

**REPUBLIC OF THE SUDAN
RAPID RESPONSE
DISPLACEMENT
2021**

21-RR-SDN-47060

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Resident/Humanitarian Coordinator

PART I – ALLOCATION OVERVIEW

Reporting Process and Consultation Summary:

Please indicate when the After-Action Review (AAR) was conducted and who participated.

24 February 2022

The After-Action Review for this CERF allocation was conducted on 24 February 2022. All relevant sectors and implementing partners as well as the OCHA field office in West Darfur state were invited. Representatives from IOM, WHO, FAO, UNICEF and UNFPA as implementing partners as well as FSL, WASH, ES/NFIs and GBV protection representatives actively contributed to the AAR discussion.

Please confirm that the report on the use of CERF funds was discussed with the Humanitarian and/or UN Country Team (HCT/UNCT).

Yes No

Given that there were no major changes or issues, the decision was made to forgo the discussion with the HCT.

Please confirm that the final version of this report was shared for review with in-country stakeholders (i.e. the CERF recipient agencies and their implementing partners, cluster/sector coordinators and members and relevant government counterparts)?

Yes No

1. STRATEGIC PRIORITIZATION

Statement by the Resident/Humanitarian Coordinator:

Resulting from the West Darfur state intercommunal conflict and violence on January 15, 2021, approximately 109,000 people were displaced across Ag Geneina, Beida and Kreinik localities. This incident followed a trend of inter-communal clashes which started in 2020 in the same area following a decade of relative calm in the state. The last two years have seen an environment of tensions and recurrent conflict between the nomads and farmers. In 2020, half of the roughly 40 incidents of intercommunal violence in Darfur took place in West Darfur. Considering the severity of the incidents in West Darfur, the CERF funding was critical to assure a minimum coverage of needs of people affected by the violence.

UN agencies started to respond to the emergency in January 2021 by using available stocks, and re-prioritizing existing funding and engagements. However, they faced challenges to expand the initial support to the increasing number of people in need and to continue to cover the following six months. An operational plan estimated the cost of the operation in Ag Geneina at \$31,377,901 for a period of six months, of which \$13 million had already been mobilized, mostly by reprogramming funding. New funding included \$1.3 million from the Sudan Humanitarian Fund (SHF), \$0.55 million from the Rapid Response Fund (IOM) and another \$0.27 million from the Start Network.

A CERF allocation of US\$5 million was requested and ultimately approved in March 2021. Through this CERF funding, FAO, IOM, UNFPA, UNICEF and WHO managed to reach the targeted IDPs, nomads and host communities who were in urgent need of protection (including GBV), Emergency Shelter/NFI, WASH, Education in Emergencies (EiE) and health services. About two thirds of the reached people were IDPs with approximately equal gender and age segregation. These achievements included livelihood interventions targeting the vulnerable nomadic households, most of whom had not received humanitarian assistance after having been marginalized for decades. Support to these communities was essential to uphold the agreement brokered on 14 February 2021 between the leaders of Masalit and Arab tribes to end hostilities that led to inter-communal violence.

The emergency response to the intercommunal violence in West Darfur was complementary to the durable solutions initiatives for forced displacement programme of the peacebuilding fund (PBF) in West Darfur, led by UNHCR and implemented jointly with UNDP UNICEF and IOM, and the CERF allocation of 2020 of \$40 million for underserved emergencies, implemented in the Darfur, Kordofan and Blue Nile States, focused on building effective approaches to resilience and solutions that assist IDPs and wider displacement-affected communities to better manage and overcome the consequences and effects of displacement. The above was closely linked to the wider context of UNAMID's gradual cessation of activities and a transition to UNITAMS mandate.

CERF's Added Value:

The critical injection of CERF funding allowed implementing partners to apply a flexible policy to mobilize commodities from warehouses in nearby locations to the affected state, which could then be replenished using CERF funding, ensuring that stocks for CERF allocations do not affect partners' other humanitarian commitments. Especially in contexts such as Sudan where custom clearance of international supplies can delay procurement, the option to use and replenish existing stocks adds significant value. In the context of this allocation, for interventions requiring importation of health commodities like health, ES/NFIs and RH dignity kits, UNFPA, IOM and WHO used their respective prepositioned stocks. UNICEF relied on its standby agreements with sub-implementing partners as best practice which were activated as soon as UNICEF received funds. These implementation modalities were crucial in ensuring the timely emergency response.

