

UNICEF HUMANITARIAN ACTION UPDATE

SUDAN

13 March 2009

Urgent Needs for Children and Women Affected by the Suspension of Activities of Major NGOs in North Sudan



PREAMBLE

UNICEF is working with government and remaining non-government partners to address immediate gaps in provision of life-saving services, following the suspension of 16 non-governmental organizations by the Government of Sudan.

This immediate response is designed to ensure that the most urgent needs of the affected populations can be met, over the next three months.

In the context of humanitarian and development work in Sudan, three months is a very short time period; the impact of the absence of critical NGO partners, and the resulting loss of key capacities, will continue to be felt well beyond this period - for example in vital nutritional surveillance programmes in Darfur during the annual hunger gap, in ensuring sustainable water treatment and testing during the rainy season, and in the overall quality of service delivery - all areas where the suspended NGOs played an irreplaceable role.

In the interim, UNICEF will strive to ensure that basic services are met wherever possible, but does not have the capacity or resources to implement all the programmes that would have been provided by the suspended organizations.



1. ISSUES FOR CHILDREN

The International Criminal Court (ICC) issued an arrest warrant for President Omar al-Bashir of Sudan on 4 March 2009, citing charges of crimes against humanity and war crimes. The Government of Sudan has dismissed the charges and expressed no intention of presenting President al-Bashir for trial.

Following the ICC announcement, the government revoked licenses of 13 international NGOs – OXFAM, CARE, MSF-Holland, Mercy Corps, Save the Children (UK), the Norwegian Refugee Council, the International Rescue Committee, Action Contre la Faim, Solidarites, CHF International, Save the Children (US), MSF-France and Padco – requesting these NGOs to immediately cease operations in the north of Sudan, to hand over assets and for international staff to leave the country. Activities of three national NGOs were also suspended. So far NGOs working in Southern Sudan have not yet been significantly affected by these decisions.

Reaction by the government towards aid agencies had been expected and had been addressed in UNICEF's contingency planning, but the extreme scale of the government response had not been anticipated. Most of the NGOs whose licences have been revoked are key implementing partners of UNICEF in the north of Sudan. The biggest impact will be in Darfur, where a major humanitarian crisis is ongoing with 2.7 million people displaced, for whom these NGOs have been providing life-saving humanitarian services especially in WASH, Health and Nutrition. The expulsion of these NGOs makes it likely that there will be a reduction in the humanitarian workforce in Darfur by about 40 per cent. As a result, life-saving services for an estimated up to 1.5 million people are feared to be interrupted.

The impact will be also felt in non-Darfur states – South Kordofan, Red Sea, Blue Nile and Kassala States and Abyei, due to their political sensitivities and the low capacity of the government sector, which have strongly relied on NGOs for vital services as well as development activities. The suspension of activities of the NGOs will seriously affect reconstruction efforts in Abyei urgently needed to stabilise the region following the conflict in 2008. In southern Blue Nile, NGOs were providing vital services for recent returnees, filling the gaps in government capacity.

Disrupted health/nutrition services and general food distribution are feared to exacerbate malnutrition levels among children and many malnourished children may not have access to nutrition and health services during the approaching hunger gap season, which starts in April. The annual floods season starts in May, and preparedness activities to prevent/minimize cholera/Acute Watery Diarrhoea outbreaks and response capacity will be severely hampered with the departure of the key NGOs. For many children the school year starts in April, as such a small window exists to maintain continued education for the affected children.

The UN agencies reaffirmed in a statement on March 8, 2009 of “their commitment to do everything possible to cover the most pressing and critical gaps caused by this suspension during the coming days” adding that “neither this commitment nor remaining capacity on the ground is sufficient to meet the humanitarian needs in the long run,” and urged the government to reconsider the decision. UNICEF has undertaken a rapid impact assessment to identify temporary stop-gap measures for life-saving services, and in line with a UN Country Team decision, joint assessments with the government have started but it may take some time for a final consensus on the gaps and strategies to be reached. Interim measures could include government or remaining NGO partners taking over some key services, including provision of water and sanitation facilities, health service delivery and nutrition programmes. However, a number of areas are not accessible by the government and capacity of both the government and remaining NGOs are insufficient to continue filling the gaps in a long-run.

