 Q3: \$500,000 Q4: \$500,000	Provider of service for underserved. High risk of seasonal outbreak - timebound intervention, life saving. This is allocation is the minimum funding required to reach targets by the end of the year.	<ul style="list-style-type: none"> • Increase access to quality free primary and secondary health care through provision of medical supply and laboratory kit especially for IDPs and affected population. • Improve access to minimum package of PHC services at health facilities through ca 	<ul style="list-style-type: none"> • Increased access to health and nutrition services through trained staff and supplies. • Strengthened disease surveillance system, VCT-HCT- ARTs expanded in rural areas. 	<ul style="list-style-type: none"> • 85% of reporting sites functioning. • 2 remote rural hospitals are equipped with trained staff and emergency drugs. • All outbreak rumours verified. 	<ul style="list-style-type: none"> • Rural hospital of Badus, Roaro and Abu-Gumoie, public health laboratory of Blue Nile. • Geissan, Bau, Kurmuk, Rossieress, Tadamon and Damazin Localities. ----- 1 million population ----- July - December 2008

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline	
Darfur		\$3,950,000					
<i>Regional Sector Priorities</i>							
<ul style="list-style-type: none"> • Ensuring access to health care services at primary care level i.e. maternal and child care, and emergency services. • Floods season preparedness and emergency response in conflict areas including pre-positioning of emergency supplies. • Hygiene promotion interventions to mitigate and protect against water-borne and vector-borne disease. • Nutrition to the most vulnerable (TFC/SFC). 							
AHA 08-Jul-08 Index: 1203 [8]	SUD-08/HN238 Provision of Basic Primary Health Care to Residents and IDPs in Mellit, Sayaha, Sarfaya, Birka and Korma, North Darfur. - [D] - [HIV][Gnd][CB][Env] - (HER)	\$200,000 <u>Project Budget</u> Q1: \$180,900 Q2: \$300,000 Q3: \$500,000 Q4: \$980,900	Poor primary health coverage and associated high maternal mortality in all the targeted areas. There is no any other operational INGO all over the targeted areas. Children who are under 5 yrs of age in the targeted areas have low vaccination coverage. Health facilities are inaccessible and the professionals lack capacity.	<ul style="list-style-type: none"> • Rehabilitation of health infrastructure. • Provision of basic medical equipment, reagents and essential drugs for the Health facilities. • Training of health service providers. • EPI campaign, ANC and ensure safe delivery. • Timely reporting, monitoring and evaluation, etc. 	Improved health service delivery.	84,647	Mallit, Sayeh and Malha ----- 233,117 people ----- July - December 2008
ARC 08-Jul-08 Index: 1200 [5]	SUD-08/HN57 Humanitarian Support for Conflict Affected Persons and Communities in South Darfur - [D] - [HIV][CB] - (HER)	\$446,984 <u>Project Budget</u> Q1: \$1,000,000 Q2: \$2,000,000 Q3: \$3,000,000 Q4: \$3,375,608	Integrated approach, service provider in underserved area.	<ul style="list-style-type: none"> • Continue to support 4 PHCC in the Nyala- Gereida corridor, 7 PHCC in the Nyala-Tulus corridor and a large PHCC in the Gereida camp by provision of supplementary drugs, equipment and various supplies. • Continue to support 6 mobile sites and establish 2 new mobile sites. • Train community health volunteers (at least 20 per site, totalling to 60 CHVs). • Conduct a KAP survey in each corridor to assess the impact of health education • Ensure Supply of clean delivery kits to all pregnant women reporting for ante natal checkups. • Conduct Training of health staff including Midwives on SMOH health and EmOC protocols. Reproductive health staff receives advanced training in collaboration with JHPIEGO. • Treat moderately malnourished children in the SFP. • Promote active case finding, home visits, defaulter and absentee tracing. • Establish referral link with the SFP and the health centre or hospitals that carry out therapeutic feeding pregnant and lactating mothers will receive ITN through the health care delivery system in the respective localities. • Co-setting a construction of RH facility within Gereida Rural Hospital that will improve RH services in Gereida locality. 	<ul style="list-style-type: none"> • Basic health needs met and health status of the population improved. • Reduced maternal and infant mortality rates and general health of women of childbearing age improved. • Targeted IDPs, returnees, and war-affected residents have access to sustainable quality Primary Health Care services (including Reproductive Health services). • Acute malnutrition among vulnerable prevented and 80% of malnourished children rehabilitated. • The Global Acute Malnutrition (GAM) rate maintained to acceptable level for developing country (10%) by the end of 2008. Women in Gereida will have access and use to comprehensive RH services within Gereida Hospital. 	<ul style="list-style-type: none"> • ARC PHC Clinics health workers trained in IMCI protocols in 12 PHCC. • All ARC supported PHCCs are staffed with midwives who render MCH services in 12 PHCC. • SFP integrated in 7 ARC clinics along both Nyla-Tulus and Nyala Gereida corridors with plan to open the 8th one, targeting 1,560 and more moderately malnourished children, pregnant and lactating mothers by the end of the year. • Mothers supplemented with Vitamin A after delivery Target 4000 and more. • 30 reproductive health staff receives training by JHIEGO. 	<ul style="list-style-type: none"> • Nyala Tulus Corridor : Bulbul Abou Jazoo, Bulbul Tembesco, El Wehda West, Abou Ajura, Al Safia, Abu Salalah, Dimso, Tulus and El Tomat Nyala Gereida Corridor: Abou Jabra, Ditto and Gereida . • Mobile Clinic Sites: Nyala Women's Prison, Towal, Tokomaya, Birkatuli, Greiga. Birkatuli Mobile clinic is planned to be converted to static and ensure continuous health service provision in area. <p>----- 92,000 (46,920 F) of which 23,000 IDPs (11,30 F) and 23,400 women of childbearing age and 15,600 under-five population 8,000 F) ----- 15 July - 31 December 2008</p>

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CAM 08-Jul-08 Index: 1196 [1] SUD-08/HN16 Promotion of Sustainable and Integrated Quality Primary Healthcare Services with Specific Focus to Maternal and Child Health - [D] - [HIV][Gnd][CB][Env] - (HER)	\$427,200 <u>Project Budget</u> Q1: \$500,000 Q2: \$900,000 Q3: \$1,777,304 Q4: \$1,777,304	<p>This project targets highly vulnerable and isolated communities, including nomad populations, in localities in rural Western Darfur where CAM is the only provider of primary health care services. In addition the project encompasses the women's and child health clinic in the Ryad IDP camp which is the only specialist maternal and child health service in West Darfur. Maternal and child health is a primary focus of all program activities. Finally the project includes activities in a new locality, Armankul, which has recently seen a high influx of IDPs and where CAM has responded rapidly to meet PHC needs.</p>	<ul style="list-style-type: none"> • Maintain and rehabilitate current health facilities. • Support and improve the referral system in general and for emergencies including obstetric and gynecological complications. • Accelerate routine immunization and outreach activities. • Procure and preposition supplies and equipment for outbreak response and active surveillance. • Supply stocks for LLITNS, reproductive health kits, anti-malarials and other essential medicines. • Redesign/re-organize mobile clinic activities for response based activities in line with identified gaps especially to nomadic populations. <p>Recruit and train community volunteers to carry out health promotion and education.</p> <ul style="list-style-type: none"> • Build capacity of national medical staff through training and support supervision. • Develop a pilot program of promotion of MCH services in the communities and carry out extensive public awareness campaigns with targeted health messages. 	<ul style="list-style-type: none"> • Improved knowledge and coverage of mother and child health care services including ANC,PNC, family planning, safe delivery and referral and EPI in all areas of operation. • Increased access to appropriate treatment and care to health facility catchment population and other disadvantaged groups. • Close partnership created with the health authorities and the communities in our project areas and local capacities reinforced. • Empowered people capable of managing their health through knowledge acquisition. • Reduced morbidity and mortality due to diarrhoeal diseases, malaria, and other preventable illnesses. • Quality of consultations and level of care, in particular regarding mother and child health care improved. 	<ul style="list-style-type: none"> • 60% of all target/ eligible children are immunized (as the program is ongoing until 06/2009). • 100% of the staff are trained on EWARS and common illnesses according to WHO case definitions. • Over 80% of the mothers attending ANC have assisted deliveries and return for postnatal care. • All Community leaders (focal points of the health committees) as well as all local Community Health Educators (CHEs) - 1 CHE per 1,000 beneficiaries per fixed clinic site - trained on health and hygiene, HIV/AIDS and sexual and gender based violence and further aspects of preventive health and good hygiene. 	<p>All activities will be undertaken in West Darfur, El Geneina areas:</p> <ul style="list-style-type: none"> • Fixed clinics in the El Geneina AU in Gelu, Tandulti, Seraf Jidad, Ryad IDP camp, Armankul, Zeinah (Armankul is included as a new location following the displacement of the population which has fled there from Seraf Jidad) and in the Sirba AU in Tanjekee. • Mobile clinics in the NW of El Geneina in Radgharat, Rijil Kubri and Banjedeed, in the NE of El Geneina in Zeinah and in the SE of EL Geneina in Habila Kanari and Sekillinge. <p>-----</p> <p>Target population: 122,214 persons Distinction of target population by gender: women = 62,329, men = 59,884 Number of direct beneficiaries: 70,750 persons Type of beneficiaries: • IDPs (Ryad IDP camp, NW of El Geneina in Tandulti, Armankul) • Resident population in remote rural areas • Refugees (Chadians in NW of El Geneina in Gelu, Tandulti, Armankul) • Nomads (NE of El Geneina in Zeinah, Tanjekee, Orteg; SE of El Geneina in Habila Kanari, Sekillinge)</p> <p>-----</p> <p>July - December 2008</p>
IMC 08-Jul-08 Index: 1198 [3] SUD-08/HN25 Nutrition Surveillance in West and South Darfur - [D] - [HIV][Gnd][CB] - (HER)	\$145,000 <u>Project Budget</u> Q1: \$200,000 Q2: \$345,000 Q3: \$345,000 Q4: \$345,000	<p>High priority, service provider in a rural underserved area, integrated intervention. This allocation was the full funding amount requested; this is the minimum funding required to reach the targets by the end of the year.</p>	<ul style="list-style-type: none"> • Conducting nutrition screening through community-based active nutrition surveillance. • Training community-based workers on the nutrition surveillance. • Provide referral services to malnourished children to the appropriate selective feeding centers. • Community-based health education. 	<ul style="list-style-type: none"> • Nutritional status of U 5 children and expectant/lactating mothers monitored, areas of high concern are flagged, investigated and appropriate interventions designed. • CHWs trained on nutrition surveillance and health education. • All detected cases of malnutrition are referred to the nearest SFP/OTP. • Increased community awareness on nutrition issues. 	<ul style="list-style-type: none"> • At least 75% of pregnant and lactating women screened. • At least 75 % of children < 5 screened. • 200 CHWs in Western and Southern Darfur project sites receive refresher training. • 100% of detected cases of malnutrition referred to OTP/SFP 5. At last 75% of the population reached with appropriate health education messages. 	<ul style="list-style-type: none"> • Western Darfur: Um-Dukhun, Zallingie, Wadi-Saleh, Mukjar and Genina. • Southern Darfur: Al Salam, Intifada and Al Serif. <p>-----</p> <ul style="list-style-type: none"> • Under five children 70,767 • Pregnant and Lactating women 7,701 <p>Grand Total 78, 468</p> <p>-----</p> <p>1 July - 31 December 2008</p>

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
Merlin 08-Jul-08 Index: 1197 [2]	SUD-08/HN179 PHC, Nutrition and Community Reproductive Health for IDP and Host Communities in South Darfur - [D] - [FA] - (HER) \$183,602 <i>Project Budget</i> Q1: \$1,240,918 Q2: \$2,481,836 Q3: \$3,722,756 Q4: \$3,722,756	<p>The sustained insecurity and displacement in the Gereida area warrants continued emergency response to meet the basic health needs of the population. There are currently 3 health facilities in the camp serving over 120,000 IDPs and an estimated 40,000 surrounding communities (far below the recommended sphere standards). The risk of epidemics, high mortality rates, and peaks in morbidity patterns threaten to further destabilise the targeted IDP and host community. Due to their increased vulnerability, this proposal places emphasis on maternal and child health with interventions on PHC services, nutrition, malaria, emergency preparedness and response (key priority areas that have been agreed by the Southern Darfur health sector).</p> <p>Funds are needed for staff deployment and continuation of activities in Gereida in preparation of expected funding from other donors (OFDA). This is the minimum funding required to reach the targets by the end of the year.</p>	<ul style="list-style-type: none"> • Conduct curative consultations at one static and five mobile clinics with appropriately qualified, regularly appraised, trained and supervised medical staff offered at all supported health facilities, mobile clinics and community outreach. • Provide ANC services through health facility and outreach mobile clinics for all pregnant women including the provision of clean delivery kits in their 3rd trimester, TT, IPT, micronutrient supplementation and mebendazole and ensure distribution of LLITNs to all pregnant women and children < 5years during their first visit to Merlin clinic. • Ensure delivery and supply of essential drugs, equipment and non-medical supplies through Merlin orders and UNICEF PHC kits. • Support routine vaccinations at static and mobile clinic services in collaboration with MoH EPI Dept. and UNICEF. • Provide village midwives with clean delivery kits. • Identify and refer all pregnant women at risk of complication to Gereida hospital. • Maintain a local health information system and disease surveillance system. • Support capacity building of health workers through a series of structured trainings, in-service coaching and regular supervision as provided by Merlin technical staff. • Train Health workers on health education messages targeted at women and children <5 years in each area. • Training of community reproductive health promoters on safe motherhood. • Conduct community health education on safe motherhood, childhood disease, communicable diseases, hygiene and sanitation and management of early signs and symptoms, and health service utilisation in the IDP camp and host communities through the network of CHPs and CRHPs. • Provide growth monitoring (weight for height in clinics and MUAC for community outreach workers) for all children <5years, to identify severely malnourished cases for referral to ICRC in Gereida. • Conduct community health education on safe motherhood, childhood disease, communicable diseases, hygiene and sanitation and management of early signs and symptoms, and health service utilisation in all target IDP camps and host communities through the network of CHPs and CRHPs. 	<ul style="list-style-type: none"> • Increased access to PHC services with special emphasis on services for women and children < 5. • Increased utilization of preventative health services with a comprehensive maternal and child health focus in all target communities. • Increased ANC, IPT2, ITN coverage. • Increased vaccination coverage. • Improved nutrition status among children under-5. • Increased capacity of health workers at community level to provide quality health care services to their communities. 	<ul style="list-style-type: none"> • At least 1 consultation/person/year. • At least 40,000 clients attend health education sessions. • At least 80% ANC 2+, 50% IPT2, 40% ITN coverage for under-5s and pregnant mothers. • At least 80% of children less than 1 year have received PVT3. • 90% of children under-5 attending Merlin's clinics receive growth monitoring and nutritional screening with appropriate referral of moderately and severely malnourished children. • 90% Merlin staff receive training on common health conditions (in particular malaria, diarrhea, respiratory tract infections and obstetric emergencies). 	<ul style="list-style-type: none"> • Gereida camp and surrounding host communities. ----- • IDPs estimated at 120,000 and host communities estimated at 40,000 ----- July 2008 - December 2008

Project Details		CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
PAI 08-Jul-08 Index: 1205 [10]	SUD-08/HN33 Primary Health, Reproductive Health and Training Community Health Workers in Dar al Salam, Khazan Tunjur and Al Salam IDP Camp, North Darfur State - [D] - No cross cutting - (HER)	\$372,000 <u>Project Budget</u> Q1: \$400,000 Q2: \$800,000 Q3: \$1,096,033 Q4: \$1,096,033	Integrated approach, plus maternal and child health focus	<ul style="list-style-type: none"> Primary Health Care Clinics. Mobile clinics. Reproductive health outreach and midwife/TBA training. Village health worker training. EPI outreach in gap areas. 	<ul style="list-style-type: none"> Broad improvement of health indicators in rural areas. Provision of health services to displaced populations. Lowering of maternal and under 5 mortality rates. Incentive to non-displacement and voluntary returns due to service provision in previously unserved rural areas. 	<ul style="list-style-type: none"> 130,000 patients treated in Primary Health Care facilities during 2008. 100 community health workers trained in basic health and hygiene promotion and Accelerated Child Survival initiative. 15 local health committees established to promote health in rural villages. Participation in EPI/ vaccination campaigns in project and adjacent gap areas. 	Northern Darfur: Al Salaam IDP Camp (El Fasher Locality), Khazan Tunger (Rural Tawila), Tukamare (Rural Tawila), East Jebel Mara, Dar el Salaam ----- 157,000 people ----- Ongoing; January - December 2008
UNFPA 08-Jul-08 Index: 1199 [4]	SUD-08/HN36 Supporting Reproductive Health in a Complex Emergency - [D] - [HIV][Gnd][CB][FA] - (HER)	\$225,000 <u>Project Budget</u> Q1: \$500,000 Q2: \$900,000 Q3: \$1,500,000 Q4: \$1,700,000	UNFPA is only supplier of emergency kits for the minimum initial service package (MISP). The allocated amount will cover mentioned kits' costs along with transportation and other relevant costs (warehouse, custom clearance, etc.).	Procurement of Emergency RH kits and supplies related to Emergency Obstetric Care (EmOC) based on implementing partners' needs.	All supported health facilities are able to provide RH services within the MISP.	The allocated funds will be utilized to provide RH services within the MISP for 600,000 women, men and adolescents (200,000 IDP and 400,000 in the war affected population). However, other planned activities related to population awareness raising and capacity building of service providers will be covered from other sources.	Western, Northern, and Southern Darfur (Nyala, Ed Daein, Rahad el Berdi, Burum, Tulus, Gereida, Sharia, Adila, Merkundi and ed Elfursan, Elfasher, Shanel Toby, Esiref Um kadada, Lait, Kabkaya, Tawish, Kutum and Mellit, Garsilla, Genina, Zalinge, Furbaranga, Kulbus, Um Dukum and Nertiti). ----- 600,000 women, men and adolescents (200,000 IDP and 400,000 in the war-affected population) ----- July - December 2008
UNICEF 08-Jul-08 Index: 1202 [7]	SUD-08/HN181 Integrated Essential Health Services for Conflict-affected Populations in Darfur Region - [D] - [HIV][Gnd][CB][ERA][FA] - (HER)	\$500,000 <u>Project Budget</u> Q1: \$2,000,000 Q2: \$3,000,000 Q3: \$3,364,527 Q4: \$3,364,527	In an effort to reduce under5 mortality and morbidity, these funds will be used to deliver high impact interventions (immunization, deworming, provision of long lasting insecticide-treated nets, vitamin A, Lipidol in high risk areas for Iodine Deficiency Disorders, awareness-campaign on key family practises such as handwashing promotion, breast feeding, oral rehydration therapy in an event of diarrhoea) to at least 95 % of under 5 children in Northern Darfur State.	<ul style="list-style-type: none"> EPI - Provide 90% of children <1 yrs of age with mobile/acceleration immunizations and upgrading of cold chain. Malaria - Treatment of malaria cases. Deworming campaign - Provide deworming tablets children aged 1- 5 years. Hand washing promotion and education - Broadcast health promotion messages on effective hand washing & breast feeding practices to 5.2 million people. Vitamin A supplementation - Provide vitamin A supplementation to children <5 yrs at occasion of immunisation. 	<ul style="list-style-type: none"> 95% of children <5 yrs receive a one time package of interventions (measles vaccination, LLITN/ and deworming) and 40% (3,217,172) of WCBA receive 1 dose of TT vaccine as part of ACSI campaign and complete the remaining doses through routine immunization. 	<ul style="list-style-type: none"> 95% of children <5 yrs receive a one time package of interventions (measles vaccination, LLITN/ and deworming) and 40% of WCBA receive 1 dose of TT vaccine as part of ACSI campaign and complete the remaining doses through routine immunization. 	Northern Darfur State ----- 1,780,602 (95%) people of Northern Darfur state receive health awareness messages; 237,358 children (95%) 12-59 months receive deworming; 194,252 children will receive a LLITN; 302,524 children (95%) will receive vitamin A supplementation ----- <ul style="list-style-type: none"> Procurement of all necessary supplies (August-October) Start of micro planning, TOT and Training of providers (October) Production and finalization of IEC materials (1-15 October) Logistic transfer (19-24 October) Start ACSI campaign (Octob