Did CERF funds lead to a fast delivery of assistance to people in need?

Yes

Partially

No

This allocation was triggered by intercommunal violence in West Darfur. With CERF funding, WHO managed to quickly establish mobile clinics in the IDP accumulation areas, including basic services and COVID-19 preventive measures. Also, WHO quickly set up an alert surveillance system to investigate diseases outbreaks. Very critical agricultural and livelihood inputs were quickly delivered to households though the distribution of goats was delayed due to internal FAO processes. Thanks to CERF funding, agencies were very quick in availing ES/NFIs for the IDPs though the coordination and government approvals ultimately delayed the distribution of these items.

Did CERF funds help respond to time-critical needs?

Yes

Partially

No

The GBV subsector started developing a response plan immediately after the intercommunal clashes and this CERF allocation was timely where community-based protection networks have been established. Vector control measures at community level were also timely, preventing diseases outbreaks that may otherwise would have erupted, especially given that movement and settlement of affected people is not very structured. The animal vaccines for nomads were time critical since these nomads are in continuous movement and vaccines have to be availed before they migrate outside of the responsible agency's reach.

Did CERF improve coordination amongst the humanitarian community?

Yes

Partially

No

This CERF allocation included a portion to support COVID-19 response efforts, which WHO is spearheading for three years. The CERF allocation helped significantly to improve the coordination between health and WASH response at the implementation level. UNICEF, IOM and WHO shared information on the availability of CERF funding during the Area ISCG in the field, which facilitated the coordination of the service delivery on the ground.

Did CERF funds help improve resource mobilization from other sources?

Yes

Partially

No

No agency used CERF allocation to mobilize other donor resources.

Considerations of the ERC's Underfunded Priority Areas¹:

The CERF allocation included US\$ 0,5 million for EiE and US\$ 0,5 million for protection (including GBV). Needs of women, girls, boys, and elderly persons were particularly considered when targeting people in need and were therefore well prioritized. This included needs of People with Disabilities (PwD), protection of women and girls against Gender Based Violence (GBV). Rapid assessments undertaken in some gathering sites indicated the need to prioritize safety and dignity for women and girls, which included access to dignity items and sanitary supplies, and protection from threats and harassment. CERF funding also supported the provision of health, water, and sanitation for all newly displaced. Additionally, the support to Education in Emergencies (EiE) was prioritized to ensure quality formal and informal education support to children who have been displaced. The CERF, in this sense, had complemented the UNICEF's funding of US\$ 300,000 from UNICEF's thematic funds, as both allocations contributed to UNICEF's EiE response.

Table 1: Allocation Overview (US\$)

Total amount required for the humanitarian response	31,377,901
CERF	4,999,194
Country-Based Pooled Fund (if applicable)	6,332,808
Other (bilateral/multilateral)	4,963,505
Total funding received for the humanitarian response (by source above)	16,295,507

Table 2: CERF Emergency Funding by Project and Sector/Cluster (US\$)

Agency	Project Code	Sector/Cluster	Amount
FAO	21-RR-FAO-005	Food Security - Agriculture	550,000
IOM	21-RR-IOM-005	Shelter and Non-Food Items	1,557,549
IOM	21-RR-IOM-005	Protection	192,506
UNFPA	21-RR-FPA-005	Protection - Gender-Based Violence	300,000
UNICEF	21-RR-CEF-009	Water, Sanitation and Hygiene	1,296,000
UNICEF	21-RR-CEF-009	Education	504,000
WHO	21-RR-WHO-007	Health	599,139

¹ In January 2019, the Emergency Relief Coordinator identified four priority areas as often underfunded and lacking appropriate consideration and visibility when funding is allocated to humanitarian action. The ERC therefore recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and HCTs/UNCTs when prioritizing life-saving needs for inclusion in CERF requests. These areas are: (1) support for women and girls, including tackling gender-based violence, reproductive health and empowerment; (2) programmes targeting disabled people; (3) education in protracted crises; and (4) other aspects of protection. While CERF remains needs based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the questions and answers on the ERC four priority areas [here](#).