2. UNICEF RESPONSE: ACTIVITIES, ACHIEVEMENTS, AND PLANNED ACTIONS

Water, Sanitation and Hygiene (WASH)

Issues

- The closure of the NGOs will have significant impact on water supply, sanitation and hygiene services for about 1.16 million persons across northern Sudan, and will contribute to increase in morbidity and mortality especially of the vulnerable populations, especially children and women. Currently, most IDP locations have water supply at SPHERE standards (15 ltrs person/day) and sanitation coverage at around 60 per cent. However, recently displaced populations of an estimated 100,000 people also require new water supply and sanitation services. 32 locations where the suspended NGOs were partly or fully responsible for WASH programmes will be affected as they providing all fuel, spare parts and operation and maintenance support. If there is no fuel or spare parts, water schemes cannot be operated and there will be no water supply in these areas.
- Motorized pumps supplying water to 32 IDP and host locations, serving over 1 million people in Darfur, will stop in a few days due to lack of fuel and lubricants and personnel after the expulsion of the NGOs unless alternative management and channels for consumables can be identified within the next few days. Current fuel stocks on site are available only for a week and in some cases only for two or three days. After immediate assessments, UNICEF, the government and other available NGOs have been mobilized to support fuel for one or two weeks, by which time alternative management and support systems must put in place.
- While the government’s State Water Corporation and remaining NGOs can fill some of the gaps, particularly fuel and spare parts in a short term, there is not enough capacity and financial resources to provide all WASH activities. UNICEF, as the cluster lead and provide of last resort, has the responsibility to fill these gaps immediately and continue until short and long term solutions are put in place.
- Some of the areas are not accessible by the government and remaining NGOs will not have the capacity to expand operation in those areas. UNICEF will have to support these areas through the private sector or directly providing support to community using community structures and WASH committees.
- In the past two years, coordinated actions by all partners in the WASH, Health and Nutrition Sectors have successfully contained outbreaks of diarrhoea in Darfur – for the last two years there has been no outbreak of cholera or acute watery diarrhoea in Darfur as a result of intensive continuous hygiene education along with the provision of water supply, sanitation and soap. Unless water supply and sanitation services are maintained with continuous hygiene education, which will be challenging with reduced capacity and less funding, this progress will be undone.
- Water quality monitoring was primarily undertaken by government with UNICEF support. However, many NGOs also complemented the water quality monitoring, particularly in areas, where government staff cannot access. It will be an additional burden on existing NGOs or for UNICEF to take this responsibility in the current situation.
- Due to the seasonal hot water seasonal period now beginning, demand for water will be high in all IDP camps.

Actions

- Provision of safe drinking water through operation and maintenance of water supply facilities including chlorination and water quality monitoring at 32 locations and strengthening of community-based WASH committees, through available government and NGO partners or in their absence by direct UNICEF implementation. While immediate critical needs have been mapped, the ongoing national government and UN joint mission will provide further direction and guidance on who will do what.
- Construction 350 latrines for IDPs displaced by recent fighting and rehabilitation of 3,000 latrines, through available government and NGO partners or in their absence by direct UNICEF implementation. The high risk areas in terms of disease outbreak will be identified and prioritized for implementation. Emerging needs will also be considered alongside implementation.
- UNICEF may be required to support the government State Water Corporations to engage additional technical support in the interim for deployment in areas where they can gain access. In addition, international technical experts can be obtained by UNICEF quickly if funds are available. The state governments are not in a position to provide immediate resources.
- Support to delivery of hygiene and sanitation campaigns, including soap distribution, through available government and NGO partners or in their absence by direct UNICEF implementation.
- Existing and pre-positioned supplies will be immediately used to respond to these needs, as WASH supplies have already been pre-positioned. Once the funds are available, the supplies will be procured and replenished. All supplies will be monitored and accounted with the good system that is already in place at national and state levels.
- All WASH interventions will be monitored regularly by UNICEF at field and Khartoum levels. In addition, joint monitoring will be undertaken with the Ministry at Khartoum level to ensure the interventions are carried out timely and required quality and making the impact to the children and women.

Health and Nutrition

Issues

- Up to an estimated 1.5 million people, both IDPs and host communities will be affected. Over the coming 3 months, an estimated 300,000 under-five children and 375,000 women of child bearing age in IDP camps in Darfur will be directly affected.
- Based on a WHO rapid assessment, 100 health facilities (out of 250) in Darfur and 108 facilities in South Kordofan may not be able to deliver basic health services. This will severely disrupt health services for children and women, including antenatal, safe delivery and postnatal care.
- Simultaneous disruptions in the provision of water and hygiene services, general food distribution and reduced provision of health services are likely to contribute to further increase in morbidity and mortality.
- Over the next three months, approximately 2,379 severely malnourished children and 4,900 moderately malnourished children are at risk of not being treated as the result of the closure and reduced operations of 42 TFCs/OTPs and 21 SFC in most at risk remote rural areas and IDP camps, bearing an increased risk of mortality.
- Confiscation of therapeutic supplies, drugs and equipment that had been pre-positioned with these NGOs will also have further negative impact on the programmes.
- As the “hunger gap” season is approaching (starting from April) the impact will be even more severe on most vulnerable people, especially children.
- Inadequate capacity in MOH (staffing, expertise, supplies and logistics, supervision and monitoring) in the ability to treat acute malnutrition and to carry out high impact nutrition interventions.
- Significant reduction (30 per cent) in nutritional surveillance capacity to closely monitor nutrition situation and timely detection of deterioration to allow efficient response.
- Interruption of immunization services provided by INGO health facilities, including a response to a current meningitis outbreak, would result in a decline in immunization coverage possibly to below the emergency threshold level.
- Reduced capacity to carry campaigns, such as National Immunization Days and Accelerated Child Survival Development, which were planned in April.

