Humanitarian Response to Ethiopian Refugees in East Sudan

Supported by: **actalliance** and

EMERGENCY APPEAL

Humanitarian Response to Ethiopian Refugees in East Sudan

ACT ALLIANCE/CARITAS APPEAL: SDN201 - EA35 /2020

Appeal target: Balance requested: 1,579,578 EURO 816,040 EURO

	A. GENERAL INFORMATION SHEET						
	1.1 Programme title	Humanitarian Response to Ethiopian Refugees in East Sudan					
	1.2 Programme holder	NCA: Norwegian Church Aid, Al Amarat 3, Khartoum, Sudan <u>https://www.kirkensnodhjelp.no</u>					
		Director: Berte Marie Ulveseter Contact person: Berte Marie Ulveseter Email: <u>berte.marie.ulveseter@nca.no</u> Telephone / Mobile: +24991230283 Skype: Berte Marie Ulveseter					
		CAFOD: Plot 68 Block 12 Khalid Bin Walid Street, off Al Mashtal Street P.O Box 13536, Khartoum Sudan (UK) Romero House 55 Westminster Bridge Road London SE1 7JB					
		For CAFOD: Sudan Country Representative Michel Monginda Email: <u>mmonginda@cafod.org.uk</u>					
	1.3 Appeal Number	Cl Appeal Number: EA35 /2020 - SUDAN ACT Alliance Appeal Number: SDN201					
	1.4 Programme start & end dates:	Start date:01/01/2021 (start of eligibility period)End date:31/08/2021Duration:8 monthsFinal Report Due Date:31/10/2021					
	1.5 Reporting Schedule for quarterly and annual reports	1st Quarterly report: 01/05/2021 2nd Quarterly Report: 01/08/2021 Final Report Due Date: 31/10/2021 Audit Report Due Date: 30/11/2021					
		Total Budget: EURO 1,579,578 Local currency: Euro: EURO 1,579,578					
	1.6 Total Budget	Contributions already secured and by whom: NCA Reserve Local currency: 2 000 000 NOK Euro: 187,099 Exchange rate used and source: 0.09355, Oanda.com					
		ActCoS Local currency 4 330 000 SEK Euro: 422,323					

	Exchange rate used and source: 0.09	753, Oanda.com						
	DCA							
	Local currency 400 000 DKK Euro: 53,734.3							
	Exchange rate used and source: 0.13434, Oanda.com							
	ICCO							
	Local currency Euro: 76,000							
	<u>*Contribution from ACT alliance mem</u>	nhers are subject to (ICE of 3%)						
1.7 Geographical focus	Kassala, Sudan							
1.8 Name(s) of	NCA will be the primary Implementin	g Partner						
implementing partner (s)	Technical Support and additional monitoring will be provided by CAFOD							
	Total number of direct beneficiaries ((individuals) ¹ :						
1.9 Beneficiaries	30 000 Female Male							
1.9 beneficiaries		Men Boys						
	7 095 5 805	9 405 7 695						
	Refugees who have fled to Eastern Su conflict have their immediate human							
1.10 Overall objective	environmentally responsible, sustain	-						
	assistance							
1.11 Compulsory	Annex 1) Budget							
documents to be attached	Annex 2) Results Framework (LFA) Annex 3) Gantt Chart							
1.12 Recommended further	Annex 5) Risk Matrix							
documentation to	,							
be provided								
	Caritas Internationalis Members	ACT Alliance Members						
	Transfers to CAFODs Euro account	Transfers to NCA's account:						
	Account name: CAFOD Account key: CAFDERTI EUR1	Bank name: DNB Bank address: Dronning Eufemias						
1.13 Bank Details:	Sort code: 16-00-30	gate 30, 0191 Oslo						
	Account number: 10000741	BIC/SWIFT code: DNBANOKK						
	BIC / Swift code: RBOSGB2L IBAN: GB06RBOS16107010000741	Bank account nr (or IBAN): NO 54 8210 0455 494						
	Bank Address: The Royal Bank of	Bank account holder name:						
	Scotland	Norwegian Church Aid (NCA)						
	London Cavendish Square Branch	Bank account currency: USD						

¹ See section 5 in this document for definition of direct and indirect beneficiaries.

	Transfers to our US dollar account Account name: CAFOD Account key: CAFOD USD1 Sort code: 16-00-30 Account number: 00035169 BIC / Swift code: RBOSGB2L IBAN: GB52RBOS16630000035169 Bank Address: The Royal Bank of Scotland London Cavendish Square Branch Transfers to our sterling (GBP) account Account name: CAFOD Sort code: 16-00-30 Account number: 11769410 BIC / Swift code: RBOSGB2L IBAN (only quote if requested) GB37RBOS16003011769410 Bank Address: The Royal Bank of Scotland London Cavendish Square Branch	Payment currency: USD And if applicable: Via Bank BIC/SWIFT code: DNBANOKK Via Bank account nr. (IBAN, ABA, etc.): NO 54 8210 0455 494)
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C. PROPOSAL

Introduction to the Joint ACT Alliance / Caritas Appeal

There is a long history of ecumenical responses to humanitarian crisis in Sudan. Since 2004 the ACT Alliance and Caritas Internationalis have launched joint appeals in Darfur which have been implemented by NCA in collaboration with CAFOD. Following the flight of refugees from Ethiopia to Eastern Sudan, CAFOD and NCA coordinated with the respective secretariats in Geneva and Rome and local churches and agreed to launch a joint response for Eastern Sudan. A "Programme Governance Group" will be established for this programme (see section eight) to maintain strategic oversight and coordination of the response.

1. PROBLEM ANALYSIS

CONTEXT

Sudan faces multiple challenges. Sudan has one of the lowest human development levels due to years of little or no investment in basic services which has stretched the capacity of existing infrastructure and basic services including health. The health system is at risk of collapsing, water and sanitation coverage remain poor, and the education system is unequipped to accommodate existing and increasing needs. In rural areas, delivery of basic services in non-existent. Sudan has 200per cent annual inflation, currency depreciation and fuel shortages, impacts of which were further compounded by lockdown restrictions due to COVID-19.

REFUGEE INFLUX FROM ETHIOPIA

Sudan hosts one of the largest refugee populations in Africa². Nearly 2 million people remain internally displaced following decades of conflict. Sudan hosts both temporary and long-term populations of refugees, asylum seekers and migrants. Over 1.1 million refugees are estimated to be

² Sudan Country Refugee Response Plan (CRP 2021)

living in Sudan, including people who fled South Sudan, Eritrea, the Central African Republic, Ethiopia and Chad, but also the wars in Syria and Yemen that pushed people to seek safety in Sudan. Most refugees live in out-of-camp settlements, host communities and urban areas, while others stay in camps, especially in East Sudan and White Nile State. Sudan continues to generously host and receive additional asylum-seekers including the new arrivals from Ethiopia's Tigray Region.

In early November 2020, the Ethiopia region (Tigray) was affected by incidents of armed conflicts due to the military and political confrontation between federal and regional forces in Tigray region. Eastern Sudan has received many refugees through various border points. The population in Tigray region includes approximately 600,000 people dependent on assistance, including IDPs and Eritrean refugees⁴. Sudan has received over 52,200³ new Ethiopian refugees as of December 20th.

The health system is severely impacted in its ability to respond to growing needs related to localised conflict, flooding and disease. In Gedaref State in eastern Sudan, the availability of a complete healthcare package is as low as 15 per cent. The risk of outbreaks of Covid-19 and other communicable disease is very high, particularly in high concentration zones like transit and reception centers.

The deteriorating health system situation in Sudan has impacted women of reproductive age. Sudan has a high maternal mortality rate, 15 per cent of pregnant women are likely to experience birth related complications and need access to emergency obstetric and neonatal care services including referral services.

The health status of newly arrived refugees remains a concern. The Tigray region remains the most impoverished region in Ethiopia with reports of malnutrition, poor vaccination coverage and the need for vitamins and nutrition supplements for pregnant and lactating mothers. There are various reports and confirmed customary norms and practices that increase women's and girls' risk to violence⁵. Instability and conflict will increase the risk of early marriage due to families' needs for dowry to meet basic needs including food, shelter and basic services.

From the recorded refugees arriving in Eastern Sudan, as estimated based on the MISP, it is calculated that there are 700 women who are pregnant and in need of access to ante-natal care (ANC) and safe delivery services for the expected births to take place in the coming month. Healthcare facilities acutely need to increase their capacity to be able to serve the host communities and refugees. Women's reproductive health needs are dangerously unmet. The nearest referral health facility able to provide post-rape treatment or emergency obstetric care is about 40 minutes by car from Um Rakuba.

The options for psychosocial support and GBV case management services are limited. Recruiting qualified female social workers remains a challenge due to the remote area. The limited number of qualified female social workers in the area results in gaps in skills and availability. Safety and dignity are concerns of women and girls. They have repeatedly expressed a need for increased access to sanitary material including clothes (*dera*), soap, undergarments and sanitary pads. Gender segregation in WASH facilities is critical as is the provision of security lighting for protection of women and girls. There are no safe spaces for women and girls to ensure their privacy and provide them a space to support one another⁶.

Sudan is prone to heavy rainfall that often leads to floods. Gedaref's rainy season runs from April until September and it has black cotton soils that absorb water heavily, swell, become soft, lose strength, easily compressible and has tendency to heave during wet condition. This will negatively impact construction, such as latrine construction. Seasonal rainfall is likely to lead to oversaturation of the soil and, consequently, flooding in new areas. Many roads are still unpaved and problems with the soil property mean that when it rains roads end up closer to resembling swamps. That is why it is

³ Figures as published by UNHCR, as at 19th December, 2020

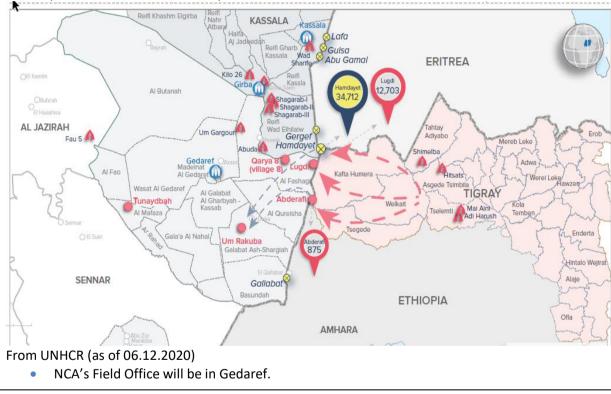
especially crucial for COR/UNHCR and its partners to keep access open and must prepare with prepositioning and respond over the coming months to grade and compact roads, pathways, bridges and drains, and to stabilize land, before the rainy season being in April 2021. In addition, the rainy season will cause conditions for the refugees to deteriorate and increased the incidence of diseases such as malaria and hepatitis E.