Total	4,999,194
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Table 3: Breakdown of CERF Funds by Type of Implementation Modality (US\$)

Total funds implemented directly by UN agencies including procurement of relief goods	3,999,888
Funds sub-granted to government partners*	481,964
Funds sub-granted to international NGO partners*	200,000
Funds sub-granted to national NGO partners*	317,341
Funds sub-granted to Red Cross/Red Crescent partners*	0
Total funds transferred to implementing partners (IP)*	999,306
Total	4,999,194

* Figures reported in table 3 are based on the project reports (part II, sections 1) and should be consistent with the sub-grants overview in the annex.

2. OPERATIONAL PRIORITIZATION:

Overview of the Humanitarian Situation:

Following intercommunal conflict and violence in West Darfur which started on 15 January 2021, approximately 109,000 people had been displaced across Ag Geneina, Baida and Kreinik localities. This followed a trend of inter-communal clashes which took place in 2020 in the same area, which resulted in the displacement of 41,000 people. Recurring tensions and conflict between Arab tribes and other ethnic groups have taken place for more than 10 years in and around Ag Geneina town of West Darfur state. In 2020, half of the 40 incidents of intercommunal violence in Darfur took place in West Darfur. The severity of the incidents in West Darfur added to the cycle of other emergencies which took place across Sudan in 2020 – including COVID-19, inter-communal clashes in South Kordofan and other Darfur states, flooding, and the arrival of more than 60,000 refugees from Ethiopia's Tigray region into Sudan – has led to increased humanitarian needs. The emergency response to intercommunal violence in West Darfur was complementary to programmes on 'durable solutions for forced displacement' of the Peacebuilding Fund (PBF) in West Darfur, led by UNHCR and implemented jointly with UNDP, UNICEF, and IOM, with a value of \$4.32 million (part of a wider programme of \$20 million for peacebuilding in the Darfur States). An ongoing 2020 CERF allocation of \$100 million, of which \$40 million is for underserved emergencies, implemented in the Darfur, Kordofan and Blue Nile States, focuses on building effective approaches to resilience and solutions that assist displaced people, wider displacement-affected communities as well as the Government of Sudan to better manage and overcome the consequences and effects of displacement.

Operational Use of the CERF Allocation and Results:

The overarching operational objectives of this response were a multi-sectoral life-saving humanitarian assistance to displaced people, protection services for those with specific needs and to support with livelihood activities to underserved nomads and displaced. CERF funding supported Protection (including programming on gender-based violence), Emergency Shelter and Non-Food Items, Water, Sanitation and Hygiene, Education in Emergencies (EiE) and health interventions to respond to urgent needs to stabilize the situation and safeguard the protection environment. The CERF allocation also included a livelihoods component for vulnerable nomadic households, most of whom had never received assistance, leading to high levels of vulnerability. Support to these communities was essential to support peacebuilding efforts. This CERF allocation allowed the continuation of an early lifesaving response to the urgent humanitarian needs caused by the sudden outbreak of inter-communal violence and contributed to the Peacebuilding Fund's ongoing peacebuilding and stabilization efforts in West Darfur in a period of transition between UNAMID to UNITAMS, the UN's peacekeeping and political missions.

People Directly Reached:

The total of people directly reached with CERF-funded assistance was calculated based on the absolute sums of people reached across population categories by each agency except for the IDP category where it is evident that this would lead to a significant duplication (especially given that the sum would exceed the estimated number of IDPs affected by the conflict, which is 109,000 persons, as stated in the allocation strategy). Based on this calculation method, an estimated 190,098 people were directly reached with CERF-funded support, broken down into 2,400 returnees, 89,801 IDPs, 87,897 host communities and 10,000 other affected persons. This achievement represents about 93% of the total planned people of 204,716 and about 24% of the reached people were women and 54% were children.

People Indirectly Reached:

The overall objective of IOM's project was to expand the protection services to vulnerable crisis-affected people. The activities implemented under the Protection sector, including establishment of the community-based protection committees, training provided and creation of the protection networks, made it possible to connect whole communities with various service providers, including those with special needs and vulnerabilities. The mobile protection help desk also raises awareness about information on protection services and providers available in the area, which will support vulnerable crisis-affected people, including those with special needs. In total 27,140 women, girls, men and boys benefitted indirectly from the intervention from awareness raising campaigns informing the whole community about GBV concepts, available services, the importance of reporting sexual violence cases within 72 hours, as well as the required community support for GBV survivors.