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UNICEF 08-Jul-08 Index: 1208 [11]	SUD-08/HN183 Darfur Emergency Nutrition and Recovery Project - [D] - [FA] - (HER)	\$200,000 <u>Project Budget</u> Q1: \$1,800,000 Q2: \$2,500,000 Q3: \$3,777,200 Q4: \$3,777,200	Due to the recent developments in Darfur area regarding, the crop failure and the cut of the general Food distribution, increase of insecurity. In addition, to the restriction that HAC is putting on dissemination of the NGOs localized survey results and considering the precarious situation in Darfur. Therefore it is critical to conduct the Darfur wide survey to get timely information about the nutrition situation and compare it to previous years and respond according to the needs. Currently there is no commitment from Donor to fund the survey implementation however, fund request was submitted to NATcom to partially fund the survey. Provide supplies for the treatment of severe malnourished children under 5	<ul style="list-style-type: none"> Darfur wide Nutrition Survey. Procurement of nutrition supplies/equipment (F100, F75, plumpy nut, resomal and drugs, micronutrients supplement. Training of MOH staff TFC and SFC, guidelines and implementation. 	<ul style="list-style-type: none"> Nutrition survey results including global acute malnutrition rates disseminated. Severely malnourished children being treated in the feeding centers according to the protocols by a skilled staff. 	<ul style="list-style-type: none"> 1,000 severely malnourished children treated. Nutrition survey report disseminated and intervention planned accordingly. 	Northern, Western and Southern Darfur States ----- 1,000 severely malnourished children 6-59 months old ----- July - December 2008
WFP 08-Jul-08 Index: 1207 [13]	SUD-08/HN225 Maternal and Child Nutrition - [S][D][A][BN][SK][E][KN] - [HIV][Gnd][CB] - (HER)	\$250,000 <u>Project Budget</u> Q1: \$3,418,192 Q2: \$4,394,819 Q3: \$5,124,859 Q4: \$5,124,859	The 2007 EFSNA findings indicate that the prevalence rate of Global Acute Malnutrition has increased in Darfur, compared to 2006, and is beyond the emergency threshold in North Darfur. Blanket Supplementary Feeding targeting children under-five will be implemented as a preventative measure during the time of the year when malnutrition normally peaks.	<ul style="list-style-type: none"> The provision of food and related services under Blanket Supplementary Programmes (BSFP). 	<ul style="list-style-type: none"> Increased coverage of children <5 under BSFP. 	<ul style="list-style-type: none"> To provide supplementary feeding for 200,000 children <5. 	Mainly Northern Darfur, and targeted locations in Southern and Western Darfur ----- 200,00 children <5 ----- July-December 2008
WHO 08-Jul-08 Index: 1206 [12]	SUD-08/HN163 Improvement of Health Care Access and Quality in Darfur Ensuring Equitable and Timely Care for Vulnerable and Conflict Affected Population - [D] - [HIV][Gnd][CB][FA] - (HER)	\$550,000 <u>Project Budget</u> Q1: \$4,000,000 Q2: \$6,000,000 Q3: \$8,500,000 Q4: \$8,500,000	Life-saving interventions, prevention of water borne disease, ensuring access of quality emergency care, mitigation of flood risks through environmental health interventions and hygiene promotion	<ul style="list-style-type: none"> Pre-positioning of supplies for outbreak control, providing reagents and drugs for hospital, training for medical cadres on emergency management, communicable disease control and case management and IMC, supervision and monitoring of the quality of health services provided by the sector. 	<ul style="list-style-type: none"> Functioning emergency department in rural hospital, increased access to PHC in underserved area, improved quality of service provided at the PHC level, early detection and response to outbreaks. 	<ul style="list-style-type: none"> 85% of functioning of health facilities reporting to disease surveillance system. 70% of functioning health facilities have trained staff on case definition and management. 	All Darfur States ----- 4.2 million conflict-affected people ----- July - December 2008
WHO 08-Jul-08 Index: 1201 [6]	SUD-08/HN226 Emergency health response to escalation in conflict in Northern Corridor of West Darfur - [D] - [HIV][Gnd][CB][FA] - (HER)	\$150,214 <u>Project Budget</u> Q1: \$0 Q2: \$1,500,000 Q3: \$2,199,225 Q4: \$2,199,225	Newly displaced population, underserved area, vulnerable population. This allocation is the full funding amount requested; this is the minimum funding required to reach the target by the end of the year.	<ul style="list-style-type: none"> Response to needs and shortages of Health partners by provision of New Emergency Health Kits. Training of health staff and supervision missions. Second "catch up" immunization campaign. Rehabilitation and re-equipment of health facilities. 	<ul style="list-style-type: none"> Population affected by recent conflict will have access to primary health care through restoration of health care provision in 10 facilities. Women will have greater access to safe deliveries and health care related to gender-based violence. There will be a reduction in the burden currently being experienced by health facilities in host areas. Prevention of communicable diseases ensured (for instance for measles immunization of 90% coverage will be the target). The disease surveillance and early warning system will be functioning and covering 85% of the conflict-affected population. 	<ul style="list-style-type: none"> Minimal functional rehabilitation of and re-equipment of the 10 affected health care facilities in conflict-affected areas. Deployment of staff to affected areas to 10 PHCs trained in PHC case management including reproductive health, emergency surgery including obstetric surgery, and communicable disease control and surveillance. "Catch up" immunization campaigns in inaccessible areas achieves 90% coverage and 150,000 people. Functional Early Warning System through provision of communication equipment and trained staff in 10 PHC clinics. 3 assessment missions undertaken to area. 	Saraf Jidad, Armankul, Tandolti, Abu Soruj, Sirba, Seleia, Kondobei, Manjura, Kuma and Bir Dagig ----- 150,000 conflict-affected population ----- July - December 2008

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
World Vision 08-Jul-08 Index: 1204 [9]	SUD-08/HN229 \$300,000 <i>Project Budget</i> Q1: \$500,000 Q2: \$1,500,000 Q3: \$2,000,000 Q4: \$2,000,000	<p>Preliminary results of the 2007 Food Security and Nutrition Assessment of the conflict-affected population in Darfur (DFSNA) indicate that the nutritional and health situation among the conflict affected populations in Darfur continues to deteriorate. The main causes for the high disease prevalence and poor nutritional status among this population are 1) the limited coverage of nutrition and public health services resulting in limited capacity for early identification and treatment of malnutrition and contributing morbidities, 2) variable access to adequate sanitation, particularly after heavy rains, 3) deterioration in the overall food security situation, and 4) limited progress in preventing common illnesses and malnutrition through sustained behavior change.</p> <p>More than 70% of the conflict affected population in South Darfur has been displaced and is confined to IDP camps. World Vision Northern Sudan provides health and nutritional support to IDPs in camps and to surrounding communities through seven primary health care clinics (PHCs) and seven supplementary feeding centers (SFCs). On average, the primary health care clinics serve 12,000 patients annually while the SFCs provide care to 3,600 malnourished children and women per month.</p> <p>World Vision Northern Sudan is the only NGO providing any humanitarian assistance in many communities/ IDP camps in Shearia Locality and the only NGO providing H&N interventions in many of the IDP camps, which it targets in Nyala Locality. Insecurity in Shearia Locality in the first half of 2008 contributed to a large influx of displaced persons to IDP camps in this locality and to the surrounding communities. This project will provide life-saving interventions designed to reduce morbidity and mortality in the target areas by addressing high levels of malnutrition in the areas, improving access to primary health and nutritional services, enhancing individual hygiene practices, and building the capacity of local practitioners to provide clinic-based and outreach services.</p>	<ul style="list-style-type: none"> • Continue ongoing activities at 4 PHC clinics and 4 SFCs through essential structural repairs, the provision of equipment and supplies, and refresher training for staff. • Support routine immunization and supplementary immunization activities for at least 4,000 children and women at 4 PHC clinics. • Conduct sessions on health promotion, education and awareness for 1,000 residents per month in 4 target IDP camps with a specific emphasis on nutrition, and RH issues. • Establish one mobile SFC to address arising needs in areas where new IDPs are arriving in order to respond to hunger on an emergency basis (seasonal basis and during the hunger gap). • Disease surveillance system in operation. 	<ul style="list-style-type: none"> • Increased access to standard clinical and preventive health services for children under 5 and pregnant and lactating women. • Increased knowledge of disease prevention and control. • Reduces Global Malnutrition Rate (GAM) and Severe Malnutrition Rate (SAM) in the targeted areas. 	<ul style="list-style-type: none"> • 4 PHC clinics and 4 SFCs offering health and nutrition services. • 4 PHC clinics and 4 SFCs with adequate drugs and supplies. • 12 health and nutrition staff trained at PHC. • 1,000 residents educated per month on nutrition and RH issues. • Disease surveillance system operating. • Immunization given to 4,000 children and women. 	Shearia and Nyala Localities, Southern Darfur State ----- 80,863 people ----- July - December 2008

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Eastern States		\$625,000				
<i>Regional Sector Priorities</i>						
<ul style="list-style-type: none"> Expand health care services such as EPI to children under 5 years, essential drugs, laboratory services, integrated health care packages, STI/HIV/AIDS counseling, and TB treatment services. Provision of health care services organized before and during IDP returns and improved access to vulnerable groups. Expand EmOC coverage. Undertake health awareness promotion campaign, inclusive of child spacing and breast feeding. Support existing and develop new TFC/OTP/SFC centers to rehabilitate moderately severely malnourished children and other vulnerable groups, including pregnant and lactating women and the elderly. 						
Samaritan's Purse 07-Jul-08 Index: 1234 [1]	SUD-08/HN43 Health and Nutrition Project for Kassala State - [E] - No cross cutting - (HER) <i>Project Budget</i> Q1: \$600,000 Q2: \$600,000 Q3: \$980,000 Q4: \$1,580,000	\$175,000 Scored highly, identified as a priority by the region, target and geographical area is high priority. This allocation is the minimum funding required to reach the targets by the end of the year.	<ul style="list-style-type: none"> Provide health and nutrition education and awareness training in rural areas (Priority 4). Provide pre-natal, obstetric and maternal health care in a clinic setting in Hamesh Koreb in collaboration with the MoH (Priorities 1 and 2). Provide 2 physicians who can perform C-sections and other EmOC, and medical experts to facilitate training courses in the MOH midwifery school (priorities 1-3). Provide iron and other micronutrient supplements to pregnant mothers and women of child bearing age, therapeutic feeding to severely malnourished U5 children (RUTF) and supplementary feeding to moderately malnourished U5 children. (priority 5). 	<ul style="list-style-type: none"> Significant decrease in severe and moderate malnutrition in U5 children and moderate malnutrition in pregnant and lactating mothers. Decrease in diarrheal illnesses, lower respiratory tract infections (LRTI) and dehydration-related deaths. Improved global acute malnutrition (GAM). Decrease in maternal and neonatal mortality. Increased understanding among women of causes of illness as evidenced by decrease in LRTIs, diarrheal diseases and dehydration-related deaths. Decrease in severity of illnesses and conditions related to primary health and minor surgical problems e.g. abscesses, lacerations, fractured bones. 	<ul style="list-style-type: none"> Decrease severe and moderate malnutrition by 30%. Decrease maternal and neonatal mortality by 40%. 	Kassala State, primarily Hamesh Koreb and Telkook Localities ----- Pregnant women, lactating mothers and under 5 children in an area with an approximate population of 75-100,000. General population of Hamesh Koreb, Telkook, and other rural areas through health education. ----- July - December 2008
SC-UK 07-Jul-08 Index: 1236 [3]	SUD-08/HN44 Nutrition for Impoverished Children, Haya locality, Red Sea State - [E] - No cross cutting - (HER) <i>Project Budget</i> Q1: \$90,553 Q2: \$150,570 Q3: \$210,587 Q4: \$210,587	\$100,000 Haya, a locality in the Red Sea State has some of the worst nutrition indicators in Sudan with the highest number of malnourished children in the Red Sea State. The acute malnutrition frequently goes above emergency cut-offs and chronic malnutrition standards. This allocation is the minimum funding required to reach the targets by the end of the year.	<ul style="list-style-type: none"> Conduct refresher training on supplementary feeding protocols & nutrition messages for the Ministry of Health staff in Haya Locality, Red Sea State. Improve the supply chain for STF and nutrition education inputs in Haya Locality, Red Sea State. Review the methodology and carry out a nutrition survey in the pastoral communities of Haya Locality, Red Sea State to gain a better understanding of nutrition issues amongst the pastoral community. Conduct a baseline on current knowledge, attitude and practices of the community as well as the current level of service delivery in Haya Locality, Red Sea State. 	<ul style="list-style-type: none"> Improved implementation, management and delivery of existing nutrition (feeding protocols, nutrition messages, etc.) services by MoH personnel to the community of Haya Locality, in Red Sea State. Increased/improved quality of nutrition programmes through better understanding of the needs for, and impacts of, nutrition interventions in the pastoral communities as well as the rest of Haya locality, Red Sea State, in general. 	<ul style="list-style-type: none"> MoH staff in Haya Locality receive refresher training on supplementary feeding protocols and nutrition messages. 1 STF supply chain for STF and nutrition education inputs. 1 nutrition survey in pastoral community. 1 baseline on KAP of the Haya Loca. 	Haya Locality, Red Sea State ----- 65,000 acutely malnourished Haya Locality community members ----- July 2008 - December 2009

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UNHCR 07-Jul-08 Index: 1235 [2]	SUD-08/HN185 Support to Refugees and Refugees Hosting Areas in Eastern Sudan - [E] - [HIV][Gnd][CB][Env] - (HER)	\$200,000 <u>Project Budget</u> Q1: \$1,387,749 Q2: \$2,081,764 Q3: \$2,660,586 Q4: \$2,660,586	UNHCR supports health facilities in 12 camps where some 96,000 refugees reside alongside 40,000 local residents. With over 10,000 new arrivals this year alone, UNHCR's support to these health facilities has become crucial.	Upgrade of health facilities including reproductive health and nutrition; implementation of contingency plan for preparedness and control of acute watery diarrhoea (AWD).	<ul style="list-style-type: none"> Improved well being of refugees. 	20,307 women of reproductive age have free access to treatment; an estimated 96,000 camp-based refugees have access to free medical care.	Kassala State, Gedaref State and Gezira State ----- 96,000 ----- July - December 2008
WHO 07-Jul-08 Index: 1237 [4]	SUD-08/HN166 Provision of Health Care Services to the Local Population Including the Vulnerable Groups of Host Communities, Returnees, IDPs through Strengthening and Establishment of a Sustainable Health Care System - [E] - [HIV][Gnd][CB][Env] - (HER)	\$150,000 <u>Project Budget</u> Q1: \$400,000 Q2: \$700,000 Q3: \$970,000 Q4: \$970,000	High seasonal risk of outbreak, high priority project according to the region. This allocation is the minimum funding required to reach the targets by the end of the year.	<ul style="list-style-type: none"> Expand the integrated management of childhood illness strategy to rural areas. Expansion of the EPI coverage especially in measles, DPT3 and TT2 in post conflicted areas. Training of healthcare workers including maternal and neonatal care. Provide long lasting insecticide treated bed-nets for children and pregnant women. Provide long lasting insecticide treated bed-nets for children and Pregnant women. Support vector control campaign by providing essential insecticidal spray, pumps in each locality of 3 eastern states. Improve the referral system of emergency care cases. 	<ul style="list-style-type: none"> EPI coverage will increase by 10%. Insecticide and vector control tools provided to cover the rainy season activities. 	<ul style="list-style-type: none"> All outbreaks responded to in timely way. Coverage of EPI. 60% of health facilities have training on communicable disease control and case management. 	Kassala, Gadarif and Red sea (50% Kassala, 30% Gadarif and 20% Red Sea) ----- 2.4 million people ----- July - December 2008
Khartoum and Other Northern States		\$388,000					
<u>Regional Sector Priorities</u>							
<ul style="list-style-type: none"> Ensuring access to health care services at primary care level i.e. maternal and child care, and emergency services. Floods season preparedness and emergency response in conflict areas including pre-positioning of emergency supplies. Hygiene promotion interventions to mitigate and protect against water-borne and vector-borne disease. Nutrition to the most vulnerable (TFC/SFC). 							
IOM 08-Jul-08 Index: 1209 [5]	SUD-08/HN49 Healthcare Services to the Joint Organized IDP Returns Operations - [KN] - [HIV][CB][ERA] - (HER)	\$155,000 <u>Project Budget</u> Q1: \$400,000 Q2: \$600,000 Q3: \$700,000 Q4: \$700,000	IOM is a lead agency in IDP return operations. The proposed activities are in support of the joint IDP return operations to ensure provision of basic health services through the return process. Return operations are expected to resume in the last quarter of 2008 (October-December). There is no external source of funds expected for these activities. This allocation is the minimum funding required to reach the targets by the end of the year.	<ul style="list-style-type: none"> Pre-departure health information and education. Medical screening, treatment and referral services, vaccination and medical escort. 	<ul style="list-style-type: none"> Pre-departure medical screening and medical care. Pre-departure vaccination. Group medical escort provided to all organised convoys. En route medical emergency management and evacuation. Pre-departure information on HIV/AIDS. 	<ul style="list-style-type: none"> 100% of targeted IDP returnees undergo pre-departure medical screening. 100% of targeted children (0-15 years) receive routine and measles vaccinations. 100% of targeted pregnant women receive TT. 100% of targeted IDP returnees above 15 years receive 	Khartoum, Kosti, Kadugli ----- 20,000 IDPs ----- January - December 2008

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UNICEF 07-Jul-08 Index: 1152 [1]	SUD-08/HN192 Integrated Essential Health Services for Conflict-affected Populations - [KN] - [HIV][Gnd][CB][ERA] - (HER)	\$80,000 <u>Project Budget</u> Q1: \$2,000,000 Q2: \$4,000,000 Q3: \$6,381,962 Q4: \$6,381,962	The main aim of these projects is to reduce the negative health impacts related to the rainy season 2008. This will be achieved by improving the access to minimum PHC package of services at health facilities for IDPs and host community as well as strengthening disease surveillance and early warning system for outbreak control. Annually, the risk of AWD/cholera incidence is very high during the rainy season. Besides this, epidemiological data reveal reports of diarrhoea, malnutrition and vector-borne disease incidences that are often linked to flood and poor circumstances under which the IDPs live either in the camps or with the host community. In view of this, it is essential that valid, complete and timely information from the affected areas is available in addition to prompt and effective intervention in the affected areas.	<ul style="list-style-type: none"> Improve access to minimum PHC package of services at health facilities for IDPs and host community through foci on strengthened coordination, advance planning for potential outbreaks. 	<ul style="list-style-type: none"> Strengthened SMOH capacity to respond to emergencies. IDPs and Host Community have access to essential health care. 	<ul style="list-style-type: none"> Training locality health teams on rapid nutrition assessment. Training of health workers on PHC. Provision of integrated care package during emergency provision of essential health supplies and equipment (ORS, IV fluids, etc.). 	Vulnerable groups of host communities, returns and IDPs in Khartoum and East zone ----- • 200,000 IDPs in Khartoum (el-Salaam, Wad el Bashir, Mayo Farm and Jebel Awlia), 232,000 vulnerable returnees and other disadvantaged populations in North Kordofan State. • 1.5 million under five children in Gazira, Sennar, North Kordofan and White Nile. • 488,000 under-one children and 303,500 pregnant women in Khartoum and other states in Northern Sudan. ----- 1 July - 30 September 2008
UNICEF 08-Jul-08 Index: 1210 [1]	SUD-08/HN194 Emergency Nutrition Recovery Project - [KN] - [HIV][Gnd][CB] - (HER)	\$83,000 <u>Project Budget</u> Q1: \$70,000 Q2: \$120,000 Q3: \$186,200 Q4: \$186,200	The fund will be used to support treatment of severely and moderately malnourished children in both states, given the fact that Khartoum State is receiving massive movement from the affected areas in Darfur and Southern Sudan. No commitment from donor to support the Khartoum and northern states. This allocation is the minimum funding required to reach the targets by the end of the year.	<ul style="list-style-type: none"> Procurement of nutrition supplies/ equipment (F100, F75, plumpy nut, resomal and drugs, micronutrients supplement, scales, height board. Training of MOH staff on community based treatment guidelines and the minimum nutrition package implementation. 	Improved nutritional status in children under-5 and decreased mortality as a result of appropriate treatment.	1,000 severely malnourished children being treated in the feeding centres according to the protocols by a skilled staff.	Khartoum and Northern Kordofan ----- 1,000 severely malnourished children 6-59 months old ----- July - December 2008
WHO 07-Jul-08 Index: 1153 [2]	SUD-08/HN206 Improve Access to Provision of Quality Health Care for IDPs and Host Community - [KN] - [HIV][CB][Env] - (HER)	\$70,000 <u>Project Budget</u> Q1: \$200,000 Q2: \$300,000 Q3: \$400,000 Q4: \$400,000	The main aim of these projects is to reduce the negative health impacts related to the rainy season 2008. This will be achieved by improving the access to minimum PHC package of services at health facilities for IDPs and host community as well as strengthening disease surveillance and early warning system for outbreak control. Annually, the risk of AWD/cholera incidence is very high during the rainy season. Besides this, epidemiological data reveal reports of diarrhoea, malnutrition and vector-borne disease incidences that are often linked to flood and poor circumstances under which the IDPs live either in the camps or with the host community. In view of this, it is essential that valid, complete and timely information from the affected areas is available in addition to prompt and effective intervention in the affected areas.	Strengthen the emergency preparedness, response and mitigation capacity of SMOH, including support to development of contingency planning to guide repositioning of supplies.	<ul style="list-style-type: none"> Improved quality of PHC services and timely response to health emergencies. Improved access to PHC services. Human Resources Capacities strengthened through provision of technical staff training on different components of primary health care package. 	<ul style="list-style-type: none"> Expansion of EWARS reporting sites. Training of health and nutrition staff in social mobilization and health/hygiene/sanitation promotion. 	Kassala, Gedaref and Red Sea State IDPs and conflict-affected population ----- 170,000 refugees in Red sea 137,000 IDPS population in camps ----- 2 July - 30 September 2008

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
Southern Kordofan		\$840,000				
<i>Regional Sector Priorities</i>						
<ul style="list-style-type: none"> • Ensuring access to health care services at primary care level i.e. maternal and child care and emergency services. • Flood season preparedness and emergency response in conflict areas including pre-positioning of emergency supplies. • Hygiene promotion interventions to mitigate and protect against water-borne and vector-borne disease. • Nutrition to the most vulnerable (TFC/SFC). 						
PANCARE 08-Jul-08 Index: 1189 [6]	SUD-08/HN54 Health Service Support - [SK] - [HIV][Gnd][CB][ERA] - (HER) <u>Project Budget</u> Q1: \$89,348 Q2: \$104,674 Q3: \$140,891 Q4: \$148,913	\$50,000 Only service provider in geographical area, money allocated covers whole 6 months of implementation. This allocation is the minimum funding required to reach the targets by the end of the year.	<ul style="list-style-type: none"> • Social mobilizations and health awareness sessions on RH, EPI, hygiene and sanitation promotion and HIV/AIDS problem. • Improve the coverage of EPI for children less than 5 years age through routine immunization at fixed posts. • Train health workers, village development committees, and local authorities on RDF system. 	<ul style="list-style-type: none"> • Social mobilization sessions conducted. • Coverage of EPI improved for under 5 in rural areas of Southern Kordofan from 20% and 40%. • Each facility in project area has at least 1 trained service provider. 	<ul style="list-style-type: none"> • Each facility in project area has at least 1 trained service provider. • 40% EPI coverage. 	Rural areas of Southern Kordofan - Kadugli and surrounding villages ----- 25,000 ----- July - December 2008
PANCARE 27-Jul-08 Index: 1251 [1]	SUD-08/HN54 Health Service Support - [SK] - [HIV][Gnd][CB][ERA] - (HER) <u>Project Budget</u> Q1: \$89,348 Q2: \$104,674 Q3: \$140,891 Q4: \$148,913	\$140,000 Out of the \$4 million envelope for the Abyei emergency response, \$500,000 was set aside for organizations working on-the-ground in Muglad to address the most urgent needs.	<ul style="list-style-type: none"> • Set up of mobile clinic projects to access IDPs in the remote town areas. • Provide essential drugs. • Establish sustainable drug management system (RDF). • Train health cadres on IMCI, reproductive health and other primary health care. • Conduct HIV/AIDS awareness sessions. • Map main morbidity patterns in the area. 	<ul style="list-style-type: none"> • Increase access to health services. • Raise the capacity of the health staff on EPI, STI HIV/AIDS awareness, WBD. • Decrease of morbidities and associated mortalities of common diseases, including malaria and bilharziasis. • Improve mother and child health care and to decrease maternal and neonatal mortality rates. 	<ul style="list-style-type: none"> • 3 mobile clinics. • Provision of essential drugs to 5 locations in El Muglad and surrounding areas. • Establishment of RDF systems in 5 locations. • Training of 50 midwives on EmOC and reproductive health. • Conduct 20 HIV/AIDS awareness sessions. 	Muglad, Southern Kordofan ----- 200,000 people including IDPs from Abyei and host communities ----- July - December 2008
SC-US 08-Jul-08 Index: 1190 [7]	SUD-08/HN55 Integrated Community Rehabilitation and Development (ICRD) - [SK] - [Gnd][CB][ERA] - (HER) <u>Project Budget</u> Q1: \$377,560 Q2: \$403,136 Q3: \$674,424 Q4: \$755,120	\$300,000 This project has been prioritized for funding because it is the only project providing services to almost four of the most underserved localities of Southern Kordofan. The nutrition interventions implemented through this project are the only nutrition act	<ul style="list-style-type: none"> • Planned activities related to CHF allocation include the running of the 2 CTCs in Talodi and Kauda. • Provision of essential supplies and drugs to approximately 50 clinics. • Train staff including SMOH staff and continued screening for nutrition at community levels. • Distribute ITNs to vulnerable groups. 	<ul style="list-style-type: none"> • Increased access and treatment of acute moderate and severe malnutrition in the communities of Talodi and Kauda. • Increased access to basic health care by the vulnerable groups. 	<ul style="list-style-type: none"> • GAM and SAM maintained at below threshold levels. • Cure rate at SFP and OTP of above 75%. • Drugs and supplies distributed to 85% of the target clinics. • 42,000 ITNs distributed. 	Southern Kordofan State - Rashad, Talodi and Abu Gebeha ----- 255,000 will be targeted for drugs while 28,631 direct beneficiaries will be expected at the CTC project. The CTC beneficiaries will include only children less than five years of age and pregnant and lactating women. ----- January - December 2008
UNICEF 08-Jul-08 Index: 1188 [5]	SUD-08/HN202 South Kordofan Emergency Nutrition and Recovery Project - [SK] - [HIV][Gnd][CB] - (HER) <u>Project Budget</u> Q1: \$140,000 Q2: \$200,000 Q3: \$285,950 Q4: \$285,950	\$150,000 The fund will be used to support community-based treatment of severely and moderately malnourished children. No commitment from donor to support Southern Kordofan. This allocation is the minimum funding required to reach the targets by the end of the year.	<ul style="list-style-type: none"> • Procure nutrition supplies/ equipment (F100, F75, plumpy nut, resomal and drugs, micronutrients supplement. • Train MOH staff TFC and SFC, guidelines and implementation. 	<ul style="list-style-type: none"> • Improved nutritional status in children under 5. • Decreased mortality as a result of appropriate treatment. 	1,500 severely malnourished children to be treated in the feeding centers according to the protocols by a skilled staff	Kadugli, Delinge, Abujbiha and Baba Nosa ----- 1,500 severely malnourished children 6-59 months old ----- July - December 2008