2. PROPOSED RESPONSE

A. Geographical Focus

A. Geographical Focus

The project will focus in the Gedaref State of Sudan, specifically in Um Rakuba, and host communities where refugees are hosted. In Village 8 the engagement concerning WASH will have a rehabilitation approach and in GBV it will have temporary or transitional approach. This is because the refugees are being relocated either to Um Rakuba or Tunaydbah.



The map below shows the area of operations:

B. Security Situation

There have been several cross-border skirmishes between the Sudanese military and various organized armed groups in recent months. Inter-ethnic violence is a regular occurrence in the area and is likely to increase with the escalating situation in the Tigray region of Ethiopia. Deadly violence against civilians has been reported on several occasions, and there is uncertainty regarding who the perpetrators are. Organized armed groups have previously been used as proxies to conduct attacks without accountability for state actors in the wider region, and they are likely to be involved in recent atrocities. Civil unrest occurs frequently and can cause widespread violence and destruction. Crime is present but limited in scope and severity. A state of emergency is declared, and the Sudanese security forces have extended mandates.

On Tuesday 15th December, the Sudan's military reported a cross-border attack by Ethiopian militias in the area of Abu Tyour in the Gedaref State. The attack left at least four troops, including a major, dead and wounded a dozen others. The Sudan military has now sent enforcement to the borders with Ethiopia. This development could strain ties between the two neighbours. The attack on the Sudanese troops came three days after Prime Minister Abdalla Hamdok met with the Ethiopian leader in Addis Ababa. The two sides said they agreed to resume talks after a week in Khartoum over the border between the two countries.

Mitigation measures must be in place for all field travel and work in Kassala and Gedaref. Proper, safe accommodation is a requirement. Vehicles used for road travel must be well maintained and roadworthy. All travel to and in Kassala and Gedaref must be accompanied by the movement tracking system, with regular check-in intervals. No road movement is to occur during darkness.

Extreme: Serious security risks; no or very limited access in target areas	
Tense: Varied security risks; may limit access to target areas at times	х
Normal: No significant security risks that may affect the response	
C. Response Objectives / Logical framework	

Water, Sanitation and Hygiene (WASH)

The WASH sector is currently the largest sector under the Emergency Response plan of UNHCR (42.5 Mil USD out of 147.6 Mil USD). WASH services are currently very limited in both the transition areas and the settlement being established for refugees. Limited sanitation and hygiene facilities, materials and access to information presents a great risk of spread of Covid-19, particularly in congested areas such as transit centers and resettlement sites. NCA had three assessment visits to the respective refugees' camp site - once in November and twice in December. Form the assessment visit the below response and gaps were identified

Response/gaps

Led by COR- UNHCR, 30 partners (UN agencies, national and international NGOs are responded to the refugee influx into Eastern Sudan). Some of the WASH elements already being met are;

			0	
Water, Sanitation	MSF	latrines		
& Hygiene				
Water, Sanitation	SRCS	latrines	3 blocks	
& Hygiene				
Water, Sanitation	UPO	Latrine	3 blocks	Done in
& Hygiene		rehabilitation		November
Water, Sanitation	WHH	Hygiene Kits	3 000,00	December -
& Hygiene				pledged
Water, Sanitation	WHH	Handwashing	40,00	December -
& Hygiene		stations		pledged
Water, Sanitation	UNHCR	water trucking		ongoing
& Hygiene				
Water, Sanitation	UNFPA	Hygiene Kits	20,000	Distributed
& Hygiene				
Water, Sanitation	WFP	water tanks –	50,00	installed
& Hygiene		1000 ltr		
Water, Sanitation	UNICEF	bladder - 5000 ltr	1,00	installed
& Hygiene				
& Hygiene Water, Sanitation & Hygiene Water, Sanitation	WFP	water tanks – 1000 ltr	50,00	installed

However, there are still urgent Needs

- In Um Rakuba and Village 8, there is poor WASH and health infrastructure and service availability.
- In Village 8, the increase in use of the water station in the nearby community and the damages it has incurred, has compelled the local authorities to reduce UNHCR's and Sudanese Red Crescent water trucking capacity to one water tank to be refilled four times per day. This is adding additional strain on refugees in Village 8 and alternative access to water needs to be found to ensure refugees have sustainable access to water.
- Access to latrines and waste management also remains a challenge.
- The Um Rakuba camp water supply systems are old and in urgent need of rehabilitation, and diesel generators are difficult to maintain given fuel shortages.
- Water distribution points and latrines remain a challenge to access for all refugees.
- The Um Rakuba camp has poor drainage, and during the rainy season stagnant water issues will require vector control support.
- Poor road access to the camps makes waste removal difficult, which will drive vector breeding and infectious disease risk.
- Water tracking in Um Rakuba provides the refugees with access to water and if there are gaps in access to chlorination, especially during dry season, this will make refugees also vulnerable to waterborne illnesses.
- Women and girls are also in urgent continued need of menstrual hygiene support in all locations

The planned response in this appeal aligns to the objectives established by UNHCR.

Specific Objective:

 Communities affected by crisis demonstrate improved hygiene practices and access lifesaving WASH services appropriate and relevant to their immediate needs (14,100 females and 15,900 males targeted)

Expected Results:

- 30,000 women, girls, men and boys are enabled to improve hygiene practices and have access to hygiene items to protect against WASH related health risks
- 15,000 women, girls, men and boys access safe, appropriate and hygienic sanitation services, including environmental sanitation (i.e. excreta management, waste management, vector control)
- 30,000 women, girls, men and boys access safe, equitable and sustainable quantity of water for drinking, cooking, and personal hygiene
- 7,500 women and girls of reproductive age, and women, girls, men and boys with incontinence have access to appropriate hygiene supplies and WASH facilities that support their dignity and wellbeing

Response

The quick response activities include, but not limited to, water rationing (water trucking), provision of water tankers for water storage, provision of water treatment chemicals for households. These activities will be followed by the rehabilitation, expansion and upgrading of existing (if any) water supply systems to a solarized water supply systems; or construction of a new system, if there isn't any. In aggregate, these interventions will provide access to immediate water needs of the affected population in their settlement areas. The user (affected) communities will also be capacitated to run, operate and manage these facilities themselves to ensure their continued services. Along with the water supply works, households and communal latrines will be constructed based on the standards shared by the WASH technical working group. Bathing shelters (shower facilities) will also be constructed for households and communities as well. It will all be ensured that the interventions and the corresponding facilities are appropriate, inclusive, acceptable and to the standards set by the different working groups. Furthermore, environmental sanitation and hygiene promotion activities will be undertaken mainly by engaging volunteers from the affected population themselves and using different hygiene promotion tools and materials. Distribution of hygiene kits and hygiene promotion will focus on general hygiene, menstrual hygiene management, and prevention and mitigation of Covid-19 transmission. Specific activities include:

•Supply of safe drinking water, according to emergency standards (15 l/pers/day), although current indicator is less than 10 l/p/d. While this may initially include water trucking, NCA will prioritise the establishment of sustainable, solarized water sources from the start of the response. This may include repair / rehabilitation of existing water systems, expanding pipe networks, drilling of new boreholes, and/or adding water storage capacity.

• **Construction of household and communal latrines** according to emergency standards (1 latrine / 50 persons), gender segregated and including sanitation options adapted to people living with disabilities (PLWD). The design will follow the established standard by the WASH sector working group.

• Water treatment via chlorine treatment at the source and purification tablets for families without the option of source treated water who are collecting water at the riversides. Water quality will be tested at the production site and at the HH level, to ensure the availability of Free Residual Chlorine (FRC) at a rate of 0.3-0.5 mg/l at the consumption time.

• **Construction of bathing shelters**, separate for women and men. The design will follow the established standard by the WASH sector working group and will be inclusive to PLWD.

• Solid waste bins and solid waste disposal

• Installation of handwashing stations.

•Hygiene promotion campaigns, delivered by refugee volunteers and with materials produced in local languages.

• Distribution of WASH NFIs, such as buckets, soap and MHM materials

•**Training (capacity development) of community members** on water treatment and chlorination, water scheme management and community hygiene promotion) for continuity of provisions of services – aligned to UNHCR's Durable Solution approach.

To be able implement activities in a quick and efficient way NCA has a prepositioned stock in a warehouse near Oslo. Part of these materials have been shipped to Khartoum, as part of an agreement with UNHCR. The material amounts to more than 8 Tons and it will be used in the 1st phase of the emergency response. It will ensure a quick response in the initial months of the emergency.

Although the setting up of WASH services in a refugee camp is a long-term commitment, that spans longer than a year, NCA will look for approval from UNHCR to establish the best sustainable option for every need. Initial water trucking delivery will be phased out as soon as possible to transition to less costly systems (pumping water from rehabilitated boreholes, restoring existing water systems, etc). NCA will seek to design new water supply systems using only solar arrays, instead of diesel or hybrid systems. Water committees will be established and trained in operation and maintenance of the more basic structures of their water systems (usually the tap-stands and storage facilities), fostering more sustainability in the WASH sector.

Integrated GBV and psychosocial support

There is an urgent need to improve and extended integrated protection services. The NCA Programme intends to provide a coordinated response or a 'women-friendly space (WFS)' service providing comprehensive care to survivors and women and girls at risk. The comprehensive care will include health promotion, legal, psychosocial and case management services within one location. The program will aim to promote resilience and dignity for host and refugee populations. The program

will strengthen community social services to support continuity of care and strengthen community resilience. Attention to GBV survivors will be prioritised, and a referral pathway including access to the necessary health services will be established. Referred cases will be followed up to ensure that they receive survivor centred quality services. All staff at the WFS will be trained on confidentiality and a survivor centred approach, as well as provision of care while following Covid-19 social distancing and hygiene requirements. The goal of the project is to offer a safe space where women can start the process of healing and find strength to start rebuilding their lives.

Specific Objective:

• GBV Survivors, and women and girls at risk access lifesaving specialised services relevant to their immediate needs.