The direct beneficiaries of this project are internally displaced persons (IDPs) residing in 20 gathering points and residents of ten (10) nomad communities. Under this project, six (6) water yards and mini water yards, four (4) hand pumps, and two (2) latrines were constructed in the gathering points. In addition, seven (7) gathering points were connected to the urban water network, and 55 latrines were rehabilitated. While these facilities are currently used by the displaced people, when they return to original location, the gathering points will be used by Geneina city residents as public offices (state ministry building etc.), and local people will benefit from the sustainable facilities and services.

184,956 beneficiaries were reached through multi-donor funded health promotion campaigns in the IDP gathering sites, schools, mosques and youths and women groups and in the host communities. Also, disease and vector surveillance are a benefit for the entire population, IDP and host community. The targeted populations of all these interventions might overlap. Therefore, we consider the population indirectly targeted by WHO project as the 185,956 beneficiaries reached by health messages.

Table 4: Number of People Directly Assisted with CERF Funding by Sector/Cluster*

Sector/Cluster	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Education	255	255	8,358	12,192	21,060	255	435	13,082	9,406	23,178
Food Security - Agriculture	8,680	8,320	8,500	8,500	34,000	9,220	8,600	8,090	8,090	34,000
Health	33,750	32,400	35,100	33,750	135,000	36,116	34,670	37,559	36,118	144,463
Protection	6,800	6,000	4,400	2,800	20,000	6,500	4,500	5,500	4,000	20,500
Protection - Gender-Based Violence	8,900	255	3,433	127	12,715	5,300	150	2,826	85	8,361
Shelter and Non-Food Items	13,198	11,500	8,248	5,504	38,450	7,738	6,426	12,714	11,683	38,561
Water, Sanitation and Hygiene	12,240	11,760	18,360	17,640	60,000	17,971	14,686	26,839	24,942	84,438

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

Table 5: Total Number of People Directly Assisted with CERF Funding by Category*

Category	Planned	Reached
Refugees	0	0
Returnees	3,400	2,400
Internally displaced people	109,000	89,801
Host communities	83,716	87,897
Other affected people	8,600	10,000
Total	204,716	190,098

Table 6: Total Number of People Directly Assisted with CERF Funding*

Sex & Age	Table 6: Total Number of People Directly Assisted with CERF Funding*		Number of people with disabilities (PwD) out of the total	
	Planned	Reached	Planned	Reached
Women	52,630	44,719	7,350	7,625
Men	44,226	42,627	6,555	6,923
Girls	55,640	53,387	7,582	7,236
Boys	52,220	49,365	6,110	6,574
Total	204,716	190,098	27,597	28,358

PART II – PROJECT OVERVIEW

3. PROJECT REPORTS

3.1 Project Report 21-RR-FAO-005

1. Project Information			
Agency:	FAO	Country:	Republic of the Sudan
Sector/cluster:	Food Security - Agriculture	CERF project code:	21-RR-FAO-005
Project title:	Emergency agriculture and livestock-based livelihood support for the recently conflict affected populations in El Geneina Locality in West Darfur State		
Start date:	26/04/2021	End date:	25/10/2021
Project revisions:	No-cost extension <input type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:		US\$ 2,000,000
	Total funding received for agency's sector response to current emergency:		US\$ 0
	Amount received from CERF:		US\$ 550,000
	Total CERF funds sub-granted to implementing partners:		US\$ 49,803
	Government Partners		US\$ 0
	International NGOs		US\$ 0
	National NGOs		US\$ 49,803
Red Cross/Crescent Organisation		US\$ 0	

2. Project Results Summary/Overall Performance

Through this CERF Rapid Response, FAO, and its implementing partner, provided agriculture support to 20,000 vulnerable farmers (at least 30% were women) to produce their own food and enhance their income. The agriculture support included distribution of certified crop, legume and vegetable seeds, hand tools and quick refresher training on improved agronomic practices during inputs' distribution. The type and quantities of inputs procured and distributed included 20 MT of sorghum seeds, 15 MT of groundnut seeds, 6 MT of cowpea seeds, 2 MT of pigeon pea seeds, 2 MT of chickpea seeds; 400 Kg of Okra seeds, 200 Kg of watermelon seeds, six Kg of tomato seeds, 200 Kg of cucumber seeds, and 100 Kg of carrot seeds. Each beneficiary household received a standard package that includes 5 Kg of sorghum, 100 gram of okra and 50 grams of watermelon. The other seeds were distributed based on the ecological zones, and beneficiaries' interest and availability of enough land. The project also distributed 2,200 digging hoes and 2,200 pieces of rakes to the neediest farmers. The agricultural inputs procured and distributed to the beneficiaries by FAO and its partner are shown in Table 1.F