Project Details		CHF Allocation <small>(and regional quarterly project budget)</small>	Allocation Justification	Planned CHF Activities	Outcome/Output <small>(broader outputs/outcome that the CHF supported activities will help achieve)</small>	Allocation Targets <small>(concrete/measurable targets to be directly achieved by the CHF supported activities)</small>	Locations, Beneficiaries and Timeline
WHO 08-Jul-08 Index: 1191 [8]	SUD-08/HN208 Increase Access to Health Care Services through Strengthening and Establishment of a Sustainable Health Care System - [SK] - [HIV][Gnd][CB] - (HER)	\$200,000 <u>Project Budget</u> Q1: \$1,500,000 Q2: \$2,000,000 Q3: \$2,400,000 Q4: \$2,400,000	Life-saving, time-bound activity, cost effective approach, supporting to returning communities.	<ul style="list-style-type: none"> • Provision of emergency medical kits for outbreak response and communication equipments for data collection and transmission. • Capacity building of technical staff and provision of diagnostic and monitoring tools on disease surveillance. • Organize and implement NIDS program. • Coordinate health activities and information sharing amongst health partners in the area through regular sector meetings and workshops. • Increase the number of EWARS reporting sites and provide technical and operational support to the SMOH on outbreaks preparedness and response. 	<ul style="list-style-type: none"> • Early detection and control of outbreaks. • 2 NIDs conducted. • Sector coordination is functioning. • Quality health services ensured for vulnerable populations. 	<ul style="list-style-type: none"> • 2 NIDs conducted. • 85% of sentinel reporting sites reporting regularly. • 100% of rumours identified against outbreak. 	Localities of Kadugli, Dilling, Rashad, Abu Gebiha, Talodi, Lagawa, Keilak, As Salam and Abyei. And Kauda and Julud. ----- 1.3 million people ----- July - December 2008

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Southern Sudan		\$2,571,185				

Regional Sector Priorities

- To strengthen disease control and prevention programme and emergency preparedness and response capacity in Southern Sudan.
- To enable the provision of the basic package of health services and support to referral systems in Southern Sudan.
- To contribute to the reduction of maternal and under five mortality and morbidity in Southern Sudan.
- To strengthen coordination, communication, health systems and human resources for health of health and nutrition interventions.
- To improve the nutritional status of women and children under five and other vulnerable groups.

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ARC 25-Jun-08 Index: 1230 [5]	SUD-08/HN64 \$242,500 <u>Project Budget</u> Q1: \$252,845 Q2: \$505,691 Q3: \$505,691 Q4: \$505,691	<ul style="list-style-type: none"> Magwi County sits on the border of Uganda and on a major transport route from Kampala up to Juba. The county is heavily militarized, with both SPLA and UPDF battalions located there and an increasing threat of LRA presence. Further, it is currently one of the largest areas of return for UNCHR in South Sudan. Return figures as of April 8 (as reported by GTZ) were 23,486 individuals (6,035 HHs). Since then repatriation has been continuing at a rapid rate. Given these factors, Magwi is at a high risk for HIV transmission and, currently, has limited resources. VCT is provided at only one location, in Nimule, there is no ART and no Home Based Care anywhere in the county. Based on the sector priorities of areas of high return and "gateway" areas, Magwi is a grossly under-serviced county in need of immediate service provision for HIV prevention and care. ARC has applied for funding under BPRM to establish services in Nimule, however, the funding has not yet been approved and will not allow for a comprehensive response. CHF funding will allow for immediate programming to meet the needs of the returning community in such key areas as Parajok, Magwi Center and Nimule to encourage behaviour change, testing to know your status and accessing treatment and care in the community as it becomes available. Kajo Keji County, on the border with Uganda, was one of the first areas of large return in Southern Sudan. Isolated, due to road conditions from much of Sudan, most movement and trade happens with Uganda, leading to large scale movement of population across the border. This connection with Uganda, and its higher prevalence rate, as well as the large returns seen in the county last year, make it very vulnerable to increasing infection rates. HIV programs were established in Kajo Keji very early on, implemented by a number of actors such as ARC, IMC, UNHCR, DRC, PSI, CHF and others. However, as funding has decreased for the area in favour of newer areas of return, HIV activities in Kajo Keji are rapidly diminishing. IMC will be withdrawing, DRC has reduced their activities, CHF has left the area and many other partners are considering withdrawing as well. ARC currently is running three VCT sites and a large prevention campaign which covers most of the county via outreach events, peer educators and condom distribution sites. With the rapid reduction in HIV prevention and response services available, there is a serious gap emerging in Kajo Keji county. The ARC is seeking funding to continue providing services while future funding is found and to 	<ul style="list-style-type: none"> To improve awareness and knowledge of HIV/AIDS and STI transmission and prevention methods in Magwi and Kajo Keji Counties. To improve access to care and support services to PLHAs and individuals affected by HIV/AIDS in Magwi and Kajo Keji Counties. To build the technical capacity of the Magwi and Kajo Keji County AIDS Commission (CAC) and County Health Department (CHD) to effectively monitor HIV/AIDS programming, improve linkages between key stakeholders, and strengthen referral networks amongst service providers. 	NO INFORMATION PROVIDED.	NO INFORMATION PROVIDED.	Magwi and Kajo Keji Counties ----- NO INFORMATION PROVIDED. ----- January - December 2008

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
CCM 07-Jul-08 Index: 1260 [3]	SUD-08/HN223 \$100,000 <u>Project Budget</u> Q1: \$400,000 Q2: \$784,409 Q3: \$784,409 Q4: \$784,409	allow time to work with local service providers such as MoH and LNGOs to transfer as much of the responsibility for HIV prevention and response to them in a responsible manner. NO INFORMATION PROVIDED.	<ul style="list-style-type: none"> • Provide 24 hours surgical emergency interventions. • Supply drugs, disposable items and medical equipment. • Health education session. • Provide curative health service everyday. • Treat severe cases referred from PHCCs and PHCUs. • Staff supervision. • Training (refresher courses and on the job training). • Monitoring and evaluation of project activities. 	<ul style="list-style-type: none"> • 24 hours surgical emergency provided. • Improved quality and increased utilization of hospital services. At least 90% of staff trained. • All the severe cases referred from PHCCs and PHCCUs correctly treated. • Regular drugs and medical equipment supply assured. 	<ul style="list-style-type: none"> • The hospital services receive essential resources (drugs, vaccines teaching and educational material, transport, salaries, etc.). • ~300,000 inhabitants in Twic County benefit directly from the hospital care. • 6,000 consultations. • 200 surgical interventions. • 10 staff trained. 	Turalei/Twic County ----- ~ 300,000 inhabitant (estimated population) ----- NO INFORMATION PROVIDED.
Concern 25-Jun-08 Index: 1228 [3]	SUD-08/HN146 \$184,000 <u>Project Budget</u> Q1: \$443,633 Q2: \$652,008 Q3: \$893,721 Q4: \$893,721	Concern is providing essential health and nutritional services in 16 facilities in Aweil West and North counties, an area which has seen large numbers of returnees this year as well as in past years. The services provided will contribute to the reduction of mortality and morbidity while improving the nutritional status of women and children under five. Integrated services of health and nutrition services are provided in 8 facilities in Aweil West while the remaining 8 sites in Aweil North provide nutritional services with emergency health through mobile teams. Concern is working closely with the State Ministry of Health to develop referral systems especially in the area of maternal health. Community health activities will assist in defaulters of EPI and nutritional services to be traced and referred back to facilities. In close collaboration with the county health departments supervision and monitoring systems are being developed.	<ul style="list-style-type: none"> • Train staff on detection and management of malnutrition. • Train community health promoters to screen, identify and refer children under 5 and pregnant women with malnutrition to the feeding sites and clinics. • Provide necessary equipment and supplies for treatment of malnutrition. • Provide drugs, equipment and other medical supplies to PHCUs and PHCC. • Provide inpatient, outpatient and community based care for malnourished children and women. • Provision of immunization services at the facility and outreach sites to children under 1 years and women on reproductive age groups. • In conjunction with the country health departments standardize treatment protocols and guidelines for various diseases used by the health workers and monitoring of these. • Provision of basic and comprehensive EmOC at the PHCC and PHCU. • Provision of minimum health package at two clinics in Aweil North. • Provision of emergency health care to the community at four SFP sites in Aweil North. • Conduct 1 nutritional survey and 1 KAP study. • Provision of antenatal and delivery care. 	<ul style="list-style-type: none"> • Increased availability and access to improved health care through 5 directly supported PHCUs, one PHCC, and community based services. • Children, lactating and pregnant mothers recovered from malnourishment with provision of supplementary feeding and medical care. • Reduced maternal and under 5 mortality and morbidity in Aweil West and Aweil North Counties. • Increased capacity of County Health Departments and health staff to plan and deliver improved health services. 	<ul style="list-style-type: none"> • By the end of 2008, a total of 705 children (105 from 2007) with severe malnutrition will be admitted/ treated for malnutrition and other infections. • By the end of 2008, a total of 6,191 (1,491 from 2007) beneficiaries - children, pregnant and lactating women and elderly with moderate acute malnutrition will be provided nutritional therapy. • By the end of 2008, 897 in-patients and their caretakers will be provided food at SC and PHCC. • By the end of 2008, a total of 35,000 people will be educated on various health topics related to the prevention and treatment of malnutrition. • By the end of 2008, 100 Community Health Promoters (CHPs) will be trained on promotion of breast feeding, balanced diet and personal and environmental hygiene practices. Concern will organize a series of training on various topics to the CHPs who then train others to promote health education to the wider community. • 50 Traditional Birth Attendants (TBAs) will get a refresher training. • October 2008 nutritional surveys will be carried out. 	Aweil West and Aweil North Counties, NBEG ----- This project is expected to target 78,000 beneficiaries (both returnees and host communities) from 1 January - 31 December 2008. The number of returnees (spontaneous and organized) are estimated to be 33,559 in Aweil West and 44,401 in Aweil North County. ----- January - December 2008

Project Details		CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
Medair 25-Jun-08 Index: 1227 [2]	SUD-08/HN91 Primary Health Care in Upper Nile State - [S] - [HIV][Gnd][CB][Env][ERA] - (HER)	\$200,000 <u>Project Budget</u> Q1: \$900,000 Q2: \$1,350,000 Q3: \$1,799,600 Q4: \$1,799,600	The need for this grant has only grown since the first CHF allocation. Medair has a funding Gap of 200,000 in the second half of 2008 which will cause programmes to stop before the end of the year. The closing of BSF grant and the massive delays (and small size) of the forthcoming MDTF grant mean that Medair urgently needs the pre-allocated funding in order to maintain healthcare services in Upper Nile. Medair's programme in Melut also has a nutritional component which has not been financially supported so far in 2008 – while a potential nutrition partner (ACF USA) was not able to implement. Medair has therefore supported a horizontal programme through its own private funding so far. However this funding is running short and will not be sustainable for the rest of the year – even though the bulk of cases will be seen in the coming months. With this CHF allocation in addition to limited private funding from Medair the funding gap will be bridged. Medair will then be able to access other early recovery funding mechanisms in early 2009 and maintain provision of health care to one of the least reached areas in Upper Nile.	<ul style="list-style-type: none"> • Primary Health Care support to 85,000 people through 6 PHCUs and 1 PHCC (approximately 30,000 beneficiaries pa). • TB and Kalazar programme (approximately 25 beneficiaries pa). • Integrated feeding programme within primary health care (therapeutic and supplementary) (approximately 400 beneficiaries pa). • Integrated health and hygiene promotion activities. • EPI (approx 1200 beneficiaries pa). • Capacity building of County Health Department. • Birth Assistance through MCHWs and TBAs (approximately 2,000 deliveries pa). 	<ul style="list-style-type: none"> • High quality primary health care provided by Medair supported health facilities in Melut County according to MoH basic package of health services. • Increased family and community awareness and practice of health and hygiene promoting behaviours. • Increased capacity of individuals and the local authority to practice good governance in supporting, managing and delivering sustainable health services. 	<ul style="list-style-type: none"> • 25% of patients with malaria receive correct treatment at the health facilities. • Increased birth attended by skilled birth attendants by 2% compared to June 2007. • Increased DPT3 immunisation by 10% compared to June 2007. • 50% of all health personnel working in Medair supported health facilities is trained in malaria case management or IEHC. 	Melut, Payuer, Paloich, Wunumum, Goldora, Pariak, Thangrial (all in Melut County) ----- • Melut County, Upper Nile State • 1 PHCU in each payam: Panamdith, Goldora, Paloich, Wunumum, Melut, Pariak • 1 PHCC in Melut Town ----- January - December 2008
UNICEF 25-Jun-08 Index: 1226 [1]	SUD-08/HN110 Treatment of Acute Malnutrition - [S] - [HIV][Gnd][CB][ERA] - (HER)	\$1,438,905 <u>Project Budget</u> Q1: \$750,000 Q2: \$1,470,000 Q3: \$1,985,000 Q4: \$1,985,000	Increasing levels of acute malnutrition in Southern Sudan remain a cause for concern especially in the high risk states during the hunger gap season. The above project activities support the agreed sector priorities to improve nutritional status of women and children under-5. No other funds are immediately available for the proposed activities since a CERF proposal submitted does not look like it will get funded and no funds from the first round CHF allocations were made to this project.	<ul style="list-style-type: none"> • Train 120 health workers for 1 week on treatment of malnourished children and 240 community nutrition promoters for 3 days on screening and referral of malnourished children. • Procure and distribute therapeutic food and equipment. • Support states and NGO partners to conduct rapid nutrition assessments/surveys. 	<ul style="list-style-type: none"> • At least 50% (15,000) of the children suffering from severe acute malnutrition in five high risk states have access to appropriate therapeutic services in line with the national protocol. • Reduction in case-fatality rate from severe acute malnutrition. • 80% of caregivers of malnourished children treated understand the nutrition problem affecting children, and some of the preventive measures. 	<ul style="list-style-type: none"> • 15,000 acutely malnourished children in the 6 target states treated. • 120 health workers trained in organisation and management of therapeutic responses. • 240 community nutrition promoters trained in nutrition screening and referral of malnourished children and home-based care. 	Unity, Uppr Nile, Eastern Equatoria, NBEG, Jonglei and Warrap in Southern Sudan ----- An estimated 1,300,000 children under five years in geographic area covered with 15,000 acutely malnourished children as the direct beneficiaries. ----- January - December 2008
UNICEF 25-Jun-08 Index: 1268 [1]	SUD-08/HN116 HIV/AIDS Behaviour Change Outreach to Prevent the Spread of HIV/AIDS - [S] - [HIV][Gnd] - (RD)	\$81,800 <u>Project Budget</u> Q1: \$1,129,326 Q2: \$1,624,006 Q3: \$1,624,006 Q4: \$1,624,006	Due to its geographical location, Akobo County is receiving a lot of returnees and therefore at a higher risk for the spread of HIV/AIDS. This project aims to provide adequate services for testing of STIs and to educate people by disseminating key health messages through health facilities, BCC campaigns and community outreach thus falling within the overall sector priorities. Although this project is less than the CHF minimum of \$200,000, it contributes significantly to the package of projects proposed for the Akobo special area, and allows the full achievement of the proposed targets.	<ul style="list-style-type: none"> • Conduct trainings in BCC, condom distribution, STI management, laboratory techniques, lso safety, universal precautions, counseling and testing, programme and data management. • Quality case management of STIs, supported with lab results at Akobo PHCC, and syndromic management protocol at PHCUs level. • Disseminate key health education messages through health education sessions at the health facilities, BCC campaigns and home visits conducted by VHCs and community volunteers. • Development and distribution of IEC materials (at health facilities and within the community). 	<ul style="list-style-type: none"> • Improved STI services in Akobo County. • Blood safety and universal precautions ensured at supported health facilities. • Reduction of sexual risk, stigma and discrimination in Akobo County. 	<ul style="list-style-type: none"> • 1 facility equipped to provide STI, VCT and PMTCT services and implementing blood safety and universal precautions protocol. • 6 training sessions conducted for 100% of health personnel and community outreach workers. • 30% target population reached through health education messages and 5% received IEC materials. 	Akobo County, Jonglei State ----- An estimated 15,000 people in and surrounding Akobo Town (Jonglei State) including returning refugees and IDPs. This includes an estimated 3,174 infants under one year of age, 1,191 children between one and four years old and 2,230 women of child bearing age. ----- NO INFORMATION PROVIDED.

Project Details		CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
WHO 25-Jun-08 Index: 1229 [4]	SUD-08/HN124 Disease Control, Prevention and Epidemic Preparedness and Response Programme for Southern Sudan - [S] - [HIV][Gnd][CB][Env] - (HER)	\$323,980 <u>Project Budget</u> Q1: \$800,000 Q2: \$1,300,000 Q3: \$2,480,000 Q4: \$2,480,000	<p>To expand and sustain the technical and management capacity of epidemiological surveillance, outbreak investigation and coordination of response to the current communicable diseases outbreak and any forthcoming communicable disease outbreaks. With the onset of rain seasons; several states have started reporting increasing cases of Acute watery diarrhea and cholera. The number of cases is expected o raise in the next coming month. Since the beginning of the year (1 Jan 2008 - 8 June 2008), 5928 cases of Acute Watery Diarrhoea with 44 deaths have been reported and 3,548 cases of Acute Bloody diarrhoea with 14 deaths have been reported. There have been 123 cases of measles with 5 deaths reported and 97 cases of meningitis with 15 deaths reported. The viral hemorrhagic fever a very contiguous disease and Hepatitis E have been reported in the neighboring country pose threat to Southern Sudan, where surveillance for diseases outbreak is weak compounded by low health care services overage.</p>	<ul style="list-style-type: none"> • Strengthening of the surveillance and standard operating procedures thorough training of trainers workshops in 10 states. • Procurement of medicines and supplies and equipment for outbreak response (Meningitis kits, Diarrhea kits, sample collection materials, investigation kits). • Provision of technical support to the state Ministry of Health in establishing integrated diseases surveillance and outbreak respond to in Jonglei State. 	<ul style="list-style-type: none"> • Strengthened program of diseases control/prevention covering the 10 states of Southern Sudan. • Strengthened emergency preparedness program to cover the 10 states of Southern Sudan. • Strengthened surveillance program and capacity response for the 10 states of southern Sudan. 	<ul style="list-style-type: none"> • To have trained county health workers and communities in IDSR and the IDSR system is functional within the state. • Functioning coordination mechanism for emergency response at county level and below and meeting regularly. • At least 80% of health facilities using the protocols and guidelines. • Bcc program being implemented in all the state counties. • Emergency communication system between state and counties covers at least 80%. 	All 10 states in Southern Sudan ----- Estimated at 4,960,000 females and 4,940,000 males ----- January - December 2008

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
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Mine Action						Total Sector Allocation: \$800,000
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Eastern States		\$800,000				
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Regional Sector Priorities

- Conduct technical survey of high impacted areas.
- Clearance of all identified contaminated roads.
- Clearance of dangerous areas and minefields.
- Reduce the risk of injury from landmines and ERW by providing targeted Mine Risk Education to at risk individuals.

<p>UNMAS 25-Jun-08 Index: 1147 [1]</p>	<p>SUD-08/MA2 Integrated Mine and Explosive Remnants of War (ERW) Clearance - [S][D][A][BN][SK][E] - [Gnd][CB] - (HER)</p>	<p>\$800,000 <u>Project Budget</u> Q1: \$2,000,000 Q2: \$2,116,969 Q3: \$3,969,665 Q4: \$3,969,665</p>	<p>High number of high-impacted communities along the border with Eritrea in Kassala & Gadaref and high victim rate making these locations high priority from humanitarian point of view.</p>	<p>Conduct survey and clearance of landmines and ERW</p>	<ul style="list-style-type: none"> • Residents and returnees able to safely travel and conduct farming in Blue Nile State. • Easier access to locations requiring humanitarian aid. • Residents, returnees, aid workers and peacekeepers, etc in Blue Nile State informed of risk prevention from, and location of, ERW and UXOs that may still exist. • Priority areas for safety actions, including ammunition storage locations, identified in concert with NGOs and Sudanese government. • Areas surveyed and marked for further removal/destruction of ordnance. • Removal/destruction of explosive remnants of war. • Delineating unsafe areas and marking. • Mine Clearance Teams will conduct surveys and de-mining operations. 	<ul style="list-style-type: none"> • Conduct 25 General Mine Action Assessments in Kassala State. • Conduct 390,000 sq m of battle area clearance. • Clear 65,000 sq m of high impact minefields. 	<p>Eastern States ----- • Persons living in communities impacted by landmines and ERW. • IDPs and Refugees. • Aid agencies and workers, especially who are involved in emergency assistance activities (UN, NGOs and those international and national staff). • Donors (safe and smooth implementation of emergency assistance or development activities). ----- October 2008 to June 2009</p>
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Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
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NFIs and Emergency Shelter

Total Sector Allocation: **\$3,119,000**

Abyei

\$150,000

Regional Sector Priorities

- To improve emergency preparedness and response.
- To assist the affected populations returning to Abyei with basic household items.
- To develop common sectoral guidelines for assistance.
- To strengthen information sharing mechanisms and identify gaps in coverage.
- To improve needs assessment methodology, and monitoring and evaluation of activities.