Expected Results:

- Increased access to quality lifesaving GBV case management and psychosocial support to survivors of GBV, and women and girls at risk for 1,700 women and girls;
- Improved knowledge and awareness of the community to lifesaving information to prevent GBV
- Promote community resilience on GBV prevention and response by strengthening community structures and behaviour change through improvement of behaviour change strategies to prevent GBV.

Response⁴

With the aim to increase quality of services to women and girls in Eastern Sudan, we seek to establish a Women-Friendly Space providing multisectoral response including health promotion, psychosocial support, legal support and referrals, medical referrals and effective referrals to security services.

NCA will collaborate and work with the Health Sector, "Combating Violence Against Women and Girls Unit" in The Federal Ministry of Labor and Social Affairs and Ministry of Health to strengthen the services to host and refugee community. Survivors and women and girls living with or having experienced violence may need medical, mental health and legal services. NCA will establish a 24 hours per day, 7 days per week referral system to facilitate the transportation and communication from the community to the Women-Friendly Space and tertiary healthcare. Community Healthcare Workers will be trained and deployed to provide information and education to the community about the availability of services and the importance of seeking care. Mother and Baby kits will be distributed to mothers to promote hospital deliveries. In addition, clean safe delivery and new-born care kits will be distributed to expectant mothers to improve birth practises when access to health facility is limited.

The political environment has opened space for a scale up of GBV prevention, mitigation and response. The key priority of GBV program will be the provision of lifesaving response focusing on case management, psychosocial support, and establishment of referral mechanisms. In addition, there will be a capacity building plan in place to strengthen care for survivors. The capacity building plan will focus on interagency GBV case management, mental health and psychosocial services (MHPSS), care for child survivors and management of women and girls' safe spaces. The program will aim to establish a community and women's network to build safety networks and empower women and girls with life skills and leadership training. In addition, NCA will establish a Community Centre where sex segregated GBV and PSS activities will be facilitated to male and female community members with a focus on improving the health and wellbeing of adults and adolescents. Awareness activities will aim to mobilise communities including men and boys to prevent and respond to GBV in a safe and timely manner to seek sustainable solutions and address issues of stigma.

⁴ Caritas Internationalis and its Members do not promote the use of, or distribute any form of, artificial birth control.

Finally, risk mitigation mechanism and strategies such as safety audits, services mapping and other assessment will be carried out conscientiously to inform programming. Community networks including the Woman-Friendly Space and women network will be supported and expanded as the first line of GBV prevent and response at the localities. Government authorities will be engaged through advocacy, capacity building on GBV to increase the protective environment. Dignity kits will be distributed to targeted women and girls to contribute to the wellbeing, dignity, hygiene, mobility and reduction of risk of GBV.

Energy and Environment

Meeting the energy needs of refugees, and protecting the environment they depend on, are critical cross-cutting issues for NCA. Environmental degradation seriously increases risks of environmental hazards. Key recurring issues are firewood collection, deforestation (due to the construction of temporary shelters and wood fuel for cooking), erosion and landslides, pollution of rivers streams and underground water, overgrazing, pollution of air and soils, and unsafe waste management. Energy and environment is a traditionally overlooked part of the humanitarian infrastructure that does not exist within its own sector; meeting needs for sustainable energy is often sacrificed early in emergencies. According to reports, the rapid influx of refugees who are using firewood for cooking is already having serious impacts on forests around the camps. A 26 November inter-agency technical assessment of the new planned resettlement site at Tunaydbah reported concerns raised by local communities over environmental deterioration due to tree cutting for firewood collection.

As of the 24 November publication of the Inter-agency Refugee Emergency Response Plan, UNHCR and UNDP are the only agencies addressing needs in environment and energy for the Sudan refugee influx from Ethiopia. NCA is cognizant that the emergency phase is a critical moment, when energy poverty can be addressed, enhancing safety and self- reliance, and environmental degradation reduced or managed. In addition, planning for the energy needs arriving refugees will contribute to protecting individuals from risks, such as sexual and gender-based violence (SGBV), that often occur at night in unlit areas (latrines, washing zones, playgrounds, workshops) or while refugees search for firewood, and will help to reduce tension between refugee and host communities. Access to energy is also empowering, enabling women in particular to gain greater control over their lives and futures. UNHCR's Global Energy Strategy (2019-2024) promotes sustainable household energy technologies, including the expanded use of renewable energy, to minimize the environmental impact of operations in a way that is inclusive of host communities and other stakeholders while improving the protection and wellbeing of refugees.

Specific Objective: 30,000 refugees satisfy their energy needs for cooking and lighting in a safe and sustainable manner, without fear or risk to their health, well-being and personal security.

Expected Results:

- 30,000 refugees benefit from Fuel Efficient Stoves
- 6,000 refugees benefit from fuel supply for domestic use
- 30,000 refugee households have access to sustainable lighting at household and community level
- Refugee communities increase community awareness of environmental issues and methods for environmental and energy sustainability

Response

NCA aligns its response in energy and environment with UNHCR and the Inter-agency Response plan through the supply of fuel-efficient stoves and supply of fuel, and solar lanterns, to reduce environmental degradation, increase energy sustainability, and increase safety of refugee households.

Households will be supported with materials and tools to produce fuel efficient stoves and closely monitored for demonstrating the positive impacts to the refugee and host communities. Impacts on

time savings for collecting firewood, reduction in level of exposure to risk of SGBV and conflict incidents during collection, economical savings in fuel purchase (fire wood and/or charcoal) will be monitored and evaluated through the UNHCR Energy monitoring survey tools (UNHCR.2017). The fuel efficient stove technology provided will be adapted to the context, focusing on local material for building the stoves, as well as cooking uses and habits, to ensure the accessibility and dissemination of the technique. Active participation and involvement of the refugees will be integrated in all the activities for dissemination of fuel savings techniques and practices. Design and building of the stoves will be providing through training of trainers (members of the refugee and host communities trained as "energy ambassadors"). Fuel efficient stoves will be constructed at communal kitchens at the resettlement center as a model for new arrivals. The energy ambassadors will also engage households in sessions on environmental stewardship and energy sustainability. Refugee households will be provided with solar lanterns for household lighting. Solar lighting will be installed in select communal sites where lack of lighting increases vulnerability to SGBV and other risks. Lighting committees will be provided with maintenance kits and training to maintain solar lights.(See also next section on environmental stewardship tool)

Beneficiaries

See 5. BENEFICIARIES for a table on beneficiaries of the appeal.

D. Cross-cutting Issues

Gender

Both CAFOD and NCA have experience of carrying out gender assessments within the Sudan context. In 2019 CAFOD assisted NCA in carrying out a gender assessment in Darfur. In Eastern Sudan the NCA Gender Policies will be used as a reference document through all the phases of projects implementation. Due to the gender sensitivity of the GBV programme, NCA will be recruiting female staff to be able to meet the needs of female survivors and women and girls at risk. As women and girls are the ones tasked with fetching water, the WASH sector will consult with them on water distribution points and how to minimize risks of attack when they go to fetch water. Women will also be integrated into community structures for management of water resources and provision of sanitation and hygiene services. Similarly, there will be separate latrines for women and men, girls and boys. Vulnerable adolescent girls and pregnant women will be targeted with menstrual hygiene kits and clean delivery kits (CDKs) respectively. Gender analysis and analysis of barriers to inclusion of PwDs will be carried out to identify concrete barriers to inclusion of these underrepresented groups. Structural barriers that hinder women, youth and PwDs' effective involvement in humanitarian response will be addressed through the facilitation of community meetings and dialogue. Moreover, training on gender sensitisation and GBV mainstreaming included in programming to address the negative attitude towards the participation of women, men, boys and girls of all ages and abilities.

Child Protection and Code of Conduct

NCA will follow the ACT Alliance child protection (CP) policies to ensure children are protected and treated equally irrespective of race, religion, gender, age or abilities. NCA also follows the Code of Conduct for the International Red Cross and Red Crescent Movement and NGOs in Disaster Relief (CoC) for staff and partners with guidance on appropriate and expected standards of behaviour, including with children.

NCA will strive to ensure safety, inclusiveness and protection of children in camps and host communities. NCA will create awareness to staff, visitors and other stakeholders about child protection protocols to make sure that the wellbeing of children is secure and their right to access basic services is understood.

HIV/AIDS

Public awareness about the causes, means of spreading and preventative measures on HIV/AIDS will be shared amongst the targeted communities. NCA will continue to intentionally target the people affected by HIV/AIDS and refer to prevention of mother to child transmission (PMTCT) services to all pregnant mothers.

Finally, there will be continuous public awareness on HIV to reduce the stigmatization of effected populations. The GBV and harmful practices prevention and treatment services will be integral to the HIV/AIDs mainstreaming activities. HIV/AIDS awareness and treatment services will be improved, and more quality treatment and referral linkages will be established in Eastern Sudan.

Environment

Sudan faces a wide range of environmental, social and natural resource challenges including deforestation, land degradation, loss of biodiversity and habitat, pollution of air, land, and water, conflicts over diminishing natural resources, food insecurity and poor waste and sanitation services in crowded areas. Many of these issues are further exacerbated in refugee crises and humanitarian programming itself can cause environmental harm. NCA will conduct an environmental assessment at the start of the program to assess environmental risks of project activities and identify mitigation measures. The program will include environmental interventions from the startup, such as provision of fuel-efficient stoves and energy source, to help alleviate pressures on the environment. In all sectors, activities are designed with the environment in mind. There will be drainage ditches to support with water overflow also to help to avoid stagnant water; breeding grounds for mosquitos (malaria risk). In WASH, communities will actively participate in the latrine site selection to make sure there is a standard distance between water wells to avoid contamination of water sources from the latrine pits. To this, dry waste collection and disposal will be designed in accordance to the UNHCR Standards. Regular cleaning and awareness campaign are organized to sensitize communities and improve environmental hygiene.

Routines for handling waste, particularly hazardous waste, will be set up from the start of the response to ensure that NCA does not harm the local environment and the people and animals which live in the area of operation.

In procurement, the quality of items brought into the region, and how they are handled as waste, will be in focus. When possible durable and locally adapted solutions will be used, rather than bringing in items for which reverse logistics is very challenging or not possible.

CAFOD has developed an environmental stewardship tool for use in humanitarian contexts and will explore the opportunity of rolling this out in the project area in coordination with NCA.