Table 1: Agriculture inputs procured and distributed to the beneficiaries

Type of inputs	Quantities of inputs planned to be procured and actual quantities procured and distributed to the beneficiaries			Remarks
	Unit	Planned	Actual quantities procured and distributed to the beneficiaries	
Ground nut seeds	MT	15	15	Each beneficiary received 10 Kg
Sorghum seeds	MT	20	20	Each beneficiary received 5 Kg
Cowpea seeds	MT	6	6	Each beneficiary received 2 Kg
Chickpea	MT	2	2	Each beneficiary received 2 Kg
Pigeon pea	MT	2	2	Each beneficiary received 2 Kg
Subtotal		45	45	Each beneficiary received 10 Kg
Okra	Kg	400	400	Each beneficiary received 100 gram
Watermelon	Kg	200	200	Each beneficiary received 50 gam
Tomato	Kg	6	6	Each beneficiary received 20 gram
Cucumber	Kg	200	200	Each beneficiary received 50 gram
Carrot	Kg	100	100	Each beneficiary received 50 gram
Subtotal		906	906	
Rake	Each	0	2,200	Each beneficiary received one rake
Digging hoe	Each	0	2,200	Each beneficiary received one hoe

FAO and its partner provided livestock inputs to 800 vulnerable agro pastoralists (4,000 people), more than 70 percent were women, to complement crop farming, increase milk supplies at household level and enhance their income through marketing surplus milk or milk products. Each agro pastoralist was provided with 3 female dairy goats, 50 Kg of animal concentrate feed and 10 Kg of mineral licks. A quick refresher training was given to 800 people as heads of households on improved animal husbandry. Furthermore, FAO, and its implementing partner, provided vaccination and treatment services to a total 100,000 animals belonging to 10,000 agro pastoralist and pastoralist individuals including 50,000 small ruminants, which were vaccinated against PPR and sheep pox, and 50,000 cattle, which were vaccinated against HS and BQ. Debilitating large and small animals were de-wormed using anthelmintic agents including 1,000 vials Ivermectin injections 1%, 500-tube 9-gram Ivermectin gel, 1,000 litters of Ivermectin drench and 500 litters of Albendazole drench.

5,000 sachets of 3.6-gram Diminazene aceturate were used to treat animals affected by tick-borne diseases. The livestock and veterinary inputs procured and distributed to the beneficiaries by FAO and its partner are shown in Table 2.

Table 2: Livestock and veterinary inputs procured and distributed to the beneficiaries

		planned Vs actual quantities procured and distributed		
Type of input	Unit	Planned	Actual	Remarks
Livestock inputs				
Female dairy goats	Each	2,400	2,400	Each beneficiary received three goats
Animal concentrate feed	MT	70	70	Each beneficiary received 50 Kg
Mineral licks	MT	8	8	Each beneficiary received 10 Kg
Veterinary inputs				
PPR vaccine	Dose	50,000	50,000	A campaign was launched for vaccination of sheep and goats against PPR and sheep pox and vaccination of cattle against HS and BQ diseases. The campaign was led by the IP under the supervision of the state veterinary services
Sheep pox vaccine	Dose	50,000	50,000	
HS vaccine	Dose	50,000	50,000	
BQ vaccine	Dose	50,000	50,000	
Total		200,000	200,000	
Veterinary drugs				
Ivermectin injections 1%	Vial/50 ml	1,000	1,000	A campaign was launched for deworming and treating sick animals. The campaign was led by the IP under the supervision of the state veterinary services
Ivermectin drench	1 litre	1,000	1,000	
Ivermectin gel	9 tube	500	500	
Albendazole 10% drench	1 litre	500	500	

Diminazene aceturate	Sachet gram	3.6	5,000	5,000	
Total			8,000	8,000	

The project assisted a total of 34,000 vulnerable farmers and agro-pastoralists (at least 50% were women and girls) in El Geneina locality in West Darfur state with crop, livestock and veterinary inputs, in addition to quick refresher trainings on improved husbandry plant and livestock practices. The main objective of this support is to assist these people to produce their own food, protect their livelihoods assets and enhance their family income to meet other household needs. Table 3 below provides detailed description to the targeted groups and their locations.