SC-US 18-Jun-08 Index: 1257 [2]	SUD-08/NS57 Returnees Re-integration and Re-settlement Project - [A] - [HIV][Gnd][CB][Env][ERA] - (HER)	\$10,000 <u>Project Budget</u> Q1: \$110,000 Q2: \$143,100 Q3: \$163,100 Q4: \$163,100	Since SC-US is considered one of the very limited number of UNJLCs' partners in Abyei, thus, this amount is considered very essential and adequate for SC-US to cover distribution costs and secondary transportation.	• Distribution of NFI & ES to affected populations returning to Abyei.	• Affected populations returning to Abyei receive non-food and emergency shelter items in a timely manner. • Basic living conditions are improved and households are protected from elements.	• Distribution to affected populations returning to Abyei.	Abyei ----- 6,000 returnees that fled to north and east of Abyei during the May crisis. ----- January - December 2008
UNICEF 18-Jun-08 Index: 1256 [1]	SUD-08/NS3 Procurement of Non-Food Items for the Darfur Non-Food Item Common Pipeline and for Inter-agency NFI and Emergency Shelter Response in Non-Darfur Northern Sudan - [D][A][BN][SK][E][KN] - [ERA] - (HER)	\$140,000 <u>Project Budget</u> Q1: \$73,500 Q2: \$105,000 Q3: \$105,000 Q4: \$140,000	<ul style="list-style-type: none"> • Procurement of the items is a primary priority as it ensures that distributions will take place to 6,000 returnees that fled Abyei to the north and east and had not been reached. If the pipeline is healthy, partners in the sector are able to carry out their activities. Moreover, the sector requires a three-month lead time from the time funds are received, to procurement and delivery of items in country. • Donors value and support the concept of the common pipeline procurement as it saves costs and ensure that the sector performs efficiently. The common pipeline has been proven to be a successful partnership between UN actors and NGOs. All partners in the sector thus benefit from timely and adequate procurement. 	• Local and overseas procurement of non-food and emergency shelter items and delivery to main hubs in order to respond to affected populations returning to Abyei.	<ul style="list-style-type: none"> • Non-food and emergency shelter items are procured for families that have lost essential household belongings. • Availability of non-food and emergency shelter items to meet targeted needs will be improving the basic living conditions of those targeted by the distributions. 	• Local and overseas procurement of NFI&ES items. • Delivery to storing hubs.	Abyei ----- 6,000 returnees that fled tonorth and east of Abyei during the May crisis. ----- From date of receipt of CHF allocation letter to 208-12-31

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline	
Blue Nile							
\$18,250							
<i>Regional Sector Priorities</i>							
<ul style="list-style-type: none"> To assist emergency affected populations with basic household items. To build capacity of national NGOs by improving their ability to carry out assessments, distributions and monitoring. To improve emergency preparedness and response. 							
WFP (UNJLC) 06-Jul-08 Index: 1215 [1]	SUD-08/NS58 Emergency Preparedness, Response and Mitigation - [BN][SK][E][KN] - [CB] - (HER)	\$18,250 <i>Project Budget</i> Q1: \$0 Q2: \$18,250 Q3: \$18,250 Q4: \$18,250	Through this funding, UNJLC will ensure that adequate preparedness measures in the NFI/ES sector are in place for flooding in Northern Sudan in 2008. Preparedness and mitigation measures will be addressed through capacity building, distribution funds for vulnerable areas and a pilot study on flood resistant construction and other mitigation strategies. Total project costs are \$73,000 which was divided evenly among four regions.	<ul style="list-style-type: none"> Capacity building in emergency preparedness themes for NGOs and Government counterparts in 6 northern States. Distribution funding for NGO partners to ensure delivery of NFIs in flood prone states. A joint UNHABITAT/UNJLC study which will make up the first step of a pilot program for a flood-resistant housing initiative in Sudan. 	<ul style="list-style-type: none"> Improved emergency preparedness and response capacity for the NFI/ES sector in Northern Sudan. Improved strategies for flood mitigation to reduce the need for humanitarian assistance during future floods. 	<ul style="list-style-type: none"> Staff from at least 20 NGOs and Government counterpart offices trained in emergency preparedness. 50,650 flood-affected beneficiaries receiving NFIs in three vulnerable Northern States. Concrete flood mitigation action plans produced for two communities from UN Habitat/UNJLC flood mitigation pilot study. 	Khartoum and Northern States, Blue Nile State, Eastern States, Southern Kordofan State. ----- 90 participants (at least 40% women) from 20 NGOs and Government counterpart offices trained in emergency preparedness; 50,650 flood affected beneficiaries receiving NFIs in three vulnerable Northern States; Approximately 20,000 beneficiaries in two pilot communities benefiting from UN Habitat/UNJLC flood mitigation pilot study. ----- April - December 2008
Darfur							
\$646,000							
<i>Regional Sector Priorities</i>							
<ul style="list-style-type: none"> Target populations affected by conflict and disaster, as well as returnees and displaced populations not residing in large camp areas. Improve needs assessment methodology and monitoring and evaluation of activities. Build capacity of national NGOs ability to conduct assessments, distribution and monitoring. Improve information availability and sharing on NFI needs both inter- and intra-sectorally. Establish pilot project on culturally appropriate and environmentally-friendly shelter, engage technical experts on developing and constructing appropriate emergency shelter, identify and collaborate with new actors on sustainable shelter, and identify methods for environmental damage reduction. 							
Concern 08-Jul-08 Index: 1178 [1]	SUD-08/NS24 Using NFIs to Mitigate Vulnerability in Kulbus and Kerenik Localities of Western Darfur - [D] - [HIV][Gnd][CB][Env] - (HER)	\$183,500 <i>Project Budget</i> Q1: \$425,901 Q2: \$859,232 Q3: \$891,172 Q4: \$891,172	Timely distribution of non-food and emergency shelter items is essential to alleviate the suffering of those that have lost all household belongings due to conflict. The sector is 100% dependent on national and international NGOs to carry out distributions to targeted populations in Darfur.	<ul style="list-style-type: none"> Needs assessments. Distributions of non-food and emergency shelter items to targeted beneficiaries. 	<ul style="list-style-type: none"> To mitigate health threats. Improve basic living conditions. Contribute to protection of vulnerable individuals through the provision of key NFIs. 	<ul style="list-style-type: none"> Sector partners including UN and NGO actors to follow the Common Pipeline Guiding Principles - prepared by UNJLC - when executing activities in the NFI and emergency shelter sector. Some 36,000 targeted households receive non-food and emergency shelter items. 	Kulbus Locality and Krenick Locality (Western Darfur) ----- <ul style="list-style-type: none"> Kulbus Locality - 12,900 HH Krenick Locality (Mornei DP Camp and Environs) - 23,100 HHs ----- From date of receipt of CHF allocation letter to 2008-12-31

Project Details		CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
IAH 08-Jul-08 Index: 1212 [2]	SUD-08/NS59 Effective and sustainable NFI Distributions within South Darfur's Disabled Community - [D] - [CB] - (HER)	\$62,500 <u>Project Budget</u> Q1: \$25,000 Q2: \$75,000 Q3: \$125,000 Q4: \$125,000	The sector is 100% dependent on national and international NGOs to carry out distributions to targeted populations in Darfur. As a national NGO, IAH is targeting the most vulnerable members of society, being disabled or handicapped, who are displaced due to either conflict and/or natural disasters. Timely distribution of non-food and emergency shelter items is essential to alleviate the suffering of those that have lost all essential household belongings, most especially of the disabled.	Identification of and distributions to newly displaced, most especially the disabled and those not residing in organised camps.	<ul style="list-style-type: none"> Ensure the timely provision of Non-Food and emergency shelter items to households of disabled/handicapped IDPs in South Darfur; within this targeted community there are returnees, newly displaced, disaster affected and most vulnerable persons. 	<ul style="list-style-type: none"> Sector partners including UN and NGO actors to follow the Common Pipeline Guiding Principles - prepared by UNJLC - when executing activities in the NFI and emergency shelter sector. Some 3,000 extremely vulnerable targeted individuals receive non-food and emergency shelter items. 	Southern Darfur ----- 3,000 HHs of disabled/handicapped IDPs in Southern Darfur ----- From date of receipt of CHF allocation letter to 2008-12-31
INTERSOS 08-Jul-08 Index: 1179 [3]	SUD-08/NS7 Supporting Conflict-Affected Vulnerable People with NFIs in Western Darfur - [D] - [Gnd] - (HER)	\$70,000 <u>Project Budget</u> Q1: \$44,683 Q2: \$134,049 Q3: \$134,049 Q4: \$134,049	The sector is 100% dependent on national and international NGOs to carry out distributions to targeted populations in Darfur. The allocation is necessary to fulfil the objective and to achieve the activities.	<ul style="list-style-type: none"> Distribution of NFIs to affected communities. Monitoring and needs assessments. 	<ul style="list-style-type: none"> To ensure the provision of appropriate and timely non-food and emergency shelter items to people affected by conflict and disaster, and to other vulnerable populations such as returnees. 	<ul style="list-style-type: none"> Sector partners including UN and NGO actors to follow the Common Pipeline Guiding Principles - prepared by UNJLC - when executing activities in the NFI and emergency shelter sector. Over 14,000 conflict-affected HHs will receive non-food and emergency shelter items. 	Western Darfur ----- 45,000 conflict-affected households in Western Darfur ----- From date of receipt of CHF allocation letter to 2008-12-31
UNHCR 08-Jul-08 Index: 1181 [5]	SUD-08/NS30 Shelter and Non-Food items Support to Vulnerable Persons - [D] - [Gnd][Env] - (HER)	\$200,000 <u>Project Budget</u> Q1: \$2,915,138 Q2: \$4,372,707 Q3: \$6,224,365 Q4: \$6,224,365	NFIs distributions to refugees are not covered by the NFI Common Pipeline.	<ul style="list-style-type: none"> Procurement and distribution of NFIs to refugees from Chad and CAR. 	<ul style="list-style-type: none"> NFI and emergency shelter is provided in a timely fashion to refugees in refugee camps, and vulnerable refugee population in border areas with Chad and CAR. 	<ul style="list-style-type: none"> Sector partners including UN and NGO actors to follow the Sector Guiding Principles - prepared by UNJLC - when executing activities in the NFI and emergency shelter sector. 1,500 new arrival of refugees receive non-food and emergency shelter items. 	Western Darfur ----- Provision of Non-Food and emergency shelter items to 1,500 new arrival of refugees from Chad and CAR in Western Darfur ----- From date of receipt of CHF allocation letter to 2008-12-32
WFP (UNJLC) 08-Jul-08 Index: 1180 [4]	SUD-08/NS14 Coordination of the Non-Food Items and Emergency Shelter Sector - [D] - [HIV][Gnd][CB][Env][FA] - (HER)	\$130,000 <u>Project Budget</u> Q1: \$1,050,000 Q2: \$1,470,000 Q3: \$1,912,099 Q4: \$1,912,099	The effective management of the supply chain is critical, considering the need to ensure that commodities are appropriate and reach the affected population in a timely manner. Also, the role of Sector Lead is crucial in ensuring coordination of activities. While each organisation is concerned with excellence in their area of operation, management of the Common Pipeline and coordination of the sector brings all the stakeholders together to maintain coherence and harmonization of activities. Without this coordination, the supply chain would be disrupted, consequently penalizing beneficiaries that are in need of NFIs and shelter materials. UNJLC faced a huge funding shortfall in the first CHF allocations.	<ul style="list-style-type: none"> Management of the common pipeline that supplies items to distributing organisations, and coordination of the NFI and emergency shelter sector. 	<ul style="list-style-type: none"> Coherence and harmonisation of sector activities is achieved through coordination and information sharing. Therefore gaps in distribution coverage are identified and addressed. Supply chain of the NFI Common Pipeline is steady and efficient thus targ 	<ul style="list-style-type: none"> Sector partners including UN and NGO actors to follow the Sector Guiding Principles - prepared by UNJLC - when executing activities in the NFI and emergency shelter sector. Some 320,000 targeted households receive non-food and emergency shelter items. 	Southern, East, and Northern Darfur ----- Co-ordination of provision of Non-Food and emergency shelter items to 320,000 H/H of IDPs across Darfur ----- From date of receipt of CHF allocation letter to 2008-12-31

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
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Eastern States	\$393,250
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Regional Sector Priorities

- To provide returnees, host populations, IDPs, refugees and asylum seekers, and other vulnerable households with basic household items. The expected outcome is that health threats are mitigated, basic living conditions improved, and respective beneficiaries protected from environmental elements. Those affected cannot replace their lost essential items without the assistance of the humanitarian community. Distribution of non-food and emergency shelter items help to restore minimal human dignity.
- To improve emergency preparedness and response and improve coordination with all actors including the local authorities.
- To develop common Sectoral guidelines for assistance.
- To strengthen information sharing mechanisms and identify gaps in coverage. And to improve needs assessment methodology, and monitoring and evaluation of activities.

UNHCR 25-Jun-08 Index: 1183 [2]	SUD-08/NS53 Support to Refugees and Refugee Hosting Areas in Eastern Sudan (NS Component) - [E] - [Gnd] - (HER)	\$300,000 <u>Project Budget</u> Q1: \$650,580 Q2: \$975,871 Q3: \$1,256,108 Q4: \$1,256,108	<ul style="list-style-type: none"> • NFI packages have been provided to over 10,000 asylum seekers from Ethiopia, Eritrea and Somalia. On a monthly basis, UNHCR welcomes an average 1000 persons from the said countries; 7,000 additional asylum seekers are expected by year end. The NFI packages consist of blankets, jerry cans, kitchen sets, sleeping mats, mosquito nets, blankets and plastic sheets. • Emergency shelter (tukuls) has been provided to over 2,500 new arrivals in camps in shagarab and suki. More tukuls are being constructed for some 14,500 new asylum seekers (7,500 already present in eastern Sudan plus 7000 expected new arrivals). Transit facilities have been established in Tokar and Shagarab for new asylum seekers. • UNHCR does not have access to the common humanitarian NFI stock as these stocks do not cater to the needs of asylum seekers and refugees. UNHCR has therefore not benefited from funds allocated to the UNJLC. • During the first round of CHF allocations UNHCR received US\$0 against a work plan project budget of US\$1.2m. 	Procurement and distribution of NFI & ES to the refugees.	Coherence and harmonisation of sector activities is achieved through coordination and information sharing. Therefore gaps in distribution coverage are identified and addressed. Supply chain of the NFIs is steady and efficient thus targeted beneficiaries reached in a timely manner, with appropriate items.	Eastern States ----- Refugees and asylum seekers from Ethiopia and Eritrea and Somalia. ----- From date of receipt of CHF allocation letter to 2008-12-31
WFP (UNJLC) 25-Jun-08 Index: 1182 [1]	SUD-08/NS2 Coordination of the Non-Food Items and Emergency Shelter Sector - [A][BN][SK][E][KN] - [HIV][Gnd][CB] - (HER)	\$75,000 <u>Project Budget</u> Q1: \$39,000 Q2: \$62,400 Q3: \$71,021 Q4: \$75,000	Coordination will keep track of stocks, identify gaps in coverage, and reduce duplications of funds and efforts. Management of the supply chain is critical in ensuring that items reach targeted beneficiaries in a timely manner. In addition, adequacy and suitability of items must be monitored and maintained.	<ul style="list-style-type: none"> • Manage the Common Pipeline. • Take part in joint needs assessments. • Support the IOM organized returns. • Disseminate information on activities, distributions, and stocks. Hold sector meetings and publish monthly bulletins and quarterly monitoring reports. 	Coherence and harmonisation of sector activities is achieved through coordination and information sharing. Therefore gaps in distribution coverage are identified and addressed. Supply chain of the NFI Common Pipeline is steady and efficient thus targeted beneficiaries reached in a timely manner, with appropriate items.	Eastern States ----- Target groups are those that have lost their essential household items due to disaster or conflict. These include IDPs, returnees, affected host communities, and other vulnerable households. There are some 7,500 households targeted till the end of 2008. ----- From date of receipt of CHF allocation letter to 2008-12-31

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
WFP (UNJLC) 06-Jul-08 Index: 1213 [1]	SUD-08/NS58 Emergency Preparedness, Response and Mitigation - [BN][SK][E][KN] - [CB] - (HER) \$18,250 <u>Project Budget</u> Q1: \$0 Q2: \$18,250 Q3: \$18,250 Q4: \$18,250	Through this funding, UNJLC will ensure that adequate preparedness measures in the NFI/ES sector are in place for flooding in Northern Sudan in 2008. Preparedness and mitigation measures will be addressed through capacity building, distribution funds for vulnerable areas and a pilot study on flood resistant construction and other mitigation strategies. Total project costs are \$73,000 which was divided evenly among four regions.	<ul style="list-style-type: none"> Capacity building in emergency preparedness themes for NGOs and Government counterparts in 6 northern States. Distribution funding for NGO partners to ensure delivery of NFIs in flood prone states. A joint UNHABITAT/UNJLC study which will make up the first step of a pilot program for a flood-resistant housing initiative in Sudan. 	<ul style="list-style-type: none"> Improved emergency preparedness and response capacity for the NFI/ES sector in Northern Sudan. Improved strategies for flood mitigation to reduce the need for humanitarian assistance during future floods. 	<ul style="list-style-type: none"> Staff from at least 20 NGOs and Government counterpart offices trained in emergency preparedness. 50,650 flood-affected beneficiaries receiving NFIs in three vulnerable Northern States. Concrete flood mitigation action plans produced for two communities from UN Habitat/UNJLC flood mitigation pilot study. 	Khartoum and Northern States, Blue Nile State, Eastern States, Southern Kordofan State. ----- 90 participants (at least 40% women) from 20 NGOs and Government counterpart offices trained in emergency preparedness; 50,650 flood affected beneficiaries receiving NFIs in three vulnerable Northern States; Approximately 20,000 beneficiaries in two pilot communities benefiting from UN Habitat/UNJLC flood mitigation pilot study. ----- April - December 2008
Khartoum and Other Northern States		\$18,250				

Regional Sector Priorities

- To assist emergency affected populations with basic household items.
- To build capacity of national NGOs by improving their ability to carry out assessments, distributions and monitoring.
- To improve emergency preparedness and response.

WFP (UNJLC) 06-Jul-08 Index: 1216 [1]	SUD-08/NS58 Emergency Preparedness, Response and Mitigation - [BN][SK][E][KN] - [CB] - (HER) \$18,250 <u>Project Budget</u> Q1: \$0 Q2: \$18,250 Q3: \$18,250 Q4: \$18,250	Through this funding, UNJLC will ensure that adequate preparedness measures in the NFI/ES sector are in place for flooding in Northern Sudan in 2008. Preparedness and mitigation measures will be addressed through capacity building, distribution funds for vulnerable areas and a pilot study on flood resistant construction and other mitigation strategies. Total project costs are \$73,000 which was divided evenly among four regions.	<ul style="list-style-type: none"> Capacity building in emergency preparedness themes for NGOs and Government counterparts in 6 northern States. Distribution funding for NGO partners to ensure delivery of NFIs in flood prone states. A joint UNHABITAT/UNJLC study which will make up the first step of a pilot program for a flood-resistant housing initiative in Sudan. 	<ul style="list-style-type: none"> Improved emergency preparedness and response capacity for the NFI/ES sector in Northern Sudan. Improved strategies for flood mitigation to reduce the need for humanitarian assistance during future floods. 	<ul style="list-style-type: none"> Staff from at least 20 NGOs and Government counterpart offices trained in emergency preparedness. 50,650 flood-affected beneficiaries receiving NFIs in three vulnerable Northern States. Concrete flood mitigation action plans produced for two communities from UN Habitat/UNJLC flood mitigation pilot study. 	Khartoum and Northern States, Blue Nile State, Eastern States, Southern Kordofan State. ----- 90 participants (at least 40% women) from 20 NGOs and Government counterpart offices trained in emergency preparedness; 50,650 flood affected beneficiaries receiving NFIs in three vulnerable Northern States; Approximately 20,000 beneficiaries in two pilot communities benefiting from UN Habitat/UNJLC flood mitigation pilot study. ----- April - December 2008
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Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
Northern Sudan		\$1,625,000				
<i>Regional Sector Priorities</i>						
<ul style="list-style-type: none"> To provide returnees, host populations, IDPs, refugees and asylum seekers, and other vulnerable households with basic household items. The expected outcome is that health threats are mitigated, basic living conditions improved, and respective beneficiaries protected from environmental elements. Those affected cannot replace their lost essential items without the assistance of the humanitarian community. Distribution of non-food and emergency shelter items help to restore minimal human dignity. To improve emergency preparedness and response; and improve coordination with all actors including the local authorities. To develop common Sectoral guidelines for assistance. To strengthen information sharing mechanisms and identify gaps in coverage. And to improve needs assessment methodology, and monitoring and evaluation of activities. 						
UNICEF 25-Jun-08 Index: 1184 [1]	SUD-08/NS3 Procurement of Non-Food Items for the Darfur Non-Food Item Common Pipeline and for Inter-agency NFI and Emergency Shelter Response in Non-Darfur Northern Sudan - [D][A][BN][SK][E][KN] - [ERA] - (HER)	\$1,625,000 <i>Project Budget</i> Q1: \$0 Q2: \$0 Q3: \$0 Q4: \$12,035,000	Procurement of non-food and emergency shelter items for the common pipeline is a primary priority as it ensures that distributions to targeted populations will indeed take place. If the pipeline is healthy, partners in the sector are able to carry out their activities. Most importantly, the common pipeline saves costs due to the economies of scale. Also, the common pipeline has been proven to be a successful partnership between UN actors and NGOs. All partners in the sector thus benefit from timely and adequate procurement. Moreover, the sector requires a three-month lead time from the time funds are received, to procurement and delivery of items in country.	Local and overseas procurement of non-food and emergency shelter items and delivery to main hubs in Khartoum and El Obeid.	Availability of non-food and emergency shelter items to meet targeted needs, thus improving basic living conditions of those targeted by the distributions.	Procure items enough to meet the yearly needs of the 320,000 targeted households.
						Darfur ----- IDPs, targeted host populations, returnees, and others that have lost essential household belongings due to conflict or disaster. ----- From date of receipt of CHF allocation letter to 2008-12-31
Southern Kordofan		\$18,250				
<i>Regional Sector Priorities</i>						
<ul style="list-style-type: none"> To assist emergency affected populations with basic household items. To build capacity of national NGOs by improving their ability to carry out assessments, distributions and monitoring. To improve emergency preparedness and response. 						
WFP (UNJLC) 06-Jul-08 Index: 1214 [1]	SUD-08/NS58 Emergency Preparedness, Response and Mitigation - [BN][SK][E][KN] - [CB] - (HER)	\$18,250 <i>Project Budget</i> Q1: \$0 Q2: \$18,250 Q3: \$18,250 Q4: \$18,250	Through this funding, UNJLC will ensure that adequate preparedness measures in the NFI/ES sector are in place for flooding in Northern Sudan in 2008. Preparedness and mitigation measures will be addressed through capacity building, distribution funds for vulnerable areas and a pilot study on flood resistant construction and other mitigation strategies. Total project costs are \$73,000 which was divided evenly among four regions.	<ul style="list-style-type: none"> Capacity building in emergency preparedness themes for NGOs and Government counterparts in 6 northern States. Distribution funding for NGO partners to ensure delivery of NFIs in flood prone states. A joint UNHABITAT/UNJLC study which will make up the first step of a pilot program for a flood-resistant housing initiative in Sudan. 	<ul style="list-style-type: none"> Improved emergency preparedness and response capacity for the NFI/ES sector in Northern Sudan. Improved strategies for flood mitigation to reduce the need for humanitarian assistance during future floods. 	<ul style="list-style-type: none"> Staff from at least 20 NGOs and Government counterpart offices trained in emergency preparedness. 50,650 flood-affected beneficiaries receiving NFIs in three vulnerable Northern States. Concrete flood mitigation action plans produced for two communities from UN Habitat/UNJLC flood mitigation pilot study.
						Khartoum and Northern States, Blue Nile State, Eastern States, Southern Kordofan State. ----- 90 participants (at least 40% women) from 20 NGOs and Government counterpart offices trained in emergency preparedness; 50,650 flood affected beneficiaries receiving NFIs in three vulnerable Northern States; Approximately 20,000 beneficiaries in two pilot communities benefiting from UN Habitat/UNJLC flood mitigation pilot study. ----- April - December 2008

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Southern Sudan **\$250,000**

Regional Sector Priorities

- Assist with construction of temporary shelter over the rainy season.