Disability

People with disabilities are disproportionately affected in emergencies and experience particularly high rates of mortality in these contexts. Disabled people will be intentionally targeted to participate and benefit from all programme sector interventions. Effort will be exerted to construct latrines specifically for disabled people. Additionally, disabled beneficiaries will receive priority (not having to stand in queues) in accessing services. The WASH sector will ensure that all the WASH facilities will be accessible to disabled people- this including the latrines in schools and clinics.

Corruption

NCA is administrating entrusted funds and is accountable to both beneficiaries, as well as public and private donors, and has a zero-tolerance policy to all forms of corruption. NCA follows the ACT Alliance Anti-fraud and Corruption Policy, in addition to ensuring stringent measures for transparency and accountability. They include adherence to NCA's financial routines and guidelines which details risks mitigation and internal controls on how all financial transactions must be managed and adherence to NCA's procurement manual. NCA will ensure strong systems for monitoring in order to minimize any chances of fraud. All NCA Country Offices have a system for complaints handling. This complaints handling system ensures that NCA handles non-compliance according to law, ACT Alliance Code of Conduct and NCA Operations Manual or any form of misconduct or grievance in a responsible, predictable and just way, which minimises the risk of damage to individuals and/or the organisation.

Furthermore, NCA (as is CAFOD) is CHS certified and Sudan staff recently got training on the CHS feedback and complaints handling systems and will work with beneficiaries to address any issues that may arise through the programme implementation.

Capacity building of local partners

Following the closure of Sudanaid in 2011 there has not been a Sudanaid/Caritas in Sudan. This response is planned in Eastern Sudan where there are active Catholic and Lutheran parishes. CAFOD has an experienced Humanitarian Capacity Strengthening Unit with its own methodological approaches. CAFOD and NCA have been discussing with local churches the options for their active engagement in the response and CAFOD will offer capacity building expertise to local church partners should the opportunity arise.

3. ADVOCACY

The context in Eastern Sudan with regard to refugee displacements is still evolving. CAFOD and NCA will work together to advocate for durable solutions to the challenges faced by Ethiopian refugees. In light of the commitment by both agencies to support a localisation agenda and the fact that there is a local church presence in Eastern Sudan we will consult and support local church actors to articulate their concerns and perspectives about the humanitarian response and situation.

4. CONTINGENCY SCENARIOS

Risks the program faces include changes in context (for example a significant change in the population in need), a limited availability of funds, and insecurity. There is a likelihood that with sudden escalation of fighting in Tigray a large influx of refugees, fleeing the conflict, could pour over the border into Eastern Sudan (Ref Risk Management Matrix Annex)

There are currently 2 scenarios forecasted:

- 1. The refugees keep on traversing to Sudan in a slow fashion (100-300 persons/day), totalling approximately 60,000 people. This scenario is the current one, where 200-500 persons are crossing the border as of mid-December 2020. This scenario could change at any moment due to the confrontation in the area
- 2. There is a massive influx following confrontation in Tigray. (thousands of persons /day), totalling 200,000 refugees arriving rapidly.

NCA is planning for scenario 1 but maintaining flexibility in order to be ready should scenario 2 present itself. NCA is well plugged in to coordination groups and maintains good contact with UNHCR and other partners to be able to foresee changes in scenarios. In the event of scenario 2, NCA will coordinate well with other partners to ensure gaps are covered and increase communication of the emergency needs to rapidly fundraise for additional response. NCA will conduct all activities after assessment in collaboration with refugee community members. Thus, programming can adjust to fit new or different needs that are identified if necessary.

In the event that the appeal is not fully funded, NCA will reduce reach and targeting of programs across thematic sectors. NCA will prioritize providing lifesaving WASH activities in the critically needed areas of intervention. This will be done in coordination with UNCHR and other WASH agencies. and GBV response service and risk mitigation activities in line with Interagency Minimum Standards. Response services will need to be established before the prevention activities are to be implemented to do no harm. NCA will actively advocate for funding for GBV programming and encourage and build capacity of other GBV actors to implement GBV services safely in line with GBV Guiding Principles.

Please see Annex 5 Risk Matrix for further information.

5. BENEFICIARIES

5. a) Direct Beneficiaries

	Female Male				
SECTOR / AGE	Women	Girls	Men	Boys	Total
Water	7 095	5 805	9 405	7 695	30 000
Sanitation	3 548	2 903	4 703	3 848	15 000
Hygiene	7 095	5 805	9 405	7 695	30 000
Menstrual Hygiene	7 500	-	-	-	7 500
Total	7 095	5 805	9 405	7 695	30 000

	Female							
SECTOR / AGE	10-14	15-18	18-45	45 over	10-14	15-18	18-45	45 over
GBV	600	1100	1715	810	200	500	815	210
Total	1291	1791	2406	810	200	500	815	210
							Total	16 046

Female			Male		
SECTOR / AGE	Women	Girls	Men	Boys	Total
Energy and Environment	7 095	5 805	9 405	7 695	30 000
Total	7 095	5 805	9 405	7 695	30 000

Beneficiary Selection

The beneficiaries are refugees, and where applicable host communities affected by the crisis. Beneficiary selection will be done with UNHCR and relevant authorities in a safe, dignified and inclusive manner. Beneficiary targeting follows the demographic breakdown of the population, which includes a larger percentage of men and boys than women and girls (64 percent male and 36 percent female according to UNHCR Daily New Arrivals Updates.

BY sectors, selection criteria will be:

- Water Supply: no targeting will be done. All beneficiaries living within the distribution area will benefit from the activities.
- Sanitation: In collaboration with UNHCR, NCA will construct communal sanitation facilities. People living with disabilities, that will not be able to utilize those communal facilities will be given other options.
- Hygiene Promotion: General HP will be done at the community level for every person. However, where needed; specific targeting will be made (Pregnant mothers, schools, adolescents)
- Integrated GBV Psychosocial support: NCA will be prioritising all GBV survivor and all reported cases to NCA will receive care as in line with GBV principles and Minimum Standards. Women and girls of reproductive age and PLW will be targeted to reduce and prevent morbidity and mortality. Men and boys will be targeted in awareness activities to create an enabling and protective environment for survivors and those seeking healthcare services.

Energy and Environment: All beneficiaries living within the working area will benefit from the activities. However, supply of fuel source will be provided based on vulnerability targeting, adhering to sector criteria for vulnerability and/or with community consultation

5. b) Indirect Beneficiaries: N/A

5. c) Beneficiaries by Sector

S. C. Denencianes by Sector	
Food & nutrition	0
Water, sanitation, and hygiene	30 000
Shelter and non-food items	0
Health	0
Multipurpose cash transfers	0
Livelihoods	0
Protection ⁵	16 046
Education	0
Capacity building / training	0
Advocacy	0
Peace building	0
Other [Energy and Environment].	30 000

6. MONITORING, EVALUATION, ACCOUNTABILITY AND LEARNING

NCA's monitoring systems include field visits, indicator tracking, partner visits and meetings and reflective sessions. A minimum of two comprehensive field-monitoring visits by NCA staff is required each project per year, following a standard set of field monitoring questions. All monitoring visits must engage female and male rights-holders and other stakeholders as necessary. Debrief with partners is mandatory, and a follow-up plan must be prepared and filed in NCA's online archive. When the security situation does not allow field visits, NCA monitors remotely via telephone or SMS. NCA has also applied tested methods to verify monitoring data from partners in hard-to-reach areas within countries like Afghanistan (community remote monitoring) or Syria (third-party remote monitoring). NCA will hire a monitoring, evaluation and complaints officer who will be separate from the programme team to perform those functions in an independent manner. Additional monitoring will be done by members of the programme teams as relevant. The M&E officer will use NCA's standard M&E framework to measure indicators and will involve men and women beneficiaries and other stakeholders in the monitoring process. Data will be regularly analysed by the M&E Officer in collaboration with programme teams to inform programme decisions.

⁵"Protection", or stand-alone protection, refers to activities implemented in response to specific protection risks. Activities might include family tracing and reunification; interim care for separated or unaccompanied children; or referrals for GBV, psychosocial or legal services. This differs from protection mainstreaming which is an approach, not a sector, and which focuses on the way in which assistance is provided.

ACT Alliance/NCA has developed data driven PMER systems for monitoring and reporting in emergencies. As in other NCA lead refugee responses. A monitoring plan will be made for the program following the example of other NCA Humanitarian operations in Malawi⁶, Angola⁷ or Nigeria⁸, complemented by project-specific plans. Monitoring systems include field visits and indicators tracking. The project's team will be constantly in the project area to ensure day-to -day monitoring of the activities. All monitoring visits will engage female and male rights-holders and other stakeholders as necessary. Data is collected daily based on field reports and then visualized to be able to take decisions on real time.

The CAFOD office in Khartoum will also carry out monitoring visits to the programme site.

Evaluation: The project will undergo an Independent evaluation within the two months after the end of the project period and terms of reference will be developed in consultation with the Programme Governance Group.

NCA's evaluation policy made evaluations mandatory for all projects with yearly budgets above NOK 1 m, or with implementation of at least three years. The policy includes procedures for the establishment of steering groups and management's ownership of the follow-up after evaluations. All evaluations must adhere to the CHS standards. NCA annually undertakes a comparative analysis of evaluations to enhance organisational learning. This policy is currently under review, building on a wealth of valuable experiences drawn from implementing it.

Reporting Framework:

- 1st Quarterly narrative and financial report due by 01/05/2021
- 2nd Quarterly narrative and financial Report due by 01/08/2021
- Final narrative and financial Report due by 31/10/2021

Accountability and enhanced safety, dignity and accessibility of communities to aid

NCA and CAFOD are Core Humanitarian Standard CHS certified organisations, and the staff will be trained in accountability, specifically the feedback/complaints receiving mechanism, as well as other CHS core components. NCA will continue to involve communities throughout the entirety of its programming and will include specific mechanisms for complains and feedback depending on community consultations and preference (i.e. complaint boxes, complaint desk, etc.). CRM focal points from the community will also be trained and provided with incentives (i.e. airtime, stipend). NCA will share projects plans with affected communities and stakeholders and involve them to the extent possible in the whole project implementation cycle.