Table 3: The targeted populations by locations

Category	Targeted villages (households)		Total households reached	Total people reached
	Mulli	El Salam, Um Shejera, Shokry, Rijil Kubri and Aish Bara		
IDPs	2,000	720	2,720	13,600
Returnees	480	0	480	2,400
Nomads	0	2,000	2,000	10,000
Resident	840	760	1,600	8,000
Total	3,320	3,480	6,800	34,000

3. Changes and Amendments

Due to the complex working environment in Sudan, exacerbated by political and security instability since September 2021 and culminated by the military coup on the 25th of October 2021, only one activity was delayed, which was distribution of goats to the beneficiaries in El Geneina in West Darfur. Goat delivery and distribution to the target beneficiaries was supposed to take place in October 2021. The main reasons for this delay included lockdown of businesses, restricted movement between Khartoum and the states, fuel shortages, insecurity situation in West Darfur, homework modality by UN agencies and complete disruption of internet services from 25 October up to 20 November 2021.

We requested CERF Secretariat to take into consideration the complex situation in Sudan and West Darfur and allow the project to proceed with delivering the goats to the beneficiaries who were in desperate need for them. Unfortunately, the request for NCE that was submitted on 25 November was rejected and this could have resulted in a big loss to the vulnerable beneficiaries. However, fortunately, FAO managed in the end to sign the contract with the identified supplier and the planned 2,400 goats were purchased and distributed to the intended beneficiaries in December instead of October 2021.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Food Security - Agriculture									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	870	830	850	850	3,400	620	600	590	590	2,400
Internally displaced people	3,470	3,330	3,400	3,400	13,600	4,000	3,600	3,000	3,000	13,600
Host communities	2,140	2,060	2,100	2,100	8,400	2,400	1,800	1,900	1,900	8,000
Other affected people	2,200	2,100	2,150	2,150	8,600	2,200	2,600	2,600	2,600	10,000
Total	8,680	8,320	8,500	8,500	34,000	9,220	8,600	8,090	8,090	34,000
People with disabilities (PwD) out of the total										
	30	65	45	50	190	50	70	35	40	195

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

5. People Indirectly Targeted by the Project

NA

6. CERF Results Framework

Project objective Enhance the productive capacity of 6,800 food insecure IDP, resident, returnee and nomadic households (34,000 people) through provision of emergency agricultural and livestock inputs and refresher training o access sufficient nutritious food and income in El Geneina Locality in West Darfur state

Output 1 4,000 IDP, returnee, nomadic and resident households (20,000 individuals) among the vulnerable farming and pastoral communities in El Geneina locality provided with agricultural inputs and refresher training to produce their own diversified and nutritious food and sell the surplus to enhance family income. Special attention to be given to women headed households, young married couples and people with disabilities.

Was the planned output changed through a reprogramming after the application stage? Yes No

Sector/cluster Food Security - Agriculture

Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	Number of beneficiaries, disaggregated by sex and age, supported with agricultural inputs and refresher training to produce their own food and enhance their income	4,000 beneficiaries (at least 30% are women, young married couples and people with disabilities).	20,000 people (4,000 households) at least 30% were women, and people with disabilities.	FAO and Partner's final reports
Indicator 1.2	Quantity of cereal, legume and vegetable seeds distributed	45.906 MT	45.906 MT	FAO and Partner's final reports
Indicator 1.3	Quantity of hand tools and ploughs distributed	2,400 hand tools and 500 donkey ploughs	4,400 hand tools (2,200 rakes and 2,200 digging hoes)- donkey ploughs were not procured due to lack of interest of the beneficiaries in the inception workshop	FAO and Partner's final reports
Indicator 1.4	Number of beneficiaries, disaggregated by sex and age, provided with refresher training in improved plant husbandry practices	4,000 people beneficiaries (at least 30% are women, young married couples and people with disabilities	4,000 people (heads of households); at least 30% were women people with disabilities	FAO and Partner's final reports

Explanation of output and indicators variance: The only difference was procurement and distribution of 4,400 hand tools (2,200 rakes and 2,200 hoes) instead of 370 donkey ploughs as preferred by the beneficiaries