<p>DCV 07-Jul-08 Index: 1258 [1]</p>	<p>SUD-08/NS34 Humanitarian Assistance to Flood-Affected Households, Spontaneous Returnees and Vulnerable Communities in North Bahr El Ghazal, Southern Sudan - [S] - [Gnd][ERA] - (HER)</p>	<p>\$250,000 <u>Project Budget</u> Q1: \$206,109 Q2: \$258,926 Q3: \$294,720 Q4: \$313,441</p>	<p>The program will focus on: (a) Standardization of 4,000 light emergency kits to be distributed to women head of huts displaced by the conflicts in the area of south Abyei, Warrab and NBeG States. The NFI are already in loco and will be made available by UNJLC (3,000 kits) and IOM (2,000 kits). (b) Provision of hand tools for construction of temporary shelter to 4,000 high vulnerable women head of huts. (c) Procurement and pre-positioning of loose items for the standardization of 4,000 repatriation/reintegration NFI packages for the return expected to happen before the end of 2008. Basic NFI kits will be provided by UNJLC (2,800 kits) and IOM (IOM 1,500). (d) Improve targeting and distribution capacity. (e) Increase Payam/County monitoring capacity. DCV can prefinance.</p>	<ul style="list-style-type: none"> • Procure and pre-position 21,000 pcs of hand tools and 6,500 rolls of sisal twine necessary for shelter construction. • Procure and pre-position 4,000 emergency cooking kits and 6,000 reintegration item. • Handle the standardization of 4,000 emergency NFI kit through the utilization of the NFI kits already on ground (UNJLC and IOM Kits) and Caritas Procured Handtools and cooking kits. • Handle the standardization of 3,000 repatriation/reintegration NFI kit through the utilization of additional Kits from IOM and Caritas procured handtools and cooking kits. • Pre-position 3,000 HHs standardized repatriation/reintegration NFI kits in key hubs or with key agencies/NGOs on the ground. • Cover cost of transportation of handtools, cooking kits and NFIs procured or previously pre-positioned in Agok, Warrap and NBeG. • Direct handling and distribution of procured and pre-positioned NFI kits to women head of huts affected by conflict and displacement, vulnerable host community HHs (max 10%). • Oversee NFI coordination and distributions via field offices. • Maintain external coordination and reporting through UNOCHA/ UNJLC/RCO's/RRR state authorities and SSRRC. • Participate and support inter-agency assessments and response to emergencies. • Participate in inter-agency post-distribution monitoring exercises. 	<ul style="list-style-type: none"> • Coordinated response mechanism for NFI/ES established with partners. • Strengthened survival and coping mechanisms among most vulnerable groups of host communities affected by large IDP influx and or conflict or disasters. • Reduced strain on local host community by supporting both vulnerable IDPs and host community members. • Facilitate the reintegration process of 3,600 IDP HH after repatriation and 400 HH from high vulnerable host community. • Improved coordination and cooperation with other stakeholders principally RC office, OCHA, UNJLC and partners. 	<ul style="list-style-type: none"> • Procurement of 21,000 pcs of hand tools and 4,000 cooking sets for standardization of existing emergency NFI HHs kits and pre-positioning in Agok/Turalei, Aweil and Gordim warehouses. • Procurement and pre-positioning of hand tools and construction supply necessary for the standardization of reintegration kits in Turalei and Aweil. • Identification of conflict affected and unserved Women Head of huts and high vulnerable HHs within the host community in the targeted areas. • Participate in inter-agency post distribution impact assessment. 	<ul style="list-style-type: none"> • Abyei Administration (Agok, Abathok, Majak, Gole and Galary). • Warrap State: Turalei, Mayen Abun, Panjok, Mayen Panjoc, Akor and Akoc. • NBeG Aweil East (Mabil and Malial Uel) and Aweil South. ----- • 3,600 women head of huts (approximately 16,000 people) displaced by conflict. • 400 HHs high vulnerable hosting communities. ----- • Procurement and prepositioning of hand tools and cooking sets: July - early August 2008 • Distributions finalised at beginning of dry season 2008.
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Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
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Protection and Human Rights

Total Sector Allocation: **\$2,660,000**

Darfur **\$1,870,000**

Regional Sector Priorities

The Regional Priorities supported by the second tranche CHF allocation include:

- Support to monitoring, reporting, prevention and response to GBV;
- Support capacity building of authorities and communities to identify, monitor, and report and response to violations of the rights of civilians taking into consideration age, gender and diversity, and;
- Strengthening the protective environment and the capacity of communities and authorities to promote the protection, respect and realisation of the rights of children.

EM-DH 02-Jul-08 Index: 1173 [1]	SUD-08/PHR1 Psychosocial and Education Support to Vulnerable and War-affected Children - [D] - [Gnd][CB] - (HER)	\$200,000 <u>Project Budget</u> Q1: \$330,000 Q2: \$660,000 Q3: \$770,000 Q4: \$770,000	The project activities have been reviewed by the Steering Committee and found important and relevant to the sector priorities especially to strengthen protective environment, respect and realization of the rights of children in Northern Darfur (Abou Shouk Camp), with more focus on promoting psychosocial support for war affected children and youths in North Darfur including providing outreach services for most vulnerable groups. Also, this project is addressing the protection needs of children in the rural areas. Thus, the Steering Committee has agreed and recommended an allocation of \$200,000, to continue the activities in Abou Shouk Camp. In addition, EMHD has shortfall of funds (\$200,000) to continue their project activities up to the end of 2008.	<ul style="list-style-type: none"> • Animation of educative activities in 15 child friendly spaces. • Screening of children in difficult circumstances to be served under outreach activities. • Psychosocial care for traumatized and marginalized children. • Capacity building (training and awareness) on child rights issues. 	<ul style="list-style-type: none"> • Children under 6 years old affected by war benefit from psychosocial and educational opportunities. • Children on a path of marginalisation can access to social, medical, nutrition and psychosocial assistance. • Communities of Abou Shouk are actively engaged in building a protective environment for their children.. • Communities have a better understanding on child rights and children needs. 	<ul style="list-style-type: none"> • 15 child friendly spaces, serving 3,900 children daily. • 15 PTAs mobilizing 60% of mothers monthly on child protection issues. • Screening of 100% of pre-school children and primary schools of Abou Shouk. • 200 children to be provided with specific psychosocial care within 6 months period. • 1,000 persons sensitized punctually on child rights and other related protection issues. • 600 couples counselled on parental counselling skills. 	Northern Darfur (Abou Shouk Camp/EI Fasher) ----- 4,100 children (50% females and 50% males) 15,000 adults/parents (90% females) ----- July - December 2008
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Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
IOM 02-Jul-08 Index: 1176 [4]	SUD-08/PHR22 \$494,970 <u>Project Budget</u> Q1: \$4,340,000 Q2: \$4,960,000 Q3: \$6,200,000 Q4: \$6,200,000	<p>Among the three projects submitted by IOM, this project is a priority and more relevant to the PHR sector. It has huge shortfall of funds to cover the implementation of activities up to the end of the year, specifically related to return, force relocations and protection monitoring in the project areas (Northern and Southern Darfur) as well as capacity building and trainings with the state and national authorities on return issues and planning. It complements the UNCHR activities in the Darfur region.</p>	<ul style="list-style-type: none"> Identify priority reported IDP returns and relocations for verification and protection monitoring and assess all movements of population to ensure national compliance with the 2004 MoU between the Government of Sudan, IOM and UN, thereby helping to protect IDPs from involuntary return, relocation. Conduct follow-up advocacy meetings with the government to resolve issues on returns and force relocations. As co-chair for the Return Working Groups in Northern and Southern Darfur, inform RWG members of the findings of protection monitoring and advocacy efforts, and advice the members in the organization of coherent on-site assistance for positively assessed returns and relocations, and of broader advocacy platforms. Monitor rehabilitation/early recovery initiatives by the Government of Sudan and other stakeholders in order to assist in the mitigation of inappropriate pull factors for IDP return movements to areas that may not be conducive for larger-scale returns at this point in time. Conduct trainings and other means of capacity building and awareness-raising on IDP protection issues associated with returns, local settlement and settlement elsewhere, as well as relocations. Enhance contingency planning to assist humanitarian relocations. 	<ul style="list-style-type: none"> Improved protection of IDPs in Northern and Southern Darfur against forced/ returns/relocations through verifying and monitoring returns/relocations, supporting IDPs to make informed decisions, advocating to ensure that all return movements and corresponding humanitarian responses are in accordance with international law and the MoU. Additional key stakeholders (including authorities, UNAMID, international community and national NGOs) are made aware - due to additional trainings and capacity building work - of IDPs' rights, international standards and principles and key policies in Darfur as they relate to protection against forced return/relocation, among other movements, and the conditions that must be in place prior to any discussion of durable solutions to internal displacement. GoS and other stakeholders are better informed in realizing coordinated interventions that: limit pull factors for large-scale unsafe/unsustainable returns; and provide on-site assistance for positively assessed small-scale spontaneous returns. More humanitarian relocations are conducted in safety and dignity in accordance with humanitarian and protection principles. 	<ul style="list-style-type: none"> 20% increase in the no. of reported return/relocation cases assessed by IOM, with the purpose of: a) deterring, identifying and referring forced returns/relocations to protection actors; and b) referring positively assessed small-scale returns for assistance. 20% increase in the no. of potential pull factor interventions (rehabilitation/service programs in areas of possible return) that have been assessed and advised. 20% increase in the no. of assessed cases for which determinations are produced/shared with HAC and OCHA and reports are produced/shared with the RWGs, among others. Basic environmental considerations are increasingly reflected in the reports on cases of IDP return/relocation assessed by IOM. RWGs meetings organised once every 2 weeks. 2 additional meetings per month held with the GoS for advocacy. 20 additional members of HAC display improved knowledge on the topics of the training per state. 20 additional government staff display improved knowledge on the topics of the training per state. 10 additional civil society/national NGO representatives per state display improved knowledge on training topics. 5 additional INGOs staff working in rural areas are trained and display improved knowledge of return issues, and other IDPs durable solutions. Increased awareness of UNAMID officials on protection issues associated with returns. Improved technical guidance and policy position documents are available for assessing complex returns, among other attempted durable solutions. Increased awareness of RWGs on policies/guidelines on returns, other attempted durable solutions. 	Northern and Southern Darfur ----- Approximately 1 million IDPs/returnees/refugees ----- July - December 2008

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
SC-Sweden SUD-08/PHR30 02-Jul-08 Index: 1174 [2] Promoting the Protection and Psychosocial Well-being of Children in Northern Darfur - [D] - [HIV][Gnd][CB] - (HER)	\$175,030 <u>Project Budget</u> Q1: \$87,864 Q2: \$235,728 Q3: \$383,592 Q4: \$383,592	<p>The project has shortfall of funds to continue the implementation of their integrated activities on psychosocial, child recruitment, abandoning harmful traditional practices (female genital mutilation, child marriage, and discrimination against girls), education on violence against children, and promoting child participation. It supports addressing cross-cutting issues such GBV, HIV/AIDS, FGM and environment, and in building the capacities of authorities and communities to identify, monitor and report on protection violations in the targeted rural areas in Northern Darfur (El Fasher, Tawila, Kutum and Fatarbano). Hence, the Steering Committee recommends an allocation of \$175,030 from the 2nd tranche CHF allocation. This allocation was the full funding amount requested from SC-Sweden.</p>	<ul style="list-style-type: none"> • Provide psychosocial activities in the Child Friendly Spaces including incentives for 150 community animators. • Provide recreational activities and materials for children's and youth clubs. • Livelihood support for most vulnerable families, children and girls in 6 IDP camps. • Support to implement activity plans for 6 youth clubs. • Construct 4 youth centres. • Support the integration of 100 children associated with the fighting forces into schools and skills training centres. 	<ul style="list-style-type: none"> • Enhanced psychosocial well-being of war-affected children through the activities carried out by the CFSs, children and youth clubs. • Enhanced capacity of vulnerable families to meet their basic needs, and leading to self reliance and sufficiency. • 100 child soldiers returned, reintegrated and reunited with their families. 	<ul style="list-style-type: none"> • 8,000 war-affected children (3-6 years old) benefited from the psychosocial support activities in the child friendly spaces. • 150 community animators and other volunteer workers trained in psychosocial skills. • 12 children's clubs and 4 youth clubs provided recreational materials and equipments. • 60 vulnerable IDPs and 6 youth groups provided livelihood activities and 300 IDP girls participated in skills training activities. • 4 youth clubs constructed. • 2,500 children/youths provided awareness on child protection, GBV issues including HIV/AIDS and environmental concerns. • 100 children associated with the fighting forces returned, reunited with their families. 	El Fasher, Tawila, Kutum and Fatarbano ----- 8,000 children aged 3-14 years old reach out by the psychosocial activities, 18,000 adolescents/youths involved in recreational and sports activities, 6,000 adults including community leaders, parents and other influential persons provided awareness on child protection/GBV, HIV/AIDS and environmental issues, 100 child soldiers ----- July - December 2008
UNFPA SUD-08/PHR32 02-Jul-08 Index: 1175 [3] Multi-sector prevention and response to GBV in Darfur - [D] - [HIV][Gnd][CB][ERA][FA] - (HER)	\$200,000 <u>Project Budget</u> Q1: \$200,000 Q2: \$500,000 Q3: \$1,300,000 Q4: \$1,300,000	<p>The project is a priority to address one of sector priorities specifically on Gender Based Violence. It has shortage of funding particularly for the provision of rape treatment kits for the GBV survivors, which was now seen as an important element of the project response. The rape treatment kits were not funded in the health sector, and thus the PHR sector has to absorb the cost as part of GBV response. In addition, Clinical Management Training of Rape Cases and training on referral pathways, targeting UNAMID personnel and protection actors on the ground will be scaled up. Thus, the Steering Committee has recommends an allocation of \$200,000 from the second tranche CHF allocation.</p>	<ul style="list-style-type: none"> • Enhance response to GBV: Update and train on referral pathways in IDP Camps and expand to include rural areas; especially including UNAMID officers. • Enhancing health care response as point of first contact including other Pillars/Sectors (Training on Clinical Management of Rape cases to Health Care Providers and providing Rape Treatment (PIP) Kits). • Strengthen protection by following newly released Fuel Efficient Stove Assessment recommendations. • Increase community awareness on GBV and promote community ownership to enhance prevention and response. • Organize and conduct Inter-Agency Joint Missions (for needs assessment on GBV and to strengthen protection in recent conflict areas and in ongoing problematic areas). 	All supported health facilities are able to provide health care services to GBV survivors.	<ul style="list-style-type: none"> • At least 200 persons to be trained on referral pathway. • At least 80 rape treatment kits purchased and provided to health clinics. • At least 60 women to benefit from fuel efficient stoves. • At least 15,000 populations benefited from GBV community awareness raising activities. 	All three Darfur States (North, South and West Darfur) ----- 15,000 IDPs/refugees ----- July-December 2008

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
<p>UNHCR</p> <p>02-Jul-08 Index: 1177 [5]</p> <p>SUD-08/PHR33</p> <p>Enhancing the capacity of local and national actors to address protection of and find solutions for individuals and groups with specific needs including women, children and elderly. - [D] - [Gnd][CB][Env] - (HER)</p>	<p>\$800,000</p> <p><u>Project Budget</u></p> <p>Q1: \$5,326,335 Q2: \$8,990,000 Q3: \$10,550,900 Q4: \$12,929,531</p>	<p>UNHCR project is a priority and supporting all three sector priorities, namely prevention and response to GBV; building the capacities of authorities and communities to identify, monitor, and report on protection violations, and strengthening protective environment and capacity of the authorities to promote protection, respect and realization of the rights of children. Currently, UNHCR has shortfall of funding of \$3,360,348 to support its on going programme interventions and operations in West Darfur, as well as in expanding to North and South Darfur, with their new mandate as protection lead agency for the whole Darfur Region. Funding support is highly needed for the establishment of field offices and deployment of additional staff for North and South Darfur, including funding support to their NGO partners to continue their collaborative activities on the ground. It should further be noted that the Policy Paper for this allocation clearly states in the Regional Allocation for Darfur that "special attention should continue to be dedicated to those, such as UNHCR or UNHAS, who have been requested to increase their roles or services."</p>	<ul style="list-style-type: none"> • Protection monitoring activities in IDP camps/settlements and rural areas, including, inter alia, inter-agency/NGO missions, joint UN/GoS/HAC missions, • Assess needs of persons with specific needs, including women and children; provide direct assistance and/or coordinate assistance accordingly, • Coordination of protection response, advocacy and interventions based on identified needs, • Capacity building/training for local, state and national GoS, NGO, community and other actors, including with respect to SGBV • Protection activities in IDP camps and in rural areas either directly or through its NGO partners. 	<p>Increased levels of protection and reductions in protection incidents for IDPs and refugees in WD, ND, and SD, through:</p> <ol style="list-style-type: none"> 1) better coordinated response to protection issues/incidents; 2) increased access to and protection monitoring in IDP/Refugee camps, villages in rural areas and border areas of three Darfurs; 3) greater awareness and application of human rights principles and practice on the part of government agencies and other humanitarian actors; and 4) increased receptivity of government authorities and others to advocacy and interventions on protection issues. 	<ul style="list-style-type: none"> • Protection Working Group (PWGs) are held in Geneina, Zalingei, Habila, Mornei and Mukjar (West Darfur), Fashir (North Darfur) and Nyala (South Darfur) on a weekly, bi-monthly or monthly basis as per agreed TORs. • Up to 200 additional protection monitoring mission are conducted in three Darfur states. • Profiles on approximately 500 villages in West Darfur are updated and entered into a database, and the data is available to humanitarian agencies. • Rapid provision of required NFIs, either directly or in coordination with partners, in response to acute protection incidents. • UNHCR and its protection partners maintain daily presence in 7 IDP camps in Western Darfur. • Up to 20 protection workshops/training conducted for government agencies, UN Agencies and NGOs on human rights, protection and SGBV. • Provision of technical support items to HAC/COR and other partners including at least 5 computers/peripherals, office equipment for new HAC offices, support for electronic communications and other items as requested and required. 	<p>North, South and West Darfur</p> <p>-----</p> <p>Aprox. 35,000 refugees and 1.5 million IDPs/returnees including members of host communities</p> <p>-----</p> <p>July-December 2008</p>

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
Eastern States		\$250,000				
<i>Regional Sector Priorities</i>						
<p><i>E_PHR_1</i></p> <ul style="list-style-type: none"> • Monitor, report and follow up on reported human rights violations. • Prepare situation analysis to identify disadvantage/deprived communities, vulnerable groups and their needs. • Advocate with the State authorities for protection and respect for human rights of civilian population. • Provide capacity building for law-enforcement, legal and judicial institutions to strengthen rule of law and provide legal assistance to civilians. • Train government authorities and community leaders on protection and human rights principles. <p><i>E_PHR_3</i></p> <ul style="list-style-type: none"> • Provide support to unaccompanied/separated children among asylum seekers, refugees, IDPs and returnees. • Strengthen coordination mechanism to monitor, report and analyze child protection violations/issues at state and community levels. • Increase awareness of state authorities and communities on child rights and protection issues. <p><i>E_PHR_5</i></p> <ul style="list-style-type: none"> • Promote development and implementation of national refugee policy. • Facilitate access of refugees to local integration (naturalization) and resettlement. • Provide documentation and legal support for refugees, asylum seekers, IDPs and returnees. • Raise awareness and build capacity of state government authorities, communities on relevant national and international laws and procedures. 						

SC-UK	SUD-08/PHR89	\$90,000	<ul style="list-style-type: none"> • The project meets all the three priorities of the sector of support to GBV interventions, capacity building of communities and strengthening the protective environment and capacity of communities to promote the protection, respect and realization of the rights of children. • SC-UK did not include this project in the 2008 Work Plan for RSS however SC-UK interventions in education, food security and livelihoods and needs vis-à-vis child protection compelled SC-UK to intervene especially in establishing and strengthening a community-based child protection mechanism in the region. Although this project was not included in the Work Plan, the Steering Committee considered it important to support child protection activities and the sector in Red Sea State. Given that some of the DDR activities listed in the SC-UK proposal were already covered by UNICEF the allocation requested by SC-UK was reduced from \$200,000 to \$90,000. 	<ul style="list-style-type: none"> • Rehabilitate and reintegrate support for children in conflict with law, (education, recreation, skills trainings including vocational training, etc.). • Train, raise awareness and advocat on juvenile justice issues with key members of government- child council, judiciary and police and civil society in general. • Facilitate capacity building and awareness raising of Community Based Committees (CBCs), community-based child protection networks (CBCPN), CBOs, local NGOs and civil society to transform the protective environment for vulnerable children and address protection concerns. 	<ul style="list-style-type: none"> • Enhanced capacity of local communities to deal with at-risk children and GBV. 	<ul style="list-style-type: none"> • 206 children in conflict with the law to be assisted through formal education and in the vocational training. • 260 personnel from the government, NGOs, community leaders, civil society members to be trained on juvenile justice, child protection and GBV issues. • 11 CBCs and CBCPNs targeted to be involved in capacity building activities including women and youth groups. • 2,500 persons to be reached out in the GBV/child protection awareness raising activities. 	Red Sea State (Port Sudan, Hawa) ----- 20,000 at-risk and vulnerable children and adults ----- July - December 2008
25-Jun-08 Index: 1248 [3]	Developing an Integrated Child Protection Response and Mechanism for Vulnerable, at-risk and marginalised children in Red Sea State. - [E] - [HIV][Gnd][CB] - (HER)	<u>Project Budget</u> Q1: \$0 Q2: \$125,000 Q3: \$200,000 Q4: \$200,000					

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
UNHCR 25-Jun-08 Index: 1247 [1]	SUD-08/PHR37 \$160,000 <u>Project Budget</u> Q1: \$1,805,878 Q2: \$2,708,817 Q3: \$3,566,703 Q4: \$3,566,703	<p>Undocumented refugees are at risk of arrest and detention. A fair and effective asylum procedure is part of the obligation of States to not refoule refugees back to places where they risk persecution, and is a basic human rights. Asylum seeker children need special protection to prevent abuse and trafficking. Verification exercise is essential to finding a durable solution to the plight of refugees in the east.</p>	<ul style="list-style-type: none"> • Food and transport for new arrivals. • Attend to immediate needs of vulnerable cases including women and children, especially unaccompanied minors during the travel to Shagarab and in the transit centre. • Provide required logistic support and equipment to the RSD adjudicators. 	<ul style="list-style-type: none"> • Enhanced capacity of the national authorities to adhere to international norms and in reforming the national asylum legislation according to internationally recognised standards. • Increased access to national asylum procedures; registration and documentation is provided by national asylum authorities; national authorities are properly carrying out refugee status determination and cases of refoulement are avoided or promptly addressed. • Increased abilities for refugees to locally integrate in conditions that respect the right to basic standard of living. • Refugees who lack access to any other suitable durable solution are identified and processed for resettlement. Basic needs are met before and during asylum procedures and RSD centre function smoothly. 	<ul style="list-style-type: none"> • Legal status is defined for all Eritrean refugees and verification exercise completed in all refugee camps and settlements and in the urban areas of Eastern Sudan. • Births, deaths, arrivals and departures are continuously registered in the refugee camps. Estimate how many births, deaths, arrivals and departures registered. • Reduce number of deportations and denial of entry. 	<p>Eastern States (Gedaref, Kassala, Red Sea, Sinnar, Jazeera) ----- 15,000 new arrivals from Eritrea, Ethiopia and Somalia, 97 old caseload from Eritrea and Ethiopia living in 12 camps are verified. ----- July - December 2008</p>

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
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Khartoum and Other Northern States**\$350,000**Regional Sector Priorities

- Support to protection activities for groups with specific needs (including women and children).
- Support to the capacity of authorities and communities to identify, monitor, report and respond to violations of the rights of civilians taking into consideration age, gender and diversity.
- Support to monitoring, reporting and response to gender-based violence.
- Strengthening the protective environment and the capacity of communities and authorities to promote the protection, respect and realisation of the rights of children.