Sudan staff were recently trained on the CHS feedback and complaints handling systems. NCA will ensure a community-based complaint and response mechanism is established and operated. NCA will train and provide incentives to community CRM focal points. The CRM focal points will consult with different groups of community members, ensuring representation of marginalized/discriminated groups to identify preferred methods for complaint handling. CRM focal points will also feed information back to the community about response to complaints (of a general nature, without disclosing any information about complaints that could identify a complainant) and general information related to available services, timeframe and exit strategy. The program will work with

⁶

https://app.powerbi.com/view?r=eyJrIjoiNmQyMzIzM2MtN2UzZS00MmRmLTgzMTQtZGE2NTkwZDVhMTQ5IiwidCl6ImQ5ZGEyOTR iLTM2MDQtNGQ5Ni1hNDg3LTNhNjMyYTJiODdkMiIsImMiOjh9&pageName=ReportSectionc22e2fa04b3890747410

https://app.powerbi.com/view?r=eyJrljoiMWI0YjBmY2YtMWE1Ni00NWNkLWI1ZTAtMDMwMDIIYzIwM2ZlliwidCl6ImQ5ZGEyOTRiL TM2MDQtNGQ5Ni1hNDg3LTNhNjMyYTJi0DdkMilsImMi0jh9&pageName=ReportSection

https://app.powerbi.com/view?r=eyJrIjoiODU2YTc1MjUtNGlwMy00NDM1LTg5NjYtYmNiZGUwMDViNGFIliwidCl6ImQ5ZGEyOTRiLT M2MDQtNGQ5Ni1hNDg3LTNhNjMyYTJiODdkMiIsImMiOjh9&pageName=ReportSectioncbf20838148a60721871

WASH committees, Women's groups and parents and other local stakeholders- to inform the program and facilitate better understanding of the context and enable people and communities to express their feedback and complaints to management.

NCA is similarly committed to mainstream safety, dignity and access across all interventions. Interventions can safeguard wellbeing and dignity, but they can also put people at increased risk. It relates to the approach NCA takes in all programmes. It does not mean changing what is done but means one should think about how assistance is provided. This is essentially safe, good quality programming: it focuses on effective participation of targeted communities while considering gender, age, vulnerability and diversity (economic, social, cultural etc.). NCA respects and works with the principles of humanity, impartiality, neutrality and independence. Much effort is being made to ensure that all vulnerable men, women and children are eligible to receive humanitarian assistance, based on their prioritized needs and without discrimination.

Learning:

NCA facilitates cross-learning through Communities of Practice (CoP) consisting of practitioners and specialists from each CO, in addition to head office advisers. A GBV CoP was held at the end of 2019 that included learning on GBV in Emergencies. NCA will take learnings from its emergency interventions in WASH and GBV in recent operations such as in Borno state in Nigeria and Cox's Bazar, Bangladesh. NCA also takes learnings on energy and environment interventions from a UNHCR funded energy response in Angola. Since 2018, NCA has been a member of the ACTLearn partnership, which focuses on shared competence development activities. ACTLearn draws on the capacity of Dan Church Aid's Learning Lab. NCA is also developing several courses and webinars on topics ranging from security management to complaints handling and reporting. Human interest stories will be developed for publication across the websites of NCA, CAFOD, CI and ACT Alliance.

7. SUSTAINABILITY AND EXIT STRATEGY

NCA and CAFOD are both committed to the localization agenda of humanitarian relief. Key emphasis will be maintained on strengthening and utilizing the inherent localized capacities of the respective line ministries, the Catholic and Lutheran church and of the refugees themselves to ensure sustainability of the program after NCA exits. The Catholic and Lutheran Church are present in Eastern Sudan and both CAFOD and NCA will collaborate with the churches in strengthening their capacity to effectively respond and assist the refugees.

CAFOD will draw upon the expertise and tools of its Humanitarian Capacity Strengthening Unit and make these available to local church partners to conduct capacity self-assessments as a first step towards helping partners define any needs that the networks may be able to help them address.

The eight-month appeal will have a strong focus on the localization agenda and working with and through local existing structures such as government entities and local churches. There will be a strong focus on training and capacity development of refugees in areas such as maintenance of water points and solar lights through committees and non-clinical GBV and psychosocial response and prevention initiatives. The situation is fluid therefore a flexible approach towards longevity and scope of the program is needed.

Some of the materials deployed in the field in the WASH Sectors, once utilized for the emergency response are usually stored in the refugee settlement ready to be redeployed, should the need arise. This is the case of the Water Treatment Unit and to an expected the Emergency Latrines. When they will be not needed, NCA will keep them in the emergency stock in Khartoum, to be able to deploy them quickly again, should they be necessary.

NCA will develop an exit strategy in consultations with women and girls, community leaders and local authority to minimise harm and ensure the continuation of lifesaving GBV response services. As part

of the program design, NCA is building the capacity of local institutions to strengthen their responses services to GBV including case management, and mental health. In the event where NCA will need to close the One Stop Centre and Safe Spaces, NCA will identify GBV actors who will be able to continue to provide care to survivors whose casefiles are active and agree to be handed over to another actor.

8. COORDINATION

NCA and CAFOD plan an intervention to meet identified gaps in GBV, WASH and Energy and Environment Response. These gaps have been identified in coordination with the thematic sectors and working groups. For example, no other INGO partners have been included in the Energy and Environment Response in the Interagency Refugee Response Plan. Interventions in Eastern Sudan are coordinated by COR-UNHCR preparedness and response plan and its overarching assumptions and scenarios that are aligned to any existing plans by relevant Ministries. This includes both the various sectors' response at the camp level as well as the out-of-camp, rural and urban locations. At local level coordination is through sectoral working groups in the respective geographic locations. NCA participates in the various established sector Refugee Working Groups (RWGs) at the field level (i.e. WASH, GBV). NCA has also joined the PSEA taskforce. While remaining aware of its impartiality and neutrality, NCA will coordinate its efforts and activities with line ministries and government bodies to enable smooth implementation of activities and ensure sustainability where possible. NCA will also coordinate its efforts with other INGOs and NNGOs to ensure effective use of resources and synergism. Where advantageous/necessary, NCA will enter consortium partnership with other organisations to implement relevant identified projects.

Building on previous experience from Darfur NCA and CAFOD will establish a local governance mechanism (A Programme Governance Group) in Khartoum to oversee the programme and ensure network synergies. This mechanism will include the Country Representatives of NCA and CAFOD and representatives of local churches involved in the response will be invited to join in order to strengthen local ownership and provide their expert perspectives on the direction of the programme and wider implications. ToRs for the Programme Governance Group will be developed and shared with all members for endorsement and approval.

An MoU I under development outlining the roles of the Programme Governance group and its interface with the two secretariats. The objective of the MoU will be to set out the arrangements and respective roles and responsibilities of ACT Alliance, Caritas Internationalis, NCA and CAFOD in relation to the Programme and to ensure that support provided is maximised and well-coordinated and that the policies, accountability and reporting requirements of the two networks are properly complied with and that the arrangements honour the humanitarian imperative. Close coordination is envisaged between the two secretariats and NCA and CAFOD, both at national level in Sudan and at European level.

9. PROJECT MANAGEMENT AND CAPACITY

Management Capacity

NCA has a large programme in Sudan, with experienced finance, logistics and procurement, and technical personnel that will support the response in Eastern Sudan together with newly deployed personnel. The team working in Gedaref will receive extensive support both from the colleagues in Khartoum, but also from head office humanitarian, logistics, finance and sectoral-specific technical advisors. NCA is confident that the team will deliver a high level of compliance and accountability with the support and experience from other operations and from colleagues in Khartoum and Oslo. Management will be provided by the following key positions:

• Emergency Coordinator

- GBV Programme Coordinator
- WASH Programme Coordinator
- FIN/ ADMIN Coordinator
- CRM and M&E Officer
- Logistics Advisor

Respective Supporting staffs for the respective sectors,

Human Resources

- NCA has two experienced logistics staff in Khartoum who have extensive emergency response experience and who will support the team in Gedaref. They are currently hiring two logistics and procurement assistants to assist with the response in the East, one will be based in Gedaref and the other will be based in the capital. One experienced humanitarian logistician has been deployed from NCA's Emergency Roster to Gedaref. His team will consist of a logistics and procurement assistant (currently being hired) and a warehouse assistant (to be hired). Drivers will be hired or contracted according to the team's requirements. New NCA logisticians and drivers will be trained on the job.
- NCA has experienced GBV Advisors and GBV Program Manager who will provide technical oversight, supervision and coordination of the GBV activities in the community and Women's Friendly Space. To ensure the effective day to day management including monitoring of activities GBV Officers will be recruited. For the provision of case management and PSS appropriately trained social workers will be employed. Each centre will have two social workers. And for the provision of outreach services and community mobilisation, NCA will seek to empower community members and support in the ownership of the program. NCA will provide follow up supervision and monitoring to ensure that skill and knowledge of all in the Women's Friendly Space meet the Minimum Standards⁹ and Interagency Case Management Guidelines¹⁰.
- NCA has experience Emergency WASH Advisors and WASH experts who will provide technical oversight, supervision, and coordination of the WASH activities. To ensure the effective day to day management including monitoring of activities Infrastructure supervisors will be recruited, inducted into NCA Emergency work and other cross cutting issues as previously described)

Logistics

- The NCA Khartoum office has seven vehicles which will be used for movements and procurements in the capital, and for the first weeks of the response. Needs for the response in the East are currently being mapped to establish how many additional vehicles will be needed. These will most probably be rented.
- The Khartoum office has rented apartments that will be used for quarantine for staff entering Sudan from abroad that are headed to the East, and offices that can be used while in Khartoum.
- NCA will be using the offices of Zoa for the Gedaref team.
- NCA has signed an MOU with UNHCR in which the latter has agreed to manage imports into Sudan. UNHCR will also make space available in their rub halls in Gedaref for our WASH equipment.

CAFOD

• The CAFOD Khartoum office oversees a programme portfolio in White Nile State, North Darfur and Kordofan.