Activities	Description	Implemented by
Activity 1.1	Procurement of certified crop, legume, and vegetable seeds, donkey ploughs and hand tools	FAO
Activity 1.2	Distribution of the procured seeds, donkey ploughs and hand tools to the targeted beneficiaries in the targeted locality	Community Development Association (CDA)

Activity 1.3	Refresher training of beneficiaries on improved husbandry practices	Community Development Association (CDA)
Activity 1.4	Monitoring of the agricultural activities	FAO and Community Development Association (CDA)

Output 2 Emergency veterinary-based livelihood support provided to 2,000 vulnerable households (10,000 people) among the most vulnerable resident households and Arab communities to reduce livestock losses and improve productivity, with particular focus on women and PwD

Was the planned output changed through a reprogramming after the application stage? Yes No

Sector/cluster Food Security - Agriculture

Indicators	Description	Target	Achieved	Source of verification
Indicator 2.1	Number of beneficiaries disaggregated by sex and age supported with veterinary services (vaccination and de-worming) for their livestock to boost milk supplies for children and pregnant and lactating mothers (at least 30% are women, young married couples and people with disabilities).	10,000 persons (at least 30% are women, young married couples and people with disabilities).	10,000 farmers (2,000 households) - at least 30% are women, and people with disabilities	FAO and Partner's final reports
Indicator 2.2	Number of animals protected against epidemic diseases and internal parasites through provision of vaccination and de-worming services	100,000 animals including 50,000 cattle and 50,000 sheep and goats. small ruminants and cattle	100,000 animals including 50,000 cattle and 50,000 sheep and goats	FAO and Partner's final reports
Indicator 2.3	Quantity and type of vaccines procured and administered	200,000 dose of vaccines including 50,000 PPR, 50,000 sheep pox, 50,000 HS and 50,000 BQ vaccines	200,000 doses of vaccines including 50,000 PPR, 50,000 sheep pox, 50,000 HS and 50,000 BQ vaccines	FAO and Partner's final reports
Indicator 2.4	Quantity of veterinary drugs procured and administered	8,000 units of assorted drugs	8,000 units of assorted drugs	FAO and Partner's final reports
Indicator 2.5	Number of beneficiary household trained in improved animal health practices	2,000 households	2,000 people (heads of households)	FAO and Partner's final reports

Explanation of output and indicators variance: No differences

Activities	Description	Implemented by
Activity 2.1	Procurement of veterinary vaccines and drugs	FAO
Activity 2.2	Organization of mass vaccination and deworming campaigns under the supervision of the State Veterinary Department	Community Development Association (CDA)
Activity 2.3	Refresher training of beneficiaries on improved animal health management	Community Development Association (CDA)
Activity 2.4	Monitoring of the animal health activities	FAO and Community Development Association (CDA)

Output 3 Emergency livestock-based livelihood support in form of milking goats and livestock inputs (concentrate feed and mineral licks) provided to 800 vulnerable households (4,000 individuals) among the most vulnerable resident households and Arab communities) to enhance household milk supplies and income as a strategy to prevent malnutrition, with particular focus on women and PwD

Was the planned output changed through a reprogramming after the application stage? Yes No

Sector/cluster Food Security - Agriculture

Indicators	Description	Target	Achieved	Source of verification
Indicator 3.1	Number of milking goats procured and distributed	2,400 female goats in late pregnancy or early lactation	2,400 female goats in late pregnancy or early lactation	FAO and Partner's final reports
Indicator 3.2	Quantity of animal supplementary feed provided	78 MT (70 MT animal concentrate feed and 8 MT mineral licks) (at least 70% are women headed househo	78 MT (70 MT animal concentrate feed and 8 MT mineral licks) (at least 70% are women headed households)	FAO and Partner's final reports
Indicator 3.3	Number of beneficiaries disaggregated by sex, age and disability benefited from the increase in milk as a result of receiving milking goats and supplementary feeding (concentrate feed and mineral licks) (at least 70% are women, young married couples and people with disabilities).	4 000 people among the most vulnerable targeted groups (at least 70% are women headed households and	4 000 people (800 households) among the most vulnerable targeted groups (at least 70% are women headed households	FAO and Partner's final reports
Indicator 3.4	Number of people trained on improved goat management techniques (at least 30% are women, young married couples and people with disabilities).	800 people (at least 30% are women, young married couples and people with disabilities).	800 people (at least 70% are women, young married couples and people with disabilities).	FAO and Partner's final report