NRC 08-Jul-08 Index: 1148 [4]	SUD-08/PHR41 Information, Counselling and Legal Assistance - [KN] - [HIV][Gnd] - (HER)	\$80,000 <u>Project Budget</u> Q1: \$200,000 Q2: \$400,000 Q3: \$500,000 Q4: \$500,000	<ul style="list-style-type: none"> • The provision of legal assistance to IDPs and the implementation of legal rights awareness workshops help to promote a protective environment for IDPs in the Khartoum camps and squatter areas. The provision of information on durable solutions assists IDPs in making informed and voluntary decisions regarding whether to return, locally integrate or relocate. The project activities are in alignment with the sector priorities. • NRC has received US\$200,000 from UNHCR and 200,000 from MFA for this project leaving the project US\$100,000 short for full completions of the activities described in the workplan. The CHF allocation would allow for a completion of the project and the possible increase on certain targets (documentation). 	<ul style="list-style-type: none"> • Provision of legal counselling. • Assistance with the provision of identity documents for IDPs. • Dissemination of information on durable solutions. • Implementation of legal rights awareness workshops. 	<ul style="list-style-type: none"> • 6 ICLA centers operational in Khartoum camps and squatter areas. • 2,900 IDPs assisted in either legal counseling, representation or procurement of identification documents. • 26 legal rights awareness, protection or human rights workshops implemented, targeting IDPs, local authorities, community leaders, UN agencies, NGOs or CBOs. • 58,000 information leaflets on return related issues, as produced by the Sudan Information Campaign on Returns, are disseminated to IDPs. • 40,000 IDPs provided with information, via individual counseling sessions or group information sessions, on local integration or return related issues. • ICLA regularly feeding information regarding IDP protection concerns to advocacy fora, both nationally and internationally. 	<ul style="list-style-type: none"> • Provision of legal counselling and representation to at least 100 IDPs. • Assistance with the provision of identity documents for 400 IDPs. • Dissemination of information on durable solutions to at least 10,000 individuals (movie screenings & info sessions with Q&A). • Implementation of 2 legal rights awareness workshops with at least 40 participants in each. 	4 IDP camps and 2 squatter areas in Khartoum ----- Some 10,500 IDPs in Khartoum camps and squatter areas, target at least 50% women. ----- January-December 2008
SC-UK 08-Jul-08 Index: 1151 [3]	SUD-08/PHR18 Developing an Integrated Child Protection Mechanism for Vulnerable IDP and Other At-risk Children in Khartoum - [KN] - [HIV][Gnd][CB] - (HER)	\$70,000 <u>Project Budget</u> Q1: \$463,772 Q2: \$869,572 Q3: \$1,159,430 Q4: \$1,159,430	<ul style="list-style-type: none"> • The project responds to the core sectoral priorities, particularly on child protection and on response to GBV (Priority 2 and 3). • The activities are directly targeting the main protection gaps visible in Khartoum IDP sites and are complementary to the overall child protection action supported by UN agencies in the context of Khartoum. • Underfunding reported. 	<ul style="list-style-type: none"> • Provision of immediate emergency assistance to vulnerable children vis-a-vis identified protection concerns (including SGBV). • Alternative education for children at risk in cooperation with national partners (pre-school preparation, classes and trainings, including procurement of material). • Advocacy, also with national partners and relevant institutions, for support to the most vulnerable segments of the child population in Khartoum (street children, children victims of abuses, children in contact with the law). • Recreational support activities at children's centres and open days for children in cooperation with national partners. • GBV training. 	<ul style="list-style-type: none"> • The most urgent needs of IDP children and their families are addressed, with particular reference to violence and abuses (e.g. GBV). • The psychosocial and protection situation of children is improved through recreational support and other forms of training and cultural activities. • Awareness raised in the communities on the major protection challenges facing children, including GBV, and on the available response channels (e.g. Family and Children Police Unit). 	<ul style="list-style-type: none"> • 200 children provided with immediate assistance, including referral of GBV cases (transport, medical and legal assistance). • 100 children provided with alternative education. • 7,000 children supported with recreational activities. • Some 180 community members are targeted with training on GBV and child protection themes to increase their awareness and provide better protection. 	Khartoum IDP sites ----- • 200 children provided with immediate assistance, including referral of GBV cases (transport, medical and legal assistance) • 100 children provided with alternative education • 7,000 children supported with recreational activities • 180 community members ----- January-December 2008

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
UNHCR 08-Jul-08 Index: 1150 [2] SUD-08/PHR44 Promoting a Protective Environment for Urban Refugees and Asylum Seekers by Providing Legal and Social Counselling and Supplementary Assistance - [KN] - [HIV][Gnd][CB] - (HER)	\$100,000 <u>Project Budget</u> Q1: \$1,751,992 Q2: \$2,627,988 Q3: \$3,208,338 Q4: \$3,208,338	<ul style="list-style-type: none"> As per Sectoral priorities, the project addresses the most urgent need of women and children (> 60% of the cases referred, particularly in the medical/social assistance), including life-saving activities, and encompasses other categories with specific needs, including the elderly and the disabled. (Priority 1 and 4). The intervention is directly linked to the efforts in supporting the authorities (COR) to address protection issues, with specific reference to asylum seekers and refugees (priority 2). UNHCR and COR are the only protection actors active to support urban refugees in Khartoum. The support requested is largely on assistance for urgent needs and legal services. The project is reported funded at the tune of 30%. 	<ul style="list-style-type: none"> Social counselling and provision of direct emergency medical assistance (drugs, medical referrals and hospitalisation as well as limited material assistance for urgent needs) to extremely destitute refugees and asylum seekers families, targeting particularly women, children and the elderly. Direct monitoring and provision of emergency legal assistance to secure due process and lawful release of refugees and asylum seekers if illegally arrested or detained (through the hiring of lawyers on stand-by to follow-up on detention cases and represent them in court). 	<ul style="list-style-type: none"> The protective environment for populations with specific needs, in particular women, children and the elderly among the urban refugee and asylum seeker population in Khartoum is enhanced. The most urgent needs of specific segments of the refugee and asylum seeker population are addressed through immediate assistance (legal and medical interventions). 	<ul style="list-style-type: none"> Some 1,500 refugees and asylum seekers in Khartoum, who receive social counselling, assistance and medical referral through UNHCR and through the Refugee Counselling Services (COR). Asylum seekers and refugees arrested or detained due to lack of official documentation (so far estimated cases 1,700 of which 30% women). 	Khartoum urban areas ----- a) 1,500 refugees and asylum seekers (social and medical assistance). b) All cases of asylum seekers and refugees arrested or detained brought to the attention of UNHCR. ----- January-December 2008
UNICEF 08-Jul-08 Index: 1149 [1] SUD-08/PHR52 Protection of Children in Khartoum and Northern States - [KN] - [HIV][Gnd][CB][Env] - (HER)	\$100,000 <u>Project Budget</u> Q1: \$500,000 Q2: \$800,000 Q3: \$1,000,000 Q4: \$1,000,000	<ul style="list-style-type: none"> The activities are fully within the priorities of the sector, particularly on the child protection interventions (priority 3 and 4). The Family and Children Police Unit is becoming an essential structure in ensuring remedial action on grave cases of violence against children. The Unit needs to be strengthened to increase capacity, staff coverage/presence in different areas; expand its outreach to the communities (also in cooperation with other protection actors); better face the recurrent phenomenon of child abuse, neglect and exploitation; and possibly expanding to tackle the equally widespread phenomenon of violence against women. The project is reported funded at the tune of 535,000 (53%) out of the 1,000,000 total budget. 	Support to the Family and Child Police Unit	Improvement in the efficiency and the capacity of the Family and Child Police Unit to handle cases of violence against children and possibly against women, including additional outreach activities and demonstrated follow up on cases.	<ul style="list-style-type: none"> All cases reported to FCPU are properly followed up and supported (in 2007 more than 1000 cases were handled by the Unit). FCPU expanded to 2 other locations in Khartoum. Capacity of the Unit to address violence against women enhanced. 	<ul style="list-style-type: none"> Main Family and Child Protection Unit in Khartoum. Expansion of Unit to Haj Yousif and Ombadda, Omdurman. Different IDP sites as part of outreach programme. ----- 2,000 women and children who are victims of violence reached with services. ----- January-December 2008

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
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Southern Kordofan**\$190,000**Regional Sector Priorities

• The regional priorities supported by the second tranche CHF allocation include:

- Support to monitoring, reporting, prevention and response to GBV.
- Support capacity building of authorities and communities to identify, monitor, and report and response to violations of the rights of civilians taking into consideration age, gender and diversity.
- Strengthening the protective environment and the capacity of communities and authorities to promote the protection, respect and realisation of the rights of children.
- Protection of returnees and recent displaced population from Abyei, especially those IDPs that have moved to Southern Kordofan areas.

SC-US 16-Jul-08 Index: 1192 [1]	SUD-08/PHR48 Capacity building for government and communities to address child protection and gender based violence (GBV) in South Kordofan - [SK] - [Gnd][CB] - (HER)	\$115,000 <u>Project Budget</u> Q1: \$0 Q2: \$100,000 Q3: \$150,000 Q4: \$250,000	<p>The project has been reviewed by the PHR Sector Steering Committee and supporting the sector priorities on strengthening the protection environment and the capacity of communities and authorities to promote the protection, respect and realisation of the rights of children as well as in addressing cross-cutting issues on GBV. In addition, this was also identified as one of the regional priorities of Southern Kordofan policy paper in the context of returns and recent displacement of population of Abyei, whereby some IDPs had moved to Southern Kordofan areas, which needs protection. To date, this project has not secured any funding support from any donors/partners to implement the planned activities.</p> <p>Also, it has to be noted that in the 1st CHF allocation, SC-US did not received any allocation, and it was agreed during the allocation meeting that SC-US will be given priority for the second tranche of CHF allocation. Considering the project funding need and the importance of this project to address child protection issues in south Kordofan, the PHR Steering Committee agreed and recommends the allocation of \$115,000 to implement the planned activities as proposed above.</p>	<ul style="list-style-type: none"> • Build capacity of the Ministry of Social Welfare (MoSW) and Family Tracing and Reunification (FTR) Agents on child protection and GBV. • Strengthen the CBCPNs on CRC, FTR, DDR, case management and GBV related issues. • Build capacity of youth and children's clubs on youth/children's participation in their own protection. • Build awareness on child protection and GBV within communities. • Coordinate with key stakeholders to develop a standardized protocols and referral pathways connected GBV. 	<ul style="list-style-type: none"> • Enhanced capacity of 30 MoSW and 15 FTR agents to deliver services and in addressing child protection and GBV related issues. • 430 CBCPN and YCC members trained on child protection issues. • Increased awareness of ,5000 community members on child protection and GBV issues. • Developed a standardized protocol and referrals pathway for GBV survivors. 	<ul style="list-style-type: none"> • 30 staffs of MoSW and 15 FTR agents will be trained on child protection and GBV issues. • 43 CBCPNs and 55 Youth Clubs will be involved 430 members. • 5,000 community members will benefit from the awareness raising on child protection and GBV. • 6 agencies will be involved in the referral pathway implementation. 	<p>Southern Kordofan (Kadugli, Dilling, Julud and Kauda ----- 2,500 community children including reunified separated children and other vulnerable children will be targeted ----- July - December 2008</p>
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Project Details		CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
UNFPA 16-Jul-08 Index: 1211 [2]	SUD-08/PHR88 GBV prevention and treatment in South Kordofan - [SK] - [HIV][Gnd][CB] - (HER)	\$35,000 <u>Project Budget</u> Q1: \$0 Q2: \$35,000 Q3: \$35,000 Q4: \$35,000	<p>This is a new project as proposed by UNFPA to mainstream GBV activities in Southern Kordofan. The project has been reviewed by the PHR Sector Steering Committee and found to be important and supporting the sector priorities on strengthening coordination, prevention and response on gender based violence. This was also identified as one of the regional priorities of Southern Kordofan policy paper in the context of returns and recent displacement of population of Abyei, whereby some IDPs had moved to South emKordofan areas. UNFPA has recently established its office in Kadugli and have deployed corresponding staff to follow the implementation of their ongoing activities and ensures mainstreaming of the already existing plans and activities, complemented by the newly proposed project activities to address GBV in the field.</p> <p>Funding support is needed from the second tranche CHF allocation by UNFPA, for the purchase of rape treatment kits (PEP kits) for GBV survivors, which was now seen as an important element of the UNFPA interventions in Southern Kordofan as well as to scale up the trainings on clinical management of rape cases, the referral pathways and awareness raising on GBV issues. The rape treatment kits were not funded in the health sector, and thus the PHR sector has to provide support part of GBV response. After the review and discussion of the project request, the PHR Steering Committee agreed and recommends the allocation of \$35,000 to implement the planned activities as proposed above.</p> <p>This allocation was the full amount requested by UNFPA for this activity.</p>	<ul style="list-style-type: none"> • 2 CMR trainings. • Provision of Rape treatment kits (PEP kits). • Community awareness raising activities (including IEC materials). 	<ul style="list-style-type: none"> • Enhanced capacity of 60 medical cadres to deliver GBV response/services in the health facilities through training on the protocol of clinical management of rapes including the provision of rape/ PEP kits and IEC materials to the community. • Increased awareness of the communities on the prevention and response to GBV issues. 	<ul style="list-style-type: none"> • 2 CMR training involving 60 health and medical personnel. • 1,000 rape treatment kits to be provided. • At least 20,000 persons to be reached out by IEC activities on GBV. • 5,000 IEC materials to be produced. 	<p>Kadugli, Southern Kordofan ----- 20,000 women/ girls/ population are targeted ----- July - December 2008</p>
UNICEF 27-Jul-08 Index: 1252 [1]	SUD-08/PHR90 Strengthening Child Protection systems and responses in El Muglad - [SK] - [HIV][Gnd][CB] - (HER)	\$40,000 <u>Project Budget</u> Q1: \$0 Q2: \$40,000 Q3: \$40,000 Q4: \$40,000	<p>Out of the \$4 million envelope for the Abyei emergency response, \$500,000 was set aside for organizations working on-the-ground in Muglad to address the most urgent needs.</p>	<ul style="list-style-type: none"> • Train 40 SWO in case work management and FTR. • Develop a Community Welfare Volunteer system targetting those communities most affected by Abyei emergency. • Train 50 Community Welfare Volunteers. • Family Tracing and Reunification process with unaccompanied and separated children. 	<ul style="list-style-type: none"> • Increase capacity and numbers of Social Welfare Officers (SWO) through training of current SWO as well as new SWO to work in vulnerable communities including those hosting Abyei IDPs. • Active tracing conducted for at least 50 separated children and reunify them with families. • Development of a Community Welfare Volunteer system targetting those communities most affected by Abyei emergency. 	<ul style="list-style-type: none"> • 40 SWO trained on case work and FTR. • 50 Community Welfare Volunteers trained and working actively in their affected communities. • 50 unaccompanied or separated children reunified with their families. 	<p>Muglad, Southern Kordofan ----- • Unaccompanied and separated children in El Muglad as well as the surrounding areas. • Children and Young people that are Abyei IDPs as well as the host communities with psychosocial care and support activities. • 50 Community Welfare Volunteers. ----- June - December 2008</p>

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Water and Sanitation						Total Sector Allocation: \$5,295,497	
Blue Nile		\$450,000					
<i>Regional Sector Priorities</i>							
<ul style="list-style-type: none"> • Ensure adequate water sanitation and hygiene (WASH) emergency supplies to meet the needs of about 100,000 population. • Ensure safe water supply to around 4 million people who are at risk of out break of AWD/Cholera, as well as reaching them with hygiene messages. • Provide immediate water supply to about 100,000 people by tankering in different states and regions. • Re-establish safe water supply and sanitation facilities to around 150,000 people who are either displaced or whose systems were damaged. • Provide chlorine and soap for 50,000 people who are at risk of AWD/Cholera. • Provide sanitation facilities for 30,000 school children in 70 schools. 							
UNICEF 25-Jun-08 Index: 1156 [1]	SUD-08/WS5 Integrated WASH Project for IDPs, Returnees and Other Emergency-Affected Population in Blue Nile State - [BN] - [HIV][Gnd][CB][Env][ERA] - (HER)	\$30,000 Project Budget Q1: \$359,465 Q2: \$611,090 Q3: \$850,000 Q4: \$850,000	Blue Nile, like most states along the Nile River, frequently encounters flood disasters during the rainy season. In 2007, number of households were affected. As part of the lessons learned from previous years, this project was selected for preparedness and response planning to ensure response and coordination mechanism are in place. Funds are to ensure the sector response planning capacity is in place with adequate training and common assessment tools. The sector's overall objective is to ensure access to safe water and proper sanitation services to prevent disease outbreak.	<ul style="list-style-type: none"> • Training of 210 persons on flood assessment, response planning, and chlorination to ensure adequate coordination during emergency flood response. • Disseminate hygiene and sanitation information to 20,000 persons highlighting the key messages on AWD/Cholera prevention in Blue Nile State. 	<ul style="list-style-type: none"> • Water and Sanitation Sector response to flood emergency is assessed, planned, and coordinated involving sector agencies. • The risk of outbreak of AWD/Cholera is reduced in Blue Nile State. 	<ul style="list-style-type: none"> • 30 persons trained on flood response assessment and response planning. • 60 persons trained on water supply chlorination. • 120 persons trained on hygiene promotion. • 20,000 persons (3,330 HHs) reached with key hygiene messages. 	Blue Nile: Bau, Damazine and Osaros Localities ----- 20,000 people ----- July - September 2008
UNICEF 07-Jul-08 Index: 1164 [1]	SUD-08/WS5 Integrated WASH Project for IDPs, Returnees and Other Emergency-Affected Population in Blue Nile State - [BN] - [HIV][Gnd][CB][Env][ERA] - (HER)	\$220,000 Project Budget Q1: \$359,465 Q2: \$611,090 Q3: \$850,000 Q4: \$850,000	The project will provide safe water supply for returnees and host communities in un-served and under-served areas. Chlorination support is provided during the critical time between July to October where the risk of AWD is high. The requested amount has been well matched with the implementation capacity on ground and the funding gaps.	<ul style="list-style-type: none"> • Drill 15 bore wells equipped with hand pumps to increase access to improved water supply for 3,750 people in areas of return. • Chlorinate 60 hand pumps, 5 water yards and 1 hafir to improve drinking water supply for 50,000 person. • Train 60 hand pump mechanics. • Disseminate hygiene messages through 2 radio and TV hygiene programs and house visits to reach 50,000 people in return areas and host communities. 	<ul style="list-style-type: none"> • 3,750 persons provided access to safe water supply. • 50,000 persons provided with safe drinking water through chlorination of 60 hand pumps, 5 water yards and 1 hafir. • 60 hand pump mechanics trained. • 50,000 persons reached with hygiene messages. 	<ul style="list-style-type: none"> • 15 bore wells drilled and equipped with hand pumps. • Chlorinated water provided from 60 hand pumps, 5 water yards and 1 hafir. • 60 trained hand pump mechanics. • 50,000 persons reached with hygiene messages. 	Bau, Geissan, Kurmuk, Damazine, Tadamon and Roseires Localities ----- • 3,750 people provided with access to new water sources • 50,000 persons reached with chlorinated water supply and hygiene information ----- July 2008 - December 2008
World Vision 07-Jul-08 Index: 1165 [2]	SUD-08/WS7 Blue Nile WV Watsan Programme - [BN] - [HIV][Gnd][CB][Env] - (HER)	\$200,000 Project Budget Q1: \$300,000 Q2: \$500,000 Q3: \$600,000 Q4: \$600,000	World Vision is present and working in Baw locality. A high percentage of the people have little or no access to safe water and hence majority of the people, mostly women and children, walk long distances to collect water, which in most cases unsafe and unprotected sources. Many of water facilities in these areas were destroyed during long civil war. Most of targeted areas are returnees' locations.	<ul style="list-style-type: none"> • Drill and construct 5 boreholes fitted with hand pumps in returnee villages. • Construct 150 household latrines in 3 returnee villages. • Construct 2 school latrines. • Distribute 300 sets of hygiene kits. • Establish and train 5 watsan committees. • Form and train 5 children groups on safe hygiene practices. • Train 10 hand pump care takers on operation and maintenance. • Train 300 community members on PHAST approach. 	<ul style="list-style-type: none"> • 2,500 people will have increased access to safe and adequate water. • 3,000 people able to use improved latrines. • 10 caretakers trained on operation and maintenance of handpumps. • 70,000 people have knowledge and are using improved sanitation facilities and practicing appropriate hygiene behaviours. 	<ul style="list-style-type: none"> • 5 drilled boreholes functional. • 150 household latrines constructed and in use. • 2 school latrines constructed and functional. • 300 sets of hygiene kits distributed to enhance safe hygiene promotion practices. • At least 15,000 people and 700 school children receive hygiene message with special emphasis on handwashing. 	Baw Locality (Mugum, Gummar el Tom, Baw, Soda, Tyfol) ----- 15,000 people in the five target villages. 700 of them are school children and 5,000 were returnees in Soda and Mugum villages. Women will be 50% of each training participants. ----- September - December 2008