 ⁹ https://www.unfpa.org/sites/default/files/pub-pdf/19-200_Minimun_Standards_Report_ENGLISH-Nov.FINAL_.pdf
 ¹⁰ http://www.gbvims.com/wp/wp-content/uploads/Interagency-GBV-Case-Management-Guidelines_Final_2017.pdf

- The CAFOD Country Representative will be a member of the Programme Governance Group that will be set up to provide strategic oversight of the programme and ensure alignment with the joint ACT Alliance /CI appeal. Members of the local churches involved in the programme will be invited to join the governance group to strengthen local ownership and localisation of the response
- A Sudan based Programme Development and Funding Officer will coordinate reporting to the CI Network and liaise with NCA about technical support for the programme and coordinate external relations with CI members
- CAFOD will draw upon its technical expertise in humanitarian capacity strengthening, environmental stewardship and assessments and Safe, Accessible, Dignified and Inclusive (SADI) approaches to support the programme,

10. BUDGET: FINANCIAL OVERVIEW AND BUDGET NARRATIVE

Please see Annex 1 for the budget

Annex 1- Budget

CATEGORY	DONOR	Description	Q Unit	Unit Cost	Total cost	Total cost	Total cost
	·	v	* *	(NOK) 🔻	(NOK) 🔻	(EUR) 🔻	ACT/Carita
Support Personnel	ACT/Caritas Appeal	Project Responsible HO (7,5%,7 months, 1 staff)	7 months	65,000	34,125	3,212	3,212
	ACT/Caritas Appeal	Security Officer (20%, 7 months, 1 staff)	7 months	20,000	28,000	2,636	2,636
	ACT/Caritas Appeal ACT/Caritas Appeal	Accountant/Admin HR (100%, 7 months, 1 staff) Finance + Administration (10%, 7 months, 1 staff)	7 months 7 month	10,000 15,000	70,000 10,500	6,589 988	6,589 988
	ACT/Caritas Appeal	Supply Officer(100%, 7 months)	7 months	15,000	10,500	988	988
	ACT/Caritas Appeal	Drivers (100%, 7 months, 2 staff)	14 months	8,035	103,000	10,588	10,588
	ACT/Caritas Appeal	Purchase Assistant (100%, 7 months)	7 months	10,000	70,000	6,589	6,589
	ACT/Caritas Appeal	Cleaner (100%, 8 months, 1 staff)	8 months	5,000	40,000	3,765	3,765
	ACT/Caritas Appeal	Emergency Logistics Advisor (100%, 2 months)	2 months	100,000	200,000	18,826	18,826
	ACT/Caritas Appeal	Warehouse, Maintenance and Fleet Officer (100%, 8 months)	8 months	15,000	120,000	11,296	11,296
	ACT/Caritas Appeal	Drivers (100%, 8 months, 1 staff)	8 months	15,000	120,000	11,296	11,296
	ACT/Caritas Appeal	Country Director (5%, 3 months, 1 staff)	3 months	100,000	15,000	1,412	1,412
	ACT/Caritas Appeal	CAFOD Country Director (5% @8 months)	8 months			2,300	2,300
	ACT/Caritas Appeal	Program manager (20%, 3 months, 1 staff)	3 months	31,746	19,048	1,793	1,793
		CAFOD Programme Liaison and coordination (Khartoum)					
	ACT/Caritas Appeal	(25%)@8 months	8 months			7,967	7,967
	ACT/Caritas Appeal	CAFOD Finance Manager (10%)@8 Months	8 months			1,982	1,982
	ACT/Caritas Appeal	Finance Controller HO (10%, 4 months, 1 staff)	4 months	65,000	26,000	2,447	2,447
	ACT/Caritas Appeal	Finance Manager (30%, 4 months, 1 staff)	4 months	15,874	19,048	1,793	1,793
	ACT/Caritas Appeal	Emergency Logistics Advisor (100%, 3 months)	3 months	100,000	300,000	28,239	28,239
	CoS	Country Director (5%, 6 months, 1 staff)	6 months 6 month	100,000	30,000	2,824 847	
	CoS CoS	Finance + Administration (10%, 6 months, 1 staff) HO security advisor (20%, 6 months, 1 staff)	6 month	15,000 65,000	9,000 78,000	7,342	
	CoS	Program manager (20%, 6 months, 1 staff)	6 months	31,746	38,095	3,586	
	CoS	Security Officer (20%, 6 months, 1 staff)	6 months	20,000	24,000	2,259	
	CoS	Project Responsible HO (7,5%,6 months, 1 staff)	6 months	65,000	29,250	2,255	
	CoS	Accountant/Admin HR (100%, 6 months, 1 staff)	6 months	10,000	60,000	5,648	
	CoS	Supply Officer(100%, 6 months)	6 months	15,000	90,000	8,472	
	CoS	Purchase Assistant (100%, 6 months)	6 months	10,000	60,000	5,648	
	CoS	Finance Manager (30%, 3 months, 1 staff)	3 months	15,874	14,286	1,345	
	CoS	Logistics Assistant (100%, 3 months, 1 staff)	3 month	10,000	30,000	2,824	
	DCA	Drivers (100%, 6 months, 2 staff)	12 months	8,035	96,417	9,076	
Support Costs	ACT/Caritas Appeal	Guest House rent field	6 month	12,000	72,000	6,777	6,777
	ACT/Caritas Appeal	International travel (flights)	9 round trips	12,000	108,000	10,166	10,166
	ACT/Caritas Appeal	Office rent field	7 month	15,000	21,000	1,977	1,977
	ACT/Caritas Appeal	Office running cost and consumables	1 lumpsum	2,500	2,500	235	235
	ACT/Caritas Appeal	Per diem/other travel cost	13 month	7,000	91,000	8,566	8,566
	ACT/Caritas Appeal	Transportation of materiels to the field WASH + GBV	4 lumpsum	60,000	240,000	22,591	22,591
	ACT/Caritas Appeal	End of Year Evaluation	1 lumpsum 1 lumpsum	50,000	50,000	4,740	4,740
	ACT/Caritas Appeal ACT/Caritas Appeal	Computers and small IT equipment (tablets for data collection Freigth (plane and boat) of stock Materials	1 lumpsum	113,432 516,816	113,432 516,816	10,677 48,648	10,677 48,648
	ACT/Caritas Appeal	Field Visibility	1 lumpsum	20,000	20,000	1,883	1,883
	ACT/Caritas Appeal	CAFOD- Mobile phones; Communication-5%@8Months	1 lumpsum	20,000	20,000	476	476
	ACT/Caritas Appeal	CAFOD- Stationary 10% @8	1 lumpsum			667	667
	ACT/Caritas Appeal	CAFOD -Vehicle Running/rental Costs 20%@8Months	1 lumpsum			381	381
	ACT/Caritas Appeal	CAFOD- Travel Cost(Vehicle plus accommodation plu Subisten	1 lumpsum			5,714	5,714
	CoS	Airtime for phone and internet (6 months, 8 staff)	48 month/person	1,500	72,000	6,777	
	CoS	End of Year Audit NCA	1 lumpsum	10,000	10,000	941	
	CoS	International travel (flights)	18 round trips	12,000	216,000	20,332	
	CoS	Local transportation cost (100%, 1 locations)	1 lumpsum	24,000	24,000	2,259	
	CoS	Office equipment (1 new Field Locations)	1 lumpsum	50,000	50,000	4,707	
	CoS	Office rent field	6 month	15,000	18,000	1,659	
	CoS	Per diem/other travel cost	6 month	5,000	30,000	2,824	
	CoS	Visa for expatriate staff	9 person/month	1,000	9,000	847	
A	DCA	Containers 20" for transport and storage	5 pieces	15,000	75,000	7,060	
Outcome 3 Communities affected by crisis demonstrate improved hygiene practices and access life- saving WASH services appropriate and relevant to their immediate needs	NCA Reserve	Replenishment of Emergency Stock (Sanitation)	1 lumpsum	1,000,000	1,000,000	94,130	
	NCA Reserve	Replenishment of Emergency Stock (Water)	1 lumpsum	1,000,000	1,000,000	94,130	
	CoS	Borehole drilling, construction and equipment (Solar)	2 boreholes	537,692	1,075,383	101,226	
	CoS	Distribution of hygiene kits (See KIT BOQ, to follow))	5000 household	250	1,250,000	117,663	
	CoS	Hygiene Promotion campaigns (See HP BOQ, to follow)	1 lumpsum	10,810	10,810	1,018	
	CoS	Redynamization of WASH Committees	10 comm	2,000	20,000	1,883	
	CoS	Training GBV teams on Hygiene Promotion (See HP BOQ, to fo	3 Training	3,268 500	9,803	923 518	
	CoS CoS	Water point attendence survey	11 person/point 1 lumpsum	40,733	5,500 40,733	518 3,834	
	Cos	Cleaning community campaigns (one b ymonth) Thematic support HO (30%, WASH expert in HO)	3 months	40,733	40,733 58,500	3,834 5,507	
	CoS	Infrastructure Supervisor 1 and 2 (100%, 6 months)	12 months	25,864	310,366	29,215	
	CoS	M&E and CRM (100%, 3 months)	3 months	25,864	67,283	6,333	
	DCA	Materials for WASH Emerengy Response	1 lumpsum	307,729	67,283	28,967	
	DCA	Construction/ rehabilitation of latrines and showers in Wome	2 block	28,441	307,729	28,967 5,354	
		conservencióny renavintation or latimes difu snowers in wome			56,882 80,000		7,530
		Infrastructure Supervisor 1 and 2 (100% 2 months)	4 months				1.550
	ACT/Caritas Appeal	Infrastructure Supervisor 1 and 2 (100%, 2 months)	4 months	20,000		7,530	
	ACT/Caritas Appeal ACT/Caritas Appeal	Emergency Coordinator (100%, 1 months)	1 months	100,000	100,000	9,413	9,413
	ACT/Caritas Appeal ACT/Caritas Appeal ACT/Caritas Appeal	Emergency Coordinator (100%, 1 months) Emergency WASH expert. (100%, 3 months)	1 months 3 months	100,000 100,000	100,000 300,000	9,413 28,239	9,413 28,239
	ACT/Caritas Appeal ACT/Caritas Appeal	Emergency Coordinator (100%, 1 months)	1 months	100,000	100,000	9,413	9,413