Actions

- Support State Ministry of Health (SMOH) and remaining NGOs to take on the operation of critical interventions with financial, supply, logistics and supervision and monitoring support from UNICEF. However, their ability to fill the gaps will be limited due to capacity and access to some of the areas.
- Meningitis vaccination activities, with SMOH, UNICEF and WHO, in Darfur to contain reported outbreak.

- UNICEF with WHO may be required to step in for lifesaving interventions with additional staffing and technical support to health and nutrition service providers for a short period of a month or so.
- Conduct rapid interagency assessment as required.
- Re-establishment of nutritional surveillance systems in high-risk areas previously covered by suspended NGOs, for example through provision of direct technical specialists.
- Re-establishing treatment of severe acute malnutrition in high-risk areas through working with the Ministry of Health (MOH) and remaining NGOs, in collaboration with the health sector.
- Assessment of needs, procurement and distribution of therapeutic feeding supplies, drugs and equipment.
- As conditions allow, establish collaboration with WFP on feeding programmes.
- Provide an integrated package of high-impact health and nutrition interventions, including immunization, micronutrient supplementation, de-worming, provision of long-lasting insecticidal nets (LLINs) and health and nutrition messages.
- Procure and distribute essential medicines and equipment for the main causes of child and maternal morbidity such as PHC kits, low osmolarity ORS, IV fluids, and IMCI, essential obstetric kits, emergency obstetric and neonatal equipment.
- Provide operational cost to maintain routine immunization of children against diphtheria, pertussis, tetanus, hepatitis B, *Haemophilus influenzae* type b, measles, tuberculosis and polio as well as administering tetanus toxoid (TT) vaccine to pregnant women.
- Provision of incentive payments to non-government service providers.

Education

Issues

- 296,000 in and out of school children (138,000 children for Darfur, 158,000 for the rest of the north of Sudan) are at risk of having their education disrupted by the revocation of the licences of seven major NGO partners in Education sector in seven states in the north of Sudan.
- Planned activities of these NGOs that may not be implemented include teacher training, school construction and rehabilitation, hygiene education

Actions

- In Darfur, UNICEF will coordinate with remaining partners and government counterparts to provide funding, technical support, and deployment of additional human resources in priority areas in the short-term.
- Also in Darfur, UNICEF will support the State Ministry of Education and Parent Teacher Committees to launch the planned enrolment campaigns in all localities, including those targeted by the NGOs.
- In Muhajeria, South Darfur, where an estimated 18,000 primary school children were displaced by recent clashes, UNICEF will continue emergency education interventions which include identification of teachers or volunteer teachers, quick training of teachers, setting up of learning spaces, learning materials for children affected by the recent clashes in January.
- UNICEF will ensure the schools that were being constructed by Save the Children-US in Abyei are completed by providing extra funds and directly supervising construction if necessary.
- Develop an agreement with a local NGO active in Khartoum IDP camps to support education of 15, 000 IDP children in Khartoum state.
- Develop an agreement with a local NGO active in Khartoum IDP camps to maintain/initiate ECD support facilitating access to quality early learning, stimulation and play for young children.
- In Red Sea, Blue Nile, and South Kordofan States support education of 112,000 children (including 1,000 out of school in South Kordofan) by hiring education specialists to reinforce the capacity of the State Ministries of Education to implement the planned activities.

Child Protection

Issues

- Support for 103,000 vulnerable children and youths that had been provided by 8 highly experienced protection NGO partners will be suspended.
- Increased risk in violence against women and children due to decreased protection capacity in IDP camps and other localities affected.

- The suspended interventions include provision of reintegration opportunities for education, psychosocial support and livelihoods, including support to demobilised former child soldiers in Darfur, Red Sea and South Kordofan and children separated in fighting in Abyei, child protection awareness, as well as capacity building of local authorities, local NGOs and CBOs for support and protection of children.
- Given the sensitive nature of child protection work and limited capacity it will not be possible for the government or local NGOs to fill the gaps left by the departed partners.