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Darfur							
<i>Regional Sector Priorities</i>							
<ul style="list-style-type: none"> • Construction of new water and sanitation facilities for new IDPs (displaced in 2007 and 2008). • Operation and maintenance of existing water and sanitation facilities. • Conduct AWD/Cholera preparedness and prevention activities including hygiene and environmental awareness. • Conduct water quality surveillance, monitoring and testing of water samples. 							
ADRA 07-Jul-08 Index: 1240 [3]	SUD-08/WS110 Community Health Education, Sanitation and Hygiene Promotion in West Darfur - [D] - [HIV][Gnd][CB][Env] - (HER)	\$250,000 <u>Project Budget</u> Q1: \$700,000 Q2: \$1,050,000 Q3: \$1,400,000 Q4: \$1,400,000	<p>ADRA has working in Krenik Locality and has capacity to implement project interventions immediately. ADRA has done assessment in the locality and identified most critical needs. CHF 1st allocation has been fully utilized and project activities are completed. ADRA is addressing two sector priorities: a) increase access to safe sanitary means of excreta disposal; and b) increase awareness of proper personal and environmental sanitation and hygiene practices.</p>	<ul style="list-style-type: none"> • Household latrines construction. • Household hygiene and sanitation visits. • Community Health Promoter/Supervisor training. • Public health presentations. • General cleaning campaigns. • Community incinerator construction. 	<ul style="list-style-type: none"> • Households gained knowledge and skills in hygiene and sanitation management and disease prevention. • Community health promoters and teachers gained appropriate knowledge and skills to conduct community health education. • Latrines and waste disposal units established. • Prevalence of open defecation measurably diminished. • Prevalence of water-borne disease measurably decreased. 	<ul style="list-style-type: none"> • 1,000 household latrines constructed. • 4,680 home hygiene visits. • 65 CHPs trained. • 6 public health presentations. • 6 general cleaning campaigns. • 1 community incinerator constructed. 	<p>Um Tojouk and Krenik Locality in Western Darfur ----- Approximately 15,000 IDPs, host and nomadic peoples ----- August – October 2008</p>
ARC 07-Jul-08 Index: 1245 [8]	SUD-08/WS97 Integrated Water, Environment, Sanitation and Hygiene Promotion Project - [D] - [HIV][Gnd][CB][Env] - (HER)	\$350,000 <u>Project Budget</u> Q1: \$760,000 Q2: \$1,520,000 Q3: \$2,280,000 Q4: \$3,040,000	<ol style="list-style-type: none"> 1. The activities are to serve newly arrived IDPs in the Tulus, Dimo and Gereida area and therefore are lifesaving. 2. ARC is the only NGO working in the area and hence the only service provider in WASH. 3. ARC has no other funds currently to carry out these activities as its current OFDA funding is ending by 31 July 2008. 	<ul style="list-style-type: none"> • Carry out CHAST training to pupils. • Hygiene promotion and sensitisation on AWD and cholera preparedness./ • Water testing and chlorination at source and at household levels. • Construct household latrines. • Construct school latrines. • Rehabilitate hand pumps. • Rehabilitate water yards. • Monitor water levels in selected boreholes. • Train hand pump technicians and water yard operators. • Drill boreholes with hand pumps. • Training Community Health Volunteers (CHV). 	<ul style="list-style-type: none"> • School going children are aware of and are practicing simple ways to keep personal hygiene. • Households in targeted area are kept clean. • Water consumed is free from any faecal contamination and Water found to be contaminated is immediately treated. • Household and school environments are kept clean and hygienic. • Hand pumps and water yards in villages are operating normally. • Water aquifers are not depleted. • Hand pumps and water yards in villages are operating normally. • IDPs have clean and adequate water for their use. • Community Health volunteers are able to sensitise the community on simple health and hygiene matters and are able to give feedback to ARC on the same. 	<ul style="list-style-type: none"> • Construction of 400 household latrines for 8,000 new IDPs. • Construction of school latrines in 8 schools targeting 16,000 school children mostly IDPs. • Rehabilitation of 30 hand pumps and 3 water yards in areas surrounding IDPs to serve 25,000 people 	<p>Dimo, Abuajura, Tulus Gereida ----- 54,000 people in total comprising 38,000 women and 16,000 men, of these 22,000 are IDPs ----- August - October 2008</p>

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CAM 07-Jul-08 Index: 1241 [4]	SUD-08/WS111 \$200,000 <u>Project Budget</u> Q1: \$118,881 Q2: \$356,644 Q3: \$416,085 Q4: \$594,407	<p>This project targets highly vulnerable and isolated communities, including nomad populations, in localities in rural West Darfur. The proposed activities will ensure the maintenance and operation of existing water and sanitation facilities in close collaboration with local communities through communal focal points within the water committees. The project will also improve access to safe water and the given sanitation situation for areas where CAM started intervening in the last program through further construction activities whilst ensuring improved water quality surveillance through the monitoring and testing of water samples. Establishing communal network through Community Health Educators (CHE) around the fixed clinics - will permit us to carry out more efficiently health awareness and education activities in our areas of intervention.</p>	INFORMATION PENDING.	<ul style="list-style-type: none"> • Digging 2 dug well if access given (in Banjadeed + sekillingei). • Building 6 latrines if access given (in Rijil Kubri, Orteg, Ryad IDP camp). • Renew 10 slaps of existing wells. • Repair and maintain existing 43 wells if access is given. • Cleaning uncovered wells and covering wells in accordance with community. • Regular monthly water sampling (bacteria and chemical). • Monthly training sessions with local communities on repairing + maintenance of water points and latrines. • Further hygiene promotion sessions with local health committees and local Community Health Educators (CHEs) (comprehensive 3 days training sessions with all CHEs in El Geneina by the end of this funding period). 	<ul style="list-style-type: none"> • 100% of the planned water points are done (if accessibility is given!). • 100% of the new latrines have been completed (if accessibility is given!). • 100% of the given water and sanitation facilities are maintained and repaired on a monthly base (if ac 	<p>Western Darfur: Banjadeed, Sekillinge, Rijil Kubri, Orteg, Ryad IDP camp Western Darfur: NW of El Geneina, NE of El Geneina, SE of El Geneina (throughout our catchment areas) ----- Target population: 157,515 persons (80,333, women; 7,182 men) Direct beneficiaries: 70,750 persons Type of beneficiaries: • IDPs (Ryad IDP camp, NW of El Geneina in Tandulti, Armankul) • Resident population in remote rural areas • Refugees (Chadians) ----- October - December 2008</p>
IMC 07-Jul-08 Index: 1244 [7]	SUD-08/WS124 \$125,000 <u>Project Budget</u> Q1: \$125,000 Q2: \$250,000 Q3: \$250,000 Q4: \$250,000	<ol style="list-style-type: none"> 1. Proposed interventions are in line with sector objectives. 2. As IMC is implementing PHC and nutrition surveillance projects in same areas, integration of sanitation and hygiene promotion interventions along with those interventions will have a better impact, particularly on reduction of Acute Jaundice Syndrome (AJS) and diarrhoeas. 3. Project areas are high risk areas and IMC has been working in these areas for some time. 4. The second CHF allocation will help IMC to complete all 2008 planned activities as per work plan. 	<ul style="list-style-type: none"> • Construct new latrines and digging of new water wells. • Rehabilitate maintain existing water and sanitation facilities. • Establish village WES committees and dissemination of positive health information. 	<ul style="list-style-type: none"> • Population have access to water and sanitation facilities. • Village committees are formed and functional ensuring full community participation in WES related issues. • CHWs trained. • Population reached with awareness messages on water borne diseases like AWD, AJS, hygiene and environment. 	<ul style="list-style-type: none"> • 200 latrine slabs are distributed. • 50 existing latrines rehabilitated. • 200 CHWs receive refresher training. • 1 water well dug. • 80% of the population reached with appropriate hygiene and environmental promotion messages. 	<p>Western Darfur: Um-Dukhun, Mukjar, Wadi Saleh and Zallingie ----- 1,500 people will be benefit directly. 160,000 people will be reached with hygiene and health messages. ----- 1 July - 31 December 2008</p>

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
OXFAM GB SUD-08/WS139 07-Jul-08 Index: 1246 [9] Sustainable Public Health Programme in Darfur for War-Affected People - [D] - [HIV][Gnd][CB][Env][FA] - (HER)	\$500,000 <u>Project Budget</u> Q1: \$3,561,280 Q2: \$7,122,560 Q3: \$10,683,841 Q4: \$10,683,841	<p>1.Oxfam's proposed activities link integrally to the sector priorities for 2008.</p> <p>2.Oxfam is currently assisting an estimated 280,300 displaced and conflict affected persons in Kebkabiya, Shangle Tobay, Abu Shouk, and El Salaam Camps.</p> <p>3.Oxfam do have funds to continue their operation particularly to sustain water and sanitation in above IDP camps and hence funds are required immediately to continue WES interventions. Oxfam has submitted plans for other donors and waiting for their response.</p>	<ul style="list-style-type: none"> • Safe and equitable access to appropriate water, and beneficiaries are involved in the sustainable management of this resource. • AWD preparedness and prevention. • Safe access to sanitary facilities. • Sustainable management of groundwater resources. • Public health promotion and good hygiene practices. 	<ul style="list-style-type: none"> • Continue to operate and maintain 17 existing motorised water supply systems, and the water distribution network and delivery points. • Extension of the water system (2 boreholes) to cover the additional needs of people in rural areas, construct 10 open wells, each with animal troughs and sited along pastoralist migration routes and dig 8 boreholes in villages. • Community training – using new hygiene promotion approaches. • Maintain contingency plans and emergency stock for an additional 5,000 new displacements in areas of current Oxfam operation in Darfur. • Replacement or rehabilitation of 3,625 latrines. • 1,350 new latrines will be built across Oxfam's project areas, 25% of which will pilot a new latrine design. • 106 temporary school latrines will be provided, covering 41 schools. 20 permanent latrines will be supplied across 5 schools and construction of 550 bathing and installation of new hand washing facilities in 10 schools. • Continue to organise monthly soap and hygiene-related NFI distributions, reaching a total of 190,926 beneficiaries. 	<ul style="list-style-type: none"> • O&M of 17 existing motorised water supply system. • Construction of additional 2 BH. • Construction of 10 open wells and animal troughs. • Digging of 8 BH. • Rehabilitation of 3,625 latrines. • Construction of 1,350 latrines. • Construction of 126 school 	Northern Darfur (Kebkabiya; Shangle Tobay; Abu Shouk camp and El Salaam Camp) ----- 280,300 ----- July - December 2008
TNM SUD-08/WS140 07-Jul-08 Index: 1238 [1] Promotion of Safe Water Access to Underserved Areas in North Darfur - [D] - [HIV][Gnd][CB] - (HER)	\$200,000 <u>Project Budget</u> Q1: \$300,000 Q2: \$475,000 Q3: \$600,000 Q4: \$600,000	<p>The need for new water source is a high priority in the area of operation since it is not covered by any other agencies. Project is targeting under-served communities and will reduce tension between IDPs, nomads and host communities. Besides, the NGO has a dedicated drilling rig with capacity to operate. NGO did not get funds in the 1st CHF allocation.</p>	<ul style="list-style-type: none"> • Drilling new boreholes. • Install hand or submersible pumps. • Borehole rehabilitations. • Conduct community awareness and sensitisation workshops on core topics such as water point use and maintenance. • Identify unserved or underserved villages within the project area. 	<ul style="list-style-type: none"> • Access to safe potable water for domestic consumption to be increased and potential or occurrence of localised conflicts between nomadic and sedentary communities due to inadequate sources of water reduced. 	<ul style="list-style-type: none"> • Drilling of 15 new boreholes. • Rehabilitation of 25 pumps. • 5 community workshops. 	El Fasher Locality and Tawilla Locality ----- 37,500 people (60% expected to be women) ----- 1 July - 31 December 2008

Project Details		CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
UNICEF 07-Jul-08 Index: 1243 [6]	SUD-08/WS9 Integrated WASH Project for Conflict-Affected Population in Darfur Region - [D] - [HIV][Gnd][CB][Env][FA] - (HER)	\$725,000 <u>Project Budget</u> Q1: \$7,000,000 Q2: \$10,500,000 Q3: \$14,000,000 Q4: \$14,000,000	This project supports operation and maintenance of water supply systems in 22 IDP locations in Northern, Southern and Western Darfur, which are primarily depend only on UNICEF's support, to ensure continuous acces to safe water supply. Water, sanitation and hygiene promotion interventions are integrated for maximum benefit. Adequate information, soap and safe water supply combine with good hygiene practice are the basic requirement to prevent out break of diarrhea and cholera. In over crowded locations diarrhea and other diseases can spread very fast if preparedness and prevention measures are not implemented in a timely manner. UNICEF is the only agency providing soap for distribution due to their capacity for procurement and transportation.	<ul style="list-style-type: none"> Disseminate hygiene information and conducting Acute Water Diarrhoea (AWD)/Cholera prevention activities and provision of soap to facilitate good hygiene practice. Chlorinate 51 water supply schemes and monitor of water quality at IDP locations. Operate and maintain 51 water schemes (46 water yards & 5 mini water yards) at IDP locations. 	<ul style="list-style-type: none"> 280,000 IDPs reached with hygiene information on good hygiene practice and provide with soap to enhance hygiene practice. Access to safe water supply sustained for 280,000 IDPs in Northern, Southern and Western Darfur States. 	<ul style="list-style-type: none"> 280,000 IDPs reached with hygiene information. 51 water schemes (46 water yards and 5 mini water yards) operated and maintained in Northern, Southern and Western Darfur States. 	<ul style="list-style-type: none"> Northern Darfur: Abu Shouk, Al Salam, Kassab and Zamzam camps Southern Darfur: Otash, Kalma, Feridous, Salam, El Neeem, Kass, Khor Omer, Geraida; and Musai Western Darfur: Mornei, Zallengi, Madiana Nugag, Koinding, Abu Zar; El Gireif; Haskenita; a <p>-----</p> <p>Total of 280,000 persons (Northern Darfur - 60,000; Southern Darfur - 150,000; Western Darfur - 70,000)</p> <p>-----</p> <p>1 August - 30 November 2008</p>
WHO 07-Jul-08 Index: 1242 [5]	SUD-08/WS134 Promotion of Water/Environmental Health Services to Pre-empt/Control Water and Environmental Sanitation Related Disease Incidences in Darfur - [D] - [CB][Env][FA] - (HER)	\$250,000 <u>Project Budget</u> Q1: \$590,000 Q2: \$814,414 Q3: \$1,258,737 Q4: \$1,258,737	Annually, the risk of AWD/cholera incidences are very high during the rainy season. Besides this, epidemiological data reveal reports of AJS, diarrhoeal and vector-borne disease incidences that are often linked to poor water/sanitary conditions and/or precarious circumstances under which the IDPs live either in the camps or with the host community. In view of this, it is imperative that adequate, timely prevention, preparedness and response planning measures are put in place well before the onset of the rainy season and, separately, much needed supplies are availed for enhanced implementation of pre-emptive measures within the variuos identified diarrhoeal disease "hot spots". WHO project will address these issues, as well as coordination of water quality monitoring and mitigation actions and monitoring of diseases and coordinating prevention actions.	<ul style="list-style-type: none"> Support water quality/safety interventions through provision of reagents/consumables for fixed WES/SMoH water labs, portable field testing kits and reagents/consumables for the same; guidelines, technical protocols. Build capacity of SMoH, WES and NGO partners human resource base through training of variuos cadre of personnel on water safety/quality control. Support integrated vector management measures (targetting non-biting flies & mosquito vector) through training (human resource development) of various cadre of SMoH, WES, NGO personnel; provision of insecticide spraying equipment, assorted insecticides, insectory tools, protective clothings; provision of technical protocols/guidelines and reference materials on vector management. As part of broad based IVM, fill the gap with basic tools/equipment for solid waste management. 	<ul style="list-style-type: none"> Improved capacity and technical skills of SMoH, WES and NGO partners in conducting water quality/safety measures. Reduced incidences of identified WASH/EH related diseases. Increased access to, and utilization of established water quality testing facilities. Increased geographical coverage and available data on drinking water quality. 	<ul style="list-style-type: none"> 18 trainings done on water safety and IVM benefitting 540 technical/resource persons/community leadership. 4 fixed water labs (2 in Fasher, 1 in Nyala and 1 in Geneina) functional. Joint IVM plan developed and first round of planned activities imple 	<ul style="list-style-type: none"> Northern Darfur-Fasher, Abu Shok, Zam Zam, Al Salam, Kassab, Fatorborno, Tawila/Dali Western Darfur-Geneina, Mornei, Hamsa Dageig, Hassa Hisa, Ardamata, Reyad, Kerinding Southern Darfur-Nyala, Otash, Kalma, Derej, Kass, Gereida, El Neem, El Salaam <p>-----</p> <p>Northern Darfur, 304,000 IDPs Southern Darfur, 408,000 IDPs Western Darfur, 270,000 IDPs</p> <p>-----</p> <p>1 July - 31 December 2008</p>

Project Details		CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
World Vision 07-Jul-08 Index: 1239 [2]	SUD-08/WS10 Southern Darfur WV Watsan Programme - [D] - [HIV][Gnd][CB][Env] - (HER)	\$350,000 <u>Project Budget</u> Q1: \$500,000 Q2: \$1,250,000 Q3: \$2,350,000 Q4: \$2,350,000	World Vision is the only INGO addressing the needs of safe and adequate water supply, proper sanitation and appropriate hygiene practices in Mershing, Manawashi, Duma and Khorabashi. The activities in this project are meant to sustain the current levels of water and sanitation services in the camps and reduce the possibility of acute watery diarrhoea (AWD) outbreak through hygiene promotion, regular water quality surveillance and rehabilitation of existing schemes and also increase the sanitation coverage in Khorabashi and Manawashi IDPs by constructing new latrines. The funding is requested for continuation of similar activities that are being implemented with the first round allocation.	<ul style="list-style-type: none"> • Operation and Maintenance of 8 motorized schemes in IDP camps. • Continue and sustain hygiene promotion activities in 4 IDP camps with special emphasis on hand washing with soap, clean up campaigns, water safety (from source to storage and usage). • Water quality surveillance and water source disinfection in the 4 IDP camps in preparedness of AWD. • Rehabilitate 3 motorized schemes. • Replace 200 latrines in the camps. • Construct 100 new latrines for vulnerable communities. 	<ul style="list-style-type: none"> • 71,500 people with continuous safe water supply. • 6,000 people with continuous use improved latrines. • 2,000 more people using improved latrines. • 70,000 people have knowledge and are using improved sanitation facilities and practicing appropriate hygiene behaviours. 	<ul style="list-style-type: none"> • 8 motorised systems operating. • 3 water supply network systems rehabilitated. • 200 latrines replacement. • 100 new latrines installed. • At least 5,000 people receive hygiene message directly with special emphasis on hand washing. 	Mershing, Manawashi, Duma and Khorabashi ----- 79,500 people ----- August - December 2008

Eastern States	\$675,000
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Regional Sector Priorities

- Lifesaving.
- Supporting un-served areas new IDP locations.
- High priority projects that not receive funding in the 1st round allocation.
- Only implementing agency in a geographic area.
- Funding needs (fund against activity costs; gaps).

IRC 25-Jun-08 Index: 1167 [2]	SUD-08/WS15 Comprehensive Multi-sectoral Humanitarian Interventions for Vulnerable Communities - [E] - [HIV][Gnd][CB][Env] - (HER)	\$150,000 <u>Project Budget</u> Q1: \$150,000 Q2: \$300,000 Q3: \$450,000 Q4: \$450,000	The requested fund will be used to implement activities supporting in areas affected by Acute Water Diarrhea (AWD) and cholera or at high risk areas and IDP locations with poor water supply coverage to prevent these areas from the out breaks. IRC is the only organization working in rural Kassala and Telkook locaties other than WES/SWC and these areas has low level of water supply (23.9%) and sanitation coverage. The project interventions will also help returnees in these areas. The allocated fund will cover the total planned budget of IRC and will be able to complete all planned activities of 2008.	<ul style="list-style-type: none"> • Construction/rehabilitation water sources. • Construct HH latrines. • Conduct hygiene awareness activities. • Conduct vector control. 	<ul style="list-style-type: none"> • Access to improved water supply increased, re-established and sustained for returnees and host communities emerging from conflicts. • Access to improved sanitation facilities established for returnees and host communities. • Returnees/host communities reached with hygiene messages. • Train/and build capacity of people at state, locality and village levels in management skills to sustain functionality of water sources. 	<ul style="list-style-type: none"> • 15,000 people with access to improved water supply. • Improved water supply reestablished for 5,000 people. • 10,000 people use chlorinated water. • 90 people provided with management skills and training on O&M of water schemes. • 15,000 have access to safe sanitation facilities. • Reach 150,000 people with sanitation and hygiene. 	South Talkook and Kassala Localities ----- 15,000 returnees and host communities will get water supply and sanitation facilities. 150,000 returnees and host communities will have access to hygiene messages (50% women). ----- July - November, 2008
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Project Details		CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline
UNHCR 25-Jun-08 Index: 1166 [1]	SUD-08/WS141 Support to Refugees and Refugee Hosting Areas in Eastern Sudan (WS Component) - [E] - [CB][Env] - (HER)	\$309,375 <u>Project Budget</u> Q1: \$787,511 Q2: \$1,181,267 Q3: \$1,529,970 Q4: \$1,529,970	The constant influx of new asylum seekers from Ethiopia, Eritrea and Somalia is putting tremendous strain on available water for refugees residing in camps. So far this year, over 10,000 asylum seekers have been registered. Presently, refugees are getting less than 20 litres of water per person per day, the current influx has further reduced the quantity of water supplied to refugees. To curb the trend of reduced water supply to refugees, UNHCR is upgrading the water systems in 12 camps where approximately 96,000 refugees reside along side 40,000 local residents. The allocated fund will be cover the rehabilitation of water schemes in 6 camps, which was identified as gap by UNHCR.	Upgrading the water distribution system in 6 camps.	Increased water supply for refugees.	Refugees residing in 6 camps will receive 20 litres of water per person per day.	Camps in Kassala State (Wad Sharife, Shagarab I, II, III, Kilo-26 and Girba) ----- Shagarab I, II,III: 22,033 (F:10,908/M:11,125). Wad Sharife: 33,370 (F:17,914/M:15,456). Kilo-26: 11,423 (F:5,494/M:5,929) Girba: 8,996 (F:4,534/M: 4,462) TOTAL: 75,822 ----- July - December 2008
UNICEF 25-Jun-08 Index: 1157 [2]	SUD-08/WS16 Integrated WASH Project for IDPs, Returnees and Other Emergency-Affected Population in Eastern Region - [E] - [HIV][Gnd][CB][Env] - (HER)	\$50,000 <u>Project Budget</u> Q1: \$1,000,000 Q2: \$1,850,000 Q3: \$2,095,000 Q4: \$2,095,000	Kassala frequently encounters flood disasters during the rainy season due to the Gash and Toker Rivers. In 2007, number of households were affected by floods, and water and sanitation facilities were damaged along with houses. As part of the lessons learned from previous years, this project was selected for preparedness and response planning to ensure coordination mechanism is in place. Funds are to ensure the sector response planning capacity is in place with adequate training and common assessment tools. The sector's overall objective is to ensure access to safe water and proper sanitation services to prevent disease outbreak.	<ul style="list-style-type: none"> • Training of 60 persons on flood assessment, response planning, and 300 community volunteers on chlorination, to ensure adequate coordination during emergency flood response. • Disseminate hygiene and sanitation information to 10,000 persons highlighting the key messages on AWD/Cholera prevention in Kassala State. 	<ul style="list-style-type: none"> • Water and Sanitation Sector response to flood emergency is assessed, planned, and coordinated involving sector agencies;. • The risk of outbreak of AWD/Cholera is reduced in Kassala State. 	<ul style="list-style-type: none"> • 60 persons trained on flood response assessment and response planning. • 90 persons trained on water supply chlorination. • 210 persons trained on hygiene promotion. • 10,000 persons (1,660 HHs) reached with key hygiene messages. 	Kassala Locality - Kassala Town; communities along Toker and Gash River ----- 10,000 people ----- July - September 2008
UNICEF 25-Jun-08 Index: 1168 [3]	SUD-08/WS16 Integrated WASH Project for IDPs, Returnees and Other Emergency-Affected Population in Eastern Region - [E] - [HIV][Gnd][CB][Env] - (HER)	\$165,625 <u>Project Budget</u> Q1: \$1,000,000 Q2: \$1,850,000 Q3: \$2,095,000 Q4: \$2,095,000	The requested fund will be used to implement activities supporting in areas affected by Acute Water Diarrhea (AWD) and cholera or at high risk areas and IDP locations with poor water supply coverage to prevent these areas from the out breaks especially in Gadarif, it complement limited secured fund to meet the high cost of establishment of water and sanitation scheme before the onset of the rainy season. Planned activities are live saving services and contribute in sustaining peace by minimizing competition over water sources. Allocated funds will be sufficient to meet some of the urgent interventions in high risk areas.	<ul style="list-style-type: none"> • Drilling and installation of hand pumps. • Rehabilitation of mini water yards. • Conduct training in mechanics, community management, field water analysis and chlorination. • Construction of household latrines. 	<ul style="list-style-type: none"> • 5,500 persons provided with improved water supply. • 600 persons provided with safe means of excreta disposal. 	<ul style="list-style-type: none"> • 6 boreholes drilling and equip with hand pumps. • 2 mini water yard rehabilitated. • 110 HH latrines constructed. 	Algash, Hamshkoreeb, Sitiet (Kassala State), Algalabat, Algureesha (Gadarif State) ----- 6,100 people will get water supply and sanitation facilities ----- July - November 2008