			-	1				
Outcome 4 SGBV Survivors access life-saving,								
specialized SGBV services appropriate and								
relevant to their immediate needs	ACT/Caritas Appeal	Risk Reduction materials and emergency cash/ or materials fo	800	personnes	350	280,000	26,356	26,356
	ACT/Caritas Appeal	Training of Healthcare Professionals on GBV Basic Concepts ar		personnes	1,689	84,453	7,950	7,950
	ACT/Caritas Appeal	Community Healthcare Network to provide education, referra		lumpsum	191,500	383,000	36,052	36,052
	ACT/Caritas Appeal	GBV programme stationary		lumpsum	71,117	71,117	6,694	6,694
	ACT/Caritas Appeal	Provision of material and equipment to community structured		lumpsum	21,080	84,320	7,937	7,937
	ACT/Caritas Appeal	Mother and Baby Kits to be distributed to PLW		person	350	385,000	36,240	36,240
	ACT/Caritas Appeal	Personnel costs for 2 safe spaces (100%, 8 months, x3staff)		months	7,000	336,000	31,628	31,628
	ACT/Caritas Appeal	Personnel costs for 2 safe spaces (100%, 2 months, x3staff)	12	months	7,000	84,000	7,907	7,907
	ACT/Caritas Appeal	Legal support services and capacity development	8	months	35,000	280,000	26,389	26,389
	ACT/Caritas Appeal	Stationary and Equipment for one Women Friendly Space	7	month	40,000	280,000	26,356	26,356
	ACT/Caritas Appeal	GBV Officer (100%, 2 months) SITE1	2	months	20,000	40,000	3,765	3,765
	ACT/Caritas Appeal	GBV Officer (100%, 8 months) SITE2	8	months	20,000	160,000	15,061	15,061
	ACT/Caritas Appeal	Emergency Coordinator (100%, 1 months)	1	months	100,000	100,000	9,413	9,413
	ACT/Caritas Appeal	Emergency GBV expert. (100%, 4 months)	4	months	100,000	400,000	37,652	37,652
	ACT/Caritas Appeal	Emergency GBV expert. (100%, 3 months)	3	months	100,000	300,000	28,239	28,239
	ACT/Caritas Appeal	Personnel costs for 2 safe spaces (100%, 3 months, x3staff)	18	months	7,000	126,000	11,860	11,860
	ACT/Caritas Appeal	MHPSS Officer (100%, 8 months) SITE2	8	months	20,000	160,000	15,061	15,061
	ACT/Caritas Appeal	Emergency GBV advisor. (100%, 4 months)	4	months	100,000	400,000	37,652	37,652
	CoS	GBV Basic Concept Training and Safe referrals to WASH actor a	20	personnes	3,124	62,483	5,882	
	CoS	GBV case management (direct assistance to survivors)		month	914	10,968	1,032	
	CoS	GBV programme stationary	1	lumpsum	71,117	71,117	6,694	
	CoS	Outreach and Community mobilisation i.e. community conver		lumpsum	191,500	191,500	18,026	
	CoS	Provision of structured PSS sessions to Women and Girls		personnes	1,004	301,182	28,350	
	CoS	Provison of recreational activities to women and girls i.e sewin		person	1,013	10,129	953	
	CoS	Safety audits and risk mitagation activities and strategies led b		lumpsum	12,130	24,261	2,284	
	CoS	Training of Case workers on Case Management and PSS		personnes	1,689	33,781	3,180	
	CoS	Training of Community Volunteers and Leaders on GBV Basic O	60	personnes	1,107	66,434	6,253	
	CoS	Thematic support HO (30%,GBV/MHPSS expert in HO)		months	65,000	58,500	5,507	
	CoS	GBV Officer (100%, 6 months) SITE1		months	27,428	164,566	15,491	
	CoS DCA	M&E and CRM (100%, 3 months) Design and distribution of IEC materials on GBV prevention an		months lumpsum	22,428 69,028	67,283 69,028	6,333 6,498	
Outcome 7 Refugees satisfy their energy needs for cooking and lighting in a safe and sustainable manner, without fear or risk to their health,								
well-being and personal security	ACT/Caritas Appeal	Energy and environment sessions	1	lumpsum	5,300	5,300	499	499
	ACT/Caritas Appeal	Training of enumerator for safe environment study	20	person/day	173	3,459	326	326
	ACT/Caritas Appeal	Incentives of enumerator for the safe environment study	20	person/3 days	389	7,783	733	733
	ACT/Caritas Appeal	Storage for fuel source	10	lumpsum	6,000	60,000	5,648	5,648
	ACT/Caritas Appeal	Fire prevention	50	kit	300	15,000	1,412	1,412
	ACT/Caritas Appeal	FES construction kits	30	kit	1,000	30,000	2,824	2,824
	ACT/Caritas Appeal	Materials for FES	5000		40	200,000	18,826	18,826
	ACT/Caritas Appeal	Communal kitchen FES in reception center	2	unit	8,000	16,000	1,506	1,506
	ACT/Caritas Appeal	Building communal kitchen FES in reception center		days	400	12,000	1,130	1,130
	ACT/Caritas Appeal	Emergency Coordinator (100%, 1 months)	1	months	100,000	100,000	9,413	9,413
		CAFOD Technical Support inc environment/capacity building						
	ACT/Caritas Appeal	(visit or remote regional support over 8 mths)		lumpsum			6,500	6,500
	ACT/Caritas Appeal	Infrastructure Supervisor 3, Energ Env (100%, 2 months)		months	20,000	40,000	3,765	3,765
	ACT/Caritas Appeal	M&E and CRM (100%, 2 months)		months	15,000	30,000	2,824	2,824
	ACT/Caritas Appeal	Incentives to CRM focal points (airtime, stipends - 6 months)		person	2,497	24,971	2,351	2,351
	ACT/Caritas Appeal	Training of staff on financial management, procurement polici		lumpsum	4,324	4,324	407	407
	CoS	Consumables (banners, complaint boxes, visibility for CRM for		lumpsum	21,620	21,620	2,035	
	CoS	Incentives to CRM focal points (airtime, stipends - 6 months)		person	2,497	24,971	2,351	
	CoS	Training of CRM focal points	10	person/day	113	1,132	107	
Indirect Costs	ACT/Caritas Appeal	Indirect costs to CAFOD from Caritas agencies - est 5% on half of Appeal funded by Caritas	1	lumpsum			19,430	19,430
	A CT / Comites -	Indirect costs to NCA - est 5% on half of Appeal funded by	.					
	ACT/Caritas Appeal	ACT		lumpsum lumpsum	6,077,300	425,411	19,430 40,122	19,430
		Indirect cost NCA in SIDA 70/						
	CoS	Indirect cost NCA in SIDA 7%						
IFE	CoS DCA	NCA Indirect cost to DCA 7% in "Total Direct Costs"	1	lumpsum	605,056	42,354	3,987	
ICF	CoS DCA CoS	NCA Indirect cost to DCA 7% in "Total Direct Costs" ICF from ACT members 3%	1	lumpsum lumpsum			3,987 12,810	
ICF Grand Total	CoS DCA	NCA Indirect cost to DCA 7% in "Total Direct Costs"	1	lumpsum			3,987	816,040

*Contribution from ACT alliance members are subject to ICF of 3%.

SUMMARY						
	COSTS			TOTAL BUDGET LOCAL CURRENCY	TOTAL BUDGET EURO	
Α	PROGRAMME COSTS				1,307,979	83%
В	SUPPORT COSTS				170,904.68	11%
C	ADMINISTRATIVE COSTS F	RECOVERY		-	97,438.81	6%
	GRAND TOTAL A+B+C			-	1,576,322.69	100%
Total budget requested ACT/Caritas	816,040					

		Baseline Data	(figures only)	Year and	Targets (fig	gures only)		
Expected Results	Indicators	- Data	(ingures only)	month of last data collection	Year 1		Sources of verifications	Explanations of achievements and comments
		Women	Men		Women	Men		
pecific objective to the WASH department								
Communities affected by crisis demonstrate improved hygiene ractices and access life-saving WASH services appropriate and elevant to their immediate needs	3: # of women, girls, men and boys reached with WASH services	N/A	N/A	N/A	14,100	15,900	KAP survey Daily water consumption reports. Monitoring Reports M&E Dashboard	
Results				<u> </u>				
tesult 3*: Communities and women, men, boys and girls affected by mergency crises receive life-saving WASH assistance appropriate and elevant to their immediate needs	# of people affected by crisis reached by WASH response of NCA humanitarian responses(New IDPs, Refuges)	N/A	N/A	N/A	14,100	15,900	KAP survey Daily water consumption reports. Monitoring Reports M&E Dashboard	
Dutput 3.1 Vomen, girls, men and boys are enabled to improve hygiene practices nd have access to hygiene items to protect against WASH related ealth risks	3.1.1: % of targeted women, girls, men and boys who report that they wash hands with soap at least at 3 critical times	N/A	N/A	N/A	70%	70%	KAP survey Post Distribution Monitoring Reports M&E Dashboard	
	3.1.2: % of targeted affected households where soap and water are available for handwashing	N/A	N/A	N/A	70%	70%	KAP survey M&E Dashboard	
	3.1.3: % of women, girls, men and boys who report satisfaction with hygiene materials	N/A	N/A	N/A	65%	65%	KAP survey Post Distribution Monitoring Reports M&E Dashboard	
Dutput 3.2 Women, girls, men and boys access safe, appropriate and hygienic anitation services, including environmental sanitation (i.e. excreta nanagement, waste management, vector control)	3.2.1: # of women, girls, men and boys with access to safe, user-friendly and gender appropriate sanitation facilities and/or services	N/A	N/A	N/A	7,050	7,950	KAP survey Infrastructure Construction Mapping Monitoring Reports M&E Dashboard	
Dutput 3.3 Vomen, girls, men and boys access safe, equitable and sustainable quantity of water for drinking, cooking, and personal hygiene	3.3.1: # of women, girls, men and boys with safe, equitable and sustainable access to a sufficient quantity of safe water for drinking, cooking and personal hygiene	N/A	N/A	N/A	14,100	15,900	KAP survey Daily water consumption reports. Monitoring Reports M&E Dashboard	
Dutput 3.4 Women and girls of reproductive age, and women, girls, men and boy: with incontinence, have access to appropriate hygiene supplies and WASH facilities that support their dignity and well being.	3.4.1: % of targeted women and girls of reproductive age with access to appropriate materials and information ensuring dignified menstrual hygiene management	N/A	N/A	N/A	75%	N/A	KAP survey Post Distribution Monitoring Reports M&E Dashboard	
	3.4.2: % of women and girls of reproductive age who are satisfied & feel safe when using the WASH facilities during menstruation	N/A	N/A	N/A	75%	N/A	KAP survey Post Distribution Monitoring Reports M&E Dashboard	
ctivities result 3	Brocurement of 5 truckloads (20 m3) per day and treatment (HTH) of 100 m3 water to Refugee Settlements Bonstruction, operation, and maintenance of 7 water storage tanks and Water collection points RS (communal and institutional) ITraining of selected refugees's in water treatment (Chlorination) Behabilitation/constructions of 2 water supply systems (solar powered) in Hamdayet and Ludgi Bonstruction and maintenance of community and institutional sanitation facilities (600 latrines, 600 shower and 40 laundry stations) in Hamdayet and Ludgi. Bonstruction and maintenance of Solid Waste Management facilities (rubbish containers and pits, tractor trips) in Hamdayet and Ludgi. Bonstruction and maintenance of Solid Waste Management facilities (rubbish containers and pits, tractor trips) in Hamdayet and Ludgi. Borstruction of communal and institutional cleaning campaigns in Hamdayet and Ludgi. Bigranization of communal and institutional cleaning campaigns in Hamdayet and Ludgi. Bistribution of basic 1000 HH WASH NFI (buckets, soap, MHM Materials) Byglene promotions campaign (monthly) with refugees hyglene volunteers (500Ref/Hyg Prom)							