Actions

Finding alternative actors and approaches to deliver protection programmes in an environment where capacity was already severely limited will take some time. First steps in this process will include:

- UNICEF will identify any suitable NGO partners to manage implementation of ongoing projects, and consider direct management of projects itself in areas that cannot be supported by government counterparts or NGOs.
- Assessment of needed additional supplies.
- Deployment of additional human resources as required for ongoing activities.
- Support the coordination of Child Protection actors in each state, government counterparts, GBV working Groups and Protection working Groups and others.

COORDINATION AND LOGISTICS

Issues

UNICEF in Sudan leads two major clusters – WASH and Education – and co-leads Health and Nutrition Sector in Sudan. UNICEF will be responsible for ensuring minimum disruption in life-saving services for the conflict affected and other vulnerable populations. While cluster coordination is well established in Sudan, additional human resources may be required to support the coordination function at the field level, in areas where suspended NGOs had been playing a critical coordination role and where previous structures will be especially weakened by their absence.

UNICEF will play an increased role in the transportation, warehousing and distribution of supplies, not least in areas where CARE International had been the lead NGO for these activities through the NFI Common Pipeline. Costs of transportation are expected to increase in Darfur where continued insecurity impacts the willingness of local contractors to operate.

Costs for coordination and logistics are incorporated into the sector budgets below.

Actions

- Coordination of the Health/Nutrition, WASH, and Education cluster.
- Technical support to cluster partners and the government counterparts.
- UNICEF will reinforce staff security measures at compounds, warehouses, and with some IT equipment.
- Given the already limited capacity in supply/logistics in relation to the scale of the programme, each office in Darfur will require one additional supply/logistics staff to enable the operation.
- Procurement, warehousing and distribution of emergency supplies and equipment.
- Performance monitoring and evaluation

3. FUNDING REQUIREMENTS AND RECEIPTS

UNICEF Sudan has so far only received US\$ 9,453,202 (6%) out of the UNICEF needs of US\$148,531,197 reflected in the 2009 Sudan Workplan. In light of the current developments, UNICEF Sudan is in urgent need of US\$ 23.6 million in order to be able to respond to the immediate needs of affected children and women for the next three months.

Table 1: Funding Priorities for March to June 2009

Critical programme activities	Estimated beneficiaries	Funds required
Water, sanitation and hygiene (WASH) Provision of safe drinking water through operation and maintenance of water supply facilities including chlorination and water quality monitoring at 32 locations	Up to 1.16 million people	US\$ 6,071,715

<p>Construction 350 latrines for IDPs displaced by recent fighting and rehabilitation of 3,000 latrines</p> <p>Engagement of additional local technical support for interim service provision and international technical experts identified by UNICEF, and support to sector coordination</p> <p>Environmental sanitation campaigns, and dissemination of hygiene messages and soap</p> <p>Replenishment of pre-positioned supplies</p>		
<p>Health and nutrition</p> <p>Financial, supply, logistics, training, supervision and monitoring support to government to support health and nutrition programmes in high risk areas</p> <p>Re-establishment of interim nutrition services for treatment of severe acute malnutrition and surveillance systems in high risk areas</p> <p>Provision of immunization, micronutrient supplementation, de-worming, long-lasting insecticidal nets (LLINs) and health and nutrition messages.</p> <p>Procurement and distribution of essential medicines</p> <p>Operational costs of routine immunization of children and women</p>	<p>Up to 1.5 million people, including 300,000 under-five children and 375,000 women of child bearing age</p>	<p>US\$ 10,046,498</p>
<p>Education</p> <p>Funding, technical support, and deployment of additional human resources, including education specialists, to government and NGO partners in priority areas in the short-term, and support to sector coordination.</p> <p>Support to the State Ministry of Education and Parent Teacher Committees to undertake enrolment campaigns.</p> <p>Quick training of teachers, setting up of learning spaces, learning materials for children in areas with recently displaced populations.</p> <p>Support to school construction in non-Darfur states</p> <p>Provision of Early Childhood Development kits</p>	<p>Up to 296,000 children</p>	<p>US\$ 4,256,460</p>
<p>Child protection</p> <p>Identification of financial and technical support to alternative partners to continue child protection programmes, including reintegration and psychosocial activities.</p> <p>Support to coordination of Child Protection Working Groups to ensure continued monitoring of child protection issues</p>	<p>Up to 103,000 children and young people</p>	<p>US\$ 3,260,825</p>
<p>Total Priority Needs</p>		<p>US\$23,635,498</p>

*The total includes a maximum recovery rate of 7%. The actual recovery rate on contributions will be calculated in accordance with UNICEF's Executive Board Decision 2006/7 dated 9 June 2006.

**Funds received against this appeal will be used to respond to both the immediate and medium-term needs of children and women as outlined above. If UNICEF should receive funds in excess of the medium-term funding requirements for this emergency, UNICEF will use those funds to support other, under-funded emergencies.

Further information on the Sudan emergency programme can be obtained from:

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