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Khartoum and Other Northern States		\$470,000					
<i>Regional Sector Priorities</i>							
<ul style="list-style-type: none"> • IDPs/returnees population. • Drought-affected population. • Flood-affected population. • Population in high risk disease outbreak areas. 							
CRS 07-Jul-08 Index: 1161 [2]	SUD-08/WS102 Increase Access to Safe Water and Sanitation Facilities in Khartoum IDP Camps - [KN] - [HIV][Gnd][CB][Env] - (HER)	\$100,000 <u>Project Budget</u> Q1: \$214,500 Q2: \$319,040 Q3: \$430,980 Q4: \$430,980	Very low sanitation coverage in project area. The project will reduce sanitation gap in Jebel Awlia IDPs camp. The project will build the IDPs capacity to prevent water and vector borne diseases and mobilize community participation for improved environmental sanitation. Monitoring, testing and chlorination of water points will be conducted jointly with WES to ensure safety of water available to 6,000 IDPs. WATSAN activities will be integrated with flood emergency preparedness to reduce risk outbreak of communicable water borne diseases during the rainy season.	<ul style="list-style-type: none"> • Construct 200 latrines. • Train 30 health promoters. • Clear 3 main drainage canals. • Conduct 3 environmental hygiene campaigns. • Sandbag basements of 1,000 latrine superstructures. • Monitor, test and chlorinate 26 water points. • Conduct 10 hygiene education sessions. 	<ul style="list-style-type: none"> • Increased access of IDPs to sanitation facilities and improved environmental sanitation situation in the camp. • Improved rain water drainage during the rainy season. • Reduced sanitation facility damage by flood waters. • Improved water quality for domestic consumption. • Improved hygiene practices. 	<ul style="list-style-type: none"> • Construction of 200 latrines. • Training of 30 health promoters. • Clearing of 3 main drainage canals. • Conduct 3 environmental hygiene campaigns. • Sandbagging basements of 1,000 latrine superstructures. • Monitor, test and chlorinate 26 water points. • Conduct 10 hygiene education sessions. 	Jebel Awlia IDP Camp ----- 6,000 IDPs in Jebel Awlia Camp ----- August - November 2008
Islamic RW 07-Jul-08 Index: 1162 [3]	SUD-08/WS117 Water and Sanitation Promotion in North Kordofan - [KN] - [HIV][Gnd][CB][Env] - (HER)	\$100,000 <u>Project Budget</u> Q1: \$135,000 Q2: \$200,000 Q3: \$339,000 Q4: \$339,000	This project target drought/flood affected population in Northern Kordofan. No other agency is working in this area. The project areas are both under the recurrent flood, cyclic droughts and with low access to potable water, poor sanitation and increased incidences of diseases. WASH package of interventions will be implemented to get maximum benefit.	<ul style="list-style-type: none"> • To rehabilitate 3 water yards in the drought/floods prone areas of North Kordofan for the benefit of 15,000 individuals. • Dig and construct 2 protected hand dug wells for the benefit of 2,000 drought/floods affected population. • Train 60 community volunteers on sanitation and hygiene and management. • Construct 4 school/health facilities latrines for the affected communities. 	<ul style="list-style-type: none"> • Access to improved water sources increased/reestablished and adequate sanitation promoted for 17,000 flood and drought affected population. 	<ul style="list-style-type: none"> • Provide access to safe drinking water for 17,000 flood & drought affected population through the rehabilitation of 3 water bores and digging of 2 protected hand dug wells. • Provide access to hygiene and sanitation information to 5,000 individuals through training of 60 community volunteers and use them for the dissemination of hygiene messages. • To provide access to sanitation facilities for 2 schools and 2 health facilities through the construction of 2 school and 2 health facilities latrines. 	Flood and drought affected areas of Northern Kordofan ----- 17,000 floods and drought affected population in Northern Kordofan ----- July - December 2008
SUDO 07-Jul-08 Index: 1163 [4]	SUD-08/WS118 Integrated WASH Project for IDP (Emergency) Affected Population in Khartoum and North Kordofan - [KN] - [HIV][Gnd][CB][Env] - (HER)	\$100,000 <u>Project Budget</u> Q1: \$540,000 Q2: \$674,000 Q3: \$807,725 Q4: \$807,725	The project targets Khartoum IDPs and drought affected areas in Northern Kordofan, where the water and sanitation coverage is poor. SUDO is one of very few agencies working in these areas. SUDO is a national NGO. The project areas are most vulnerable for flooding during rainy season and hence high risk for disease outbreak. SUDO interventions include digging of draining systems and mobilize/support the community for a simple and proper waste management system together with hygiene promotion, training and awareness raising to continue improving of community health status.	<ul style="list-style-type: none"> • Improve rain drainage system in Mayo IDP Camps. • Conduct cleaning campaign in Khartoum State IDP Camps [Mayo, Jebel Awlia]. • Rehabilitate 1 Water yard and 2 mini water yards for drought affected population of NK. • Train 60 hand pump mechanics. • Train health promoters, 90 women/youth and 90 VHCs members. • Monitor and final evaluation. 	<ul style="list-style-type: none"> • Access to improved safe water increased for 5,500 drought affected population in NK and to hygienic and protected environment from floods for 221,500 in Khartoum IDP camps. 	<ul style="list-style-type: none"> • Increase access to improved water and sanitation facilities for 5,500 drought affected population through rehabilitating of 1 water yard and 2 mini water yards and training of 60 hand pump mechanics. • Increased access to hygienic and protected environment from floods for 221,500 in Khartoum IDP camps through digging of rain drainage systems and cleaning/hygiene campaigns. 	Khartoum IDPs camps and drought affected areas of Northern Kordofan ----- 216,000 IDPs in Khartoum and 5,500 drought affected population in Northern Kordofan ----- July - October 2008

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UNICEF 25-Jun-08 Index: 1158 [3]	SUD-08/WS107 Integrated WASH Project for IDPs, Drought, Floods and Other Emergency-Affected Population in Khartoum and Other Northern States - [KN] - [HIV][Gnd][CB][Env] - (HER)	\$50,000 <u>Project Budget</u> Q1: \$1,000,000 Q2: \$2,000,000 Q3: \$2,000,000 Q4: \$2,000,000	White Nile, Khartoum and Sinnar States are frequently encountering flood disasters during the rainy season. In 2007, a number of households, water points and latrines were affected. As part of the lessons learned from previous years, this project was selected for preparedness and response planning to ensure response and coordination mechanism are in place. Funds are to ensure the sector response planning capacity is in place with adequate training and common assessment tools. The sector overall objective is to ensure access to safe water and proper sanitation services to prevent the disease outbreak.	<ul style="list-style-type: none"> • Training of 150 community-based hygiene promoters and women on hygiene promotion. • Training of 30 persons in flood assessment and response planning. • Refresher training for 30 chlorinators. • Disseminate hygiene and sanitation information to 20,000 persons highlighting the key messages on AWD/Cholera prevention. 	<ul style="list-style-type: none"> • Water and Sanitation Sector response to flood emergency is assessed, planned, and coordinated involving sector agencies. • The risk of outbreak of AWD/Cholera prevented or controlled in Khartoum, White Nile and Sinnar. 	<ul style="list-style-type: none"> • 150 community-based persons trained on hygiene promotion. • 30 trained on water supply chlorination. • 30 persons trained on flood assessment and response planning. • 20,000 person (3,330 HHs) reached with key hygiene information. 	Khartoum - Jebel Awlia, Mayo, Eilafoon, Ombada White Nile - Kosti, Rebak Sinnar - Sinnar, Singa ----- 20,000 people ----- July - September 2008
UNICEF 07-Jul-08 Index: 1160 [1]	SUD-08/WS107 Integrated WASH Project for IDPs, Drought, Floods and Other Emergency-Affected Population in Khartoum and Other Northern States - [KN] - [HIV][Gnd][CB][Env] - (HER)	\$120,000 <u>Project Budget</u> Q1: \$1,000,000 Q2: \$2,000,000 Q3: \$2,000,000 Q4: \$2,000,000	Gaps in access to safe water and sanitation facilities are high in selected project areas. Most of project areas were affected by disease outbreak in the past and hence priority to undertake short-term and long-term prevention interventions. No other funding is available currently for this project. UNICEF has capacity in place to implement and coordinate WASH interventions in these region.	<ul style="list-style-type: none"> • Establish 7 hand pumps and 1 water yard. • Rehabilitate 14 hand pumps. • Train 30 hand pumps mechanics. 	<ul style="list-style-type: none"> • Access to improved water sources increased/reestablished for 10,250 IDPs and drought-affected population. 	<ul style="list-style-type: none"> • Increase access to improved water for 6,750 IDPs and drought affected population through the establishment of 7 hand pumps and 1 water yard. • Re-establish access to improved water for 3,500 drought affected population through the rehabilitation of 14 hand pumps. • Training of 30 hand pumps mechanics. 	Khartoum IDPs camps and drought affected areas of Northern Kordofan ----- 5,000 IDPs in Khartoum and 5,250 drought affected population in Northern Kordofan ----- July - November 2008
Southern Kordofan		\$590,000					
<u>Regional Sector Priorities</u>							
<ul style="list-style-type: none"> • Lifesaving. • Supporting un-served areas and new IDP locations. • High priority projects that not received funding in the 1st allocation. • Only implementing agency in a geographical area. • Funding needs (fund against activity costs and gaps). 							
CARE 08-Jul-08 Index: 1169 [1]	SUD-08/WS18 Water and Sanitation Project for Returnees - [SK] - [HIV][Gnd][CB][Env][ERA] - (HER)	\$100,000 <u>Project Budget</u> Q1: \$200,000 Q2: \$300,000 Q3: \$450,000 Q4: \$450,000	Poor water and sanitation coverage in project areas. For example, in Nugra village 1,000 households were surveyed and result shows that 0% has latrines, in Umshouran 1,050 households were surveyed and only 0.003 households have pit latrines. Few water points and education facilities were constructed in the target areas which MUST be accompanied by software - sanitation and hygiene facilities and messages. CARE is the only agency working in the target areas. The second allocation complement interventions undertaken with CHF first allocation. There is a big number of returnees population in the areas and hence need to provide sanitation facilities. Water supply will be provided by UNICEF in these areas.	<ul style="list-style-type: none"> • Community mobilization for pit latrine construction - awareness raising sessions, collection of local materials by the communities. • Procurement of pit latrines' construction materials, training in slabs production, production of slabs, and construction of pit latrines. • Training on sanitation and personal hygiene, development and dissemination of hygiene messages. 	<ul style="list-style-type: none"> • Access to safe sanitary facilities for returnees and host communities. • Increase awareness on sanitation and personal hygiene, environmental sanitation and protection. 	<ul style="list-style-type: none"> • Improved pit latrines for 3 schools and 50 HHs. • 30 community members trained in slab production and 50 HH pit latrines construction. • 3 public sessions conducted, 20% of the community members are aware on the importance of pit latrines. • Improved personal and sanitation practices for 50% of the population in the targeted villages. 	Kadugli County and Locality ----- 5,000 beneficiaries (70% returnees, 30% host communities) ----- July - December 2008

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Islamic RW SUD-08/WS23 08-Jul-08 Index: 1172 [4] Water Supply and Sanitation Promotion in Southern Kordofan - [SK] - [HIV][Gnd][CB][Env][ERA] - (HER)	\$150,000 <u>Project Budget</u> Q1: \$188,000 Q2: \$240,000 Q3: \$275,000 Q4: \$275,000	The project is targeting Deliba, Juba, Nour ElHuda, ElFarashaya, ElGos in ElFarashaya Payam and Juejienga, Tunguro, and Solium Jewikaya in Dilling locality, where no other agency is operating. The water and sanitation service level is quite low in these areas. IRW has capacity and presence to implement the project interventions.	<ul style="list-style-type: none"> Rehabilitate 40 hand pumps to serve at least 4,000 individuals. Drill 5 hand pumps (possibly mini-boreholes based on productivity) to serve 4,000 IDPs and host communities. Form 5 health committees and reformation of 40 health committees. Conduct orientation sessions on sanitation and hygiene for 60 communities. Train 60 mechanics on hand pumps maintenance. Construct 4 public latrines. 	Access to improved water, sanitation and hygiene for 4,000 IDPs and 8,000 hosting vulnerable communities in 10 villages of Dilling.	<ul style="list-style-type: none"> To provide access to potable drinking water facilities to 12,000 population (4,000 IDPs and 8,000 host community) with a walking distance of less than 1 km. To provide access to sanitation and hygiene information to 10,000 population. 	IDPs and vulnerable hosting communities of Dilling localities ----- 12,000 Population (4,000 IDPs & 8,000 Hosting vulnerable communities) in Dilling Payam & Diling localities ----- June - December 2008
Medair SUD-08/WS24 08-Jul-08 Index: 1171 [3] Access to Water and Sanitation in Southern Kordofan Phase 2 - [SK] - [HIV][Gnd][CB][Env][ERA] - (HER)	\$70,000 <u>Project Budget</u> Q1: \$206,000 Q2: \$413,000 Q3: \$618,800 Q4: \$618,800	Medair is the only implementing agency in Allirri Hills area. Medair has capacity for implementation, including an Emergency Water Treatment System to provide clean drinking water for 3,000 people in case of an emergency (life saving). With the provision of US\$70,000, Medair will be able to complete all planned WES interventions as per 2008 Work Plan.	<ul style="list-style-type: none"> 300 household latrines constructed (150 in NE Kadugli and 150 in Allirri Hills). 6 rainwater harvesting systems constructed (NE Kadugli). Hygiene promotion training courses in 4 locations. 150 biosandfilters constructed (in 5 locations in NE Kadugli). Coordinated response to water needs in emergencies for 3,000 persons. 	<ul style="list-style-type: none"> Increased access to safe water for 16,500 persons and to safe means of excreta disposal for 2,000 persons in the project area. Sustainable improvement in the health and hygiene related behaviour of up to 15,000 people in the project area. 	<ul style="list-style-type: none"> 300 household latrines. 150 biosandfilters. 6 rainwater harvesting systems. Hygiene promotion in 4 locations. Emergency response up to 3,000 persons for water supply. 	Allirri Hills and North East Kadugli ----- 16,500 people will benefit directly from improved access to safe drinking water. 15,000 people will benefit directly from hygiene promotion activities. 2,000 people will benefit directly from the sanitation activities. 3,000 people will benefit ----- January - December 2008
UNICEF SUD-08/WS27 25-Jun-08 Index: 1159 [4] Integrated WASH Project for Returnees and Other Emergency-Affected Population in Southern Kordofan - [SK] - [HIV][Gnd][CB][Env][ERA] - (HER)	\$30,000 <u>Project Budget</u> Q1: \$650,000 Q2: \$1,100,000 Q3: \$1,300,000 Q4: \$1,300,000	Annually during the rainy season, Southern Kordofan encounters flood disasters. Areas with large vulnerable population has been affected in the past. Settlements along major wadis are usually at risk. As part of the lessons learned from previous years, this project was selected for preparedness and response planning to ensure response and coordination mechanism are in place. Funds are to ensure the sector response planning capacity is in place with adequate training and common assessment tools. The sector overall objective is to ensure access to safe water and proper sanitation services to prevent the disease outbreak.	<ul style="list-style-type: none"> Training of 180 persons from local community-based on hygiene/health promoters and women on sanitation and hygiene. Training of 60 persons (Sector partners) on flood assessment and response planning. Monitoring of chlorine levels in water schemes (water yards and mini-water yards). 	<ul style="list-style-type: none"> Water and Sanitation Sector response to flood emergency is assessed, planned, and coordinated with the involvement of sector agencies. Chlorine residual level maintained. The risk of outbreak of AWD/Cholera is reduced in Southern Kordofan. 	<ul style="list-style-type: none"> 180 community-based persons trained on hygiene promotion. 30 trained on water supply chlorination. 60 WS sector partners staff are trained on flood assessment and response planning. 	Southern Kordofan: Dilling, Abasia, Rashad Town; Abugabai, Lagawa; Kelic;and Talodia ----- 10,000 people ----- July - September 2008
UNICEF SUD-08/WS28 08-Jul-08 Index: 1170 [2] Integrated WASH Project for Vulnerable Population in Southern Kordofan - [SK] - [HIV][Gnd][CB][Env] - (RD)	\$240,000 <u>Project Budget</u> Q1: \$800,000 Q2: \$1,200,000 Q3: \$1,500,000 Q4: \$1,500,000	UNICEF is primarily targeting new IDPs, host communities and conflict areas between nomads and communities over water (mini water yards will be constructed in strategic places). UNICEF will continue its interventions in un-served and underserved areas and former SPLM controlled areas. All interventions based on integrated approach (water sanitation and health promotion). UNICEF has the capacity to start implementation immediately after the approval and major supporting/implementation organization in Southern Kordofan.	<ul style="list-style-type: none"> Drilling of boreholes with hand pumps. Establishment of mini water yards. Rehabilitation of hand pumps and water yards, scaling up existing boreholes to mini water yards. Construction of household latrines. Construction of school latrines. Awareness raising on proper personal and environmental sanitation and hygiene practices, conduct trainings on mechanics, sanitation and health promotion. 	<ul style="list-style-type: none"> Contribute to mitigate of conflicts over water points. Reduce mortality and morbidity related to water and sanitation diseases in most vulnerable areas. Contribute to reintegration of returnees through the construction of basic needs facilities on sustainable way. 	<ul style="list-style-type: none"> Construction of 4 mini water yards. Drilling 8 new boreholes fitted with hand pump. Rehabilitating 25 handpumps and 2 water yards. Scaling up 3 existing boreholes to mini water yards. Training mechanics, community leaders, and masons. Construction of 400 HH latrines and 2 school latrines. 	List of new IDPs (around 25,000 reported) locations: Rashad locality: Umbrambita and Tajmala/AU payams. Dilling locality: Elfarshaya/AU payam; Abujabiha: Abujabiha and Wakarra payams Kharasana, Kubri, Keilak ----- 37,500 persons (women, men and children) among IDPs, returnees and host communities for water supply, sanitation and health promotion ----- October - December 2008

Project Details	CHF Allocation (and regional quarterly project budget)	Allocation Justification	Planned CHF Activities	Outcome/Output (broader outputs/outcome that the CHF supported activities will help achieve)	Allocation Targets (concrete/measurable targets to be directly achieved by the CHF supported activities)	Locations, Beneficiaries and Timeline	
Southern Sudan		\$160,497					
<i>Regional Sector Priorities</i>							
<ul style="list-style-type: none"> • Increase access to safe drinking water - through community facilities to provide safe water to vulnerable (children and patients) populations by drilling boreholes in schools and health centers. • Increase access to improved sanitation facilities - through community facilities to provide improved sanitation facilities to vulnerable (children and patients) populations by construction of latrine blocks in schools and health centers. • Promote hygiene and sanitation behaviour change in order to reduce incidences of sanitation and hygiene related diseases - through provision of hand washing facilities and hygiene and sanitation education in schools and hospitals. 							
UNICEF 25-Jun-08 Index: 1270 [1]	SUD-08/WS76 Strengthened Coordination and Decentralized Management of Rural Water Supply, Sanitation and Hygiene Service Delivery in Southern Sudan - [S] - [Gnd][Env] - (RD)	\$160,497 <u>Project Budget</u> Q1: \$500,000 Q2: \$500,000 Q3: \$500,000 Q4: \$500,000	To provide access to safe drinking water and improved sanitation facilities to the most vulnerable groups (children and patients) is considered one of the priorities of the WS sector. This project aims to provide safe drinking water and gender sensitive improved sanitation facilities to the Akobo hospital and Akobo Primary School thus fitting within the overall sector priorities.	<ul style="list-style-type: none"> • Construction of new waterpoints in Akobo primary school and Akobo Hospital. • Construction of improved latrine blocks in the primary school and hospital. • Carrying out hygiene promotion in the primary school and hospital. 	<ul style="list-style-type: none"> • Additional 500 primary school pupils/teachers and 1,000 health facility users/workers have access to safe water and improved sanitation facilities and are adopting improved hygiene practices. 	<ul style="list-style-type: none"> • 3 water points constructed in the hospital and primary school. • Hygiene promotion sessions held with primary school pupils/teachers and health facility users/workers. 	Akobo County, Jonglei State ----- • 397 girls and 940 boys at the school and 1,000 direct beneficiaries • 70 percent of whom are women and children in the hospital ----- 12 months, implementation timeline September 2008 - September 2009