		Targets (figures only)							
Expected Results ¹	Indicators ²	Baseline Data (figures only)		Ye	ar 1		Sources of verifications	Explanations of achievements and comments	
			Women	Girl	Воу	Men			
Specific objective									
GBV Survivors, and women adn girls at risk access lifesaving specialised services relevant to their immediate needs	# of survivors access services	N/A	N/A	N/A	N/A	N/A	GBV Information Management GBV Case Management Files	NCA will provide the numbers of Survivors who have access the services at the end the project	
Output 4.2 GBV survivors safely access quality survivors-centred ment. healthand psychosocial support focsed on healing, empowerment and recovery	% of GBV and healthcare staff trained to provide quality age appropriate MHPSS with increased knowlegde	0	25			25	Training Reports Attendance Forms		
	# of women and girls using MHPSS services	0	500	500	0	0	Attendance Form Activity Reports Registery		
	% of GBV social workers/case workers after training meet 80% of criterian for attitudes, knowledge, and skills required to provide quality GBV case managment services	0	I	8	0%	1	Training Reports Attendance Forms		
Output 4.3 GBV survivors access appropriate, quality case managment services including coordinated care and support to navigate avaliable servces	% of locations with updated operational referral pathways	0%		8	0%		Service Mapping Report Service Audits Reports Health records and reports Health Evaluation at the end of each year		
	# of women and girls who recive dignity kits and/cash and voucher assistances	-	1,000	500			Distribution List		
	# of women and girls using women and girls safe spaces to meet their needs (e.g. attending one cycle of recreational/ psychosocial sessions)	0	1,000	700	0	0	Attendance Form Activity Reports Registery		
Output 4.4 SGBV programming address harmful social norms and systematic gender inequality and inform communities about available services	# of women, men, boys and girls reached through outreach activities	0	1500	1000	500	1000	Outreach Report Attendace form		
Activities	* Establishing and Construction of Women-Friendly Space *Training of Social Workers/ Case workers on Case Manage *Distribution of dignity kits and GBV mitigation materials 1 *Prepare IEC material for prevention of GBV *Provision of Psycho-Education sessions to women and gir *Provision of Iife skills and recreational materials to wome *Training of community volunters and outreach workers o Community Mobilisation and Engagement activities in th	ement, PFA, Carin to women and gi Is en and girls n GBV Basic Cone	ng for Child Surviv rls cept and Safe Refe	rrals				t of women support groups	
*Please note outout numbering is not sequential, but follows NCA coding		,		J			,		

		Baseline Data (figures only)			Targets (figures only) Year 1				
Expected Results	Indicators ²			Year and month of last			Sources of verifications	Explanations of achievements and comments	
		Women	Men	data collection	Women	Men			
Specific objective 7*: Energy and Environment	1								
Refugees satisfy their energy needs "for cooking and lighting in a safe and sustainable manner, without fear or risk to their health, well-being and personal security"	# of people reached with safe access to fuel and energy	N/A	N/A	N/A	14,100	15,900	Distribution records UNHCR Energy Monitoring Survey Tool		
Results		•					•		
Result 1: Refugees benefit from fuel efficient stoves (FES)	# of people reached with fuel efficient stoves (FES)	N/A	N/A	N/A	14,100	15,900	Distribution records		
Activities Result 1	 Activate a network of "energy ambassadors" to raise awareness on energy efficiency Train the energy ambassadors" on how to build and maintain FES Provision of materials and tools for FES Construction of FES at communal kitchen at resettlement center Energy intervention monitoring for access to appropriate and sustainable cook stoves and fuel supply 								
Result 2: Vulnerable refugee households benefit from fuel supply for domestic use	# of people reached with fuel supply for domestic use				2,820	3,180	Distribution records		
Activities result 2	 Provision of fuel for domestic use to vulnerable households according to vulnerability criteria 								
Result 3: Refugee households have access to sustainable lighting at household and community level	# of households reached with sustainable lighting				14,100	15,900	Distribution records		
Activities result 3	•Solar lighting at selected communal sites •Provision of solar light maintenance kits •Provision of portable solar lamps to HHs						1		
Result 4: Refugee communities increase community awareness of environmental issues and methods for environmental and energy sustainability	# people reached through educational outreach on energy and environment				2,820	3,180	Training reports Outreach Report		
Activities result 4	•Energy and environment outreach sessions conducted by energy ambassadors on use of solar lamps, fuel efficiency, etc.			ı I					
*Please note outout numbering is not sequential, but follows NCA coding									

EASTERN SUDAN REFUGEE RESPONSE

TIMEFRAME : 01/01/2021 to 31/08/2021

PROGRAMME TITLE: Humanitarian Response to Ethiopian Refugees in Eastern Sudan

		IMPLEMENTATION						REPORTING			
			(2021)							KEPU	KTING
Activities	Description	J	F	М	Α	М	J	J	Α	S	0
Administration	Process of HAC technical agreement										
	Budget coding										
Logistics	Preparation and submission of procurement plan										
	Preparation and submission of PRs										
Operational	Community mobilization and sensitization										
	Mapping and assessment										
	Training of staff on financial and procurement policies										
	Training of CRM focal points										
Activities											
WASH	Borehole drilling, construction and equipment (Solar)										
WASH	Rehabilitation/expansion of water points										
WASH	Physical and chemical analysis of water solutions to guarantee water potability for human consumption										
WASH	Redynamization of WASH Committees										
WASH	Water point attendence survey										
WASH	Community participation to the design and construction of HH and communal latrines										
WASH	Construction/ rehabilitation of latrines and showers in Women and Girls safe spaces										
WASH	Cleaning community campaigns										
WASH	Construction of waste disposal pits including small scale waste management system										
	Distribution of hygiene kits										
WASH											
WASH	Hygiene Promotion campaigns										
WASH	Mobilizing and training Hygiene promotion community based volunteers										
WASH	Training GBV teams on Hygiene Promotion										
WASH	Hygiene promotion sessions										
WASH	Distribution of MHM										
GBV	Construction and Establishment of One Stop and Community Centre										
GBV	Establishment and Strengthening of Referral Pathway										
GBV	Training of Social Workers on Case Management										
GBV	Training of Community Volunteers on GBV Core Concepts, PFA and Safe Referrals										
GBV	Provision of GBV Services										
GBV	Distribution of Dignity Kits										
GBV	Provision of Psy-Education and Life Skills										
GBV	Provision of recreational activities										
GBV	Community Mapping and Safety Audits										
GBV	Establishment and Strengthening of Referral Pathway										
GBV	Training of Healthcare workers on Psychological First Aid										
GBV	Community Outreach and Mobilisation										
GBV	Identificationand Emergency Referrals										
GBV	Distrbution of Mother and Baby Kits										
GBV	Distribution of Clean Delivery Kits										
Energy and Env	Train enumerators for environmental assessment										
Energy and Env	Environmental assessment										
Energy and Env	Mobilization and training of energy ambassadors										
Energy and Env	Construction of FES at communal kitchen										
Energy and Env	Provision of FES building kits										
Energy and Env	Provision of fuel source										
Energy and Env	Provision of HH solar lamps										
Energy and Env	Installation of solar lighting at select communal points										
Energy and Env	Distribution of solar lighting maintenance kits										
Energy and Env	Energy and environment sessions										
Energy and Env	Participate in the monthly Coordination cluster sector Meetings at Kassala and Khartoum levels										
Monitoring,Communic											
ations,Reporting											1
	Conduct regular monitoring visits										
	Communication and visibility										1
	Final Evaluation										
	Quarterly Reporting										
			-								
	Final reporting										

S/N	Annex 5 Risk Description	Impact	Likelihood	Risk level	Mitigation
1	Security issues impede the implementation of programming	Major	Likely	High	 Continual contextual security analysis Updates from UNDSS Staff Safety measures
2	Attacks on aid workers, harassment, intimidation and fighting between different ethnic groups in camps	Major	Likely	Medium	 Conduct risk assessment with regards to activities, Staff training on personal security.
3	NCA/partners capacity to respond to refuges needs in the camps is overwhelmed by scale and speed of mass influx	Major	Likely	High	 Preposition relief stock Advocate to the government for more land to camp the refugees. Have a clear role and responsibility in the coordination and response to the refugees
4	Rainy season makes roads to refugee camp site inaccessible; affect completion of construction works such as latrines	Major	Likely	Very High	 Preposition relief stock on site/nearby locations Advocate to government/UNOPS to grade and compact access roads to the refugee camp sites.
5	NCA and partner staff sexually harass/abuse beneficiaries/local people	Major	Possible	Low	 Provide awareness raising and training on code of conduct and establish CRM
6	NCA/partners activities generate environmental damage.	Major	Possible	Medium	 Community hazard and risk assessment is part of program design.
7	COVID-19 adversely affect response capacity	Major	Likely	Very High	 Consider Market based approaches Implementation of strict COVID-19 and health protocol
8	Foreign exchange rate fluctuation. Devaluation of SDG vs USD. Banking business under pressure	Major	Likely	High	 Adjusting operational budgets, procurement procedures. Salaries paid in USD
9	NCA and/or partners not able to manage finances properly or corruption occur	Major	Minor	Low	 Strict follow-up of financial routines and regulations of both NCA and partners; continued monitoring of project finances; capacity building of NCA and partners staff; NCA accompaniment with partners in relation to future financial reporting.