Explanation of output and indicators variance: No differences

Activities	Description	Implemented by
Activity 3.1	Procurement of milking goats, concentrate feed and mineral licks	FAO
Activity 3.2	Distribution of milking goats, concentrate feed and mineral licks	Community Development Association (CDA)
Activity 3.3	Refresher training of the beneficiaries on improved goat husbandry practices	Community Development Association (CDA)
Activity 3.4	Monitoring of the livestock activities	FAO and Community Development Association (CDA)

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and

Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas² often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

a. Accountability to Affected People (AAP)³:

During the design phase, the CERF allocation included a livelihoods component for vulnerable nomadic households, most of whom had never received assistance, leading to high levels of vulnerability. The support required by the nomadic households include veterinary assistance and supporting nomadic women with agricultural inputs as it has been observed that the nomadic communities tend to settle partially and cultivate. This assistance was considered essential to support peacebuilding efforts in West Darfur. Accountability to affected populations (AAP) was ensured through adopting good implementing procedures that started with the establishment of base line information from the various surveys that covered the areas of operation. FAO involved the local community leaders in agreeing on suitable criteria for the selection of locations and beneficiaries; and good consultation in identification of the needs in terms of types of inputs and varieties and estimation of the quantities of inputs for the targeted beneficiaries. The Service Provider and the community leaders were strongly involved in the identification of the neediest households in the targeted areas based on the criteria that were set jointly. During the inception phase, FAO conducted more community consultations, which resulted in a slight change in the FAO standard package of agricultural inputs. All the project inputs were delivered timely as recommended by the beneficiaries with the exception of goats.

b. AAP Feedback and Complaint Mechanisms:

FAO in collaboration with the IP and the state line ministry of agriculture in Al Geneina locality organized community mobilization and sensitization sessions to orient the targeted communities about the project objectives, outputs and activities, in addition to, FAO's and IP's mandates and missions. The IP organized needs assessments with direct involvement of community leaders and community members. Action plans and timelines were also discussed and agreed upon in those sessions. The communities were sensitized to report any incidences of sexual exploitation to FAO through the IP. The IP contracted by FAO to implement this project established with FAO's support a mechanism for receiving beneficiaries' complaints, questions or clarifications through mobile phone calls about the project including the quality of inputs, its timely distribution, and performance of the season. The Partner was also obliged by the contract that was signed with FAO to complete the Beneficiary Complaint Format (BCF) and share with FAO whenever requested. The BCF contains information about the name, age, ethnic background and sex of the beneficiary, date of the call, name of the call receiver, description of the complaints and the feedback. Another issue to be reported was sexual exploitation. FAO and IP ensured that feedbacks and actions were provided to the project beneficiaries. The IP registered the beneficiaries' complaints and feedbacks and reported to FAO. For example, some beneficiaries in Al Geneina locality complained about the late distribution of goats. The IP conveyed this message to FAO Al Geneina. The FAO field office provided the justification for this delay and promised to solve the problem. This message was conveyed to the beneficiaries by the IP. On the other hand, members of the village development committees were also encouraged to report to FAO directly about the

² These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

³ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

performance and conduct of the implementing partners. Mobile phones # of concerned FAO field staff were made available to the members of the committees.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

FAO did not establish a specific mechanism for reporting sexual exploitation and abuse –related complaints. Such complaints are captured through the ordinary mechanism described above.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

All beneficiaries disaggregated by gender (men, women, boys and girls) benefited from the support provided by the CERF project. As described elsewhere, almost 50% women and girls benefited from all the project activities. Furthermore, and apart from home gardening, women headed households were given priority by providing them with at least 70% of the livestock support, especially distribution of milking goats, concentrate feed and mineral licks. The objective is to empower women to increase their income through accessing alternative livelihood activities other than agricultural activities. Thus, helping them to minimize their exposure to gender-based violence, which is an important protection measure.

e. People with disabilities (PwD):

The project was able to reach 195 people with different disabilities and support them with crop, veterinary and livestock inputs. One condition was that these people were capable of performing cultivation and livestock rearing and the support would not expose them to any harm or risks.

f. Protection:

Protection of all affected persons and susceptible segments of the population is ensured through dignity and pride involved in becoming food self-reliance. It is also found in the type of crop and livestock activities that can be used to increase rural household income such as restocking with livestock and home gardening and thus help them avoid pursuing negative coping strategies, which may expose them to harassment.

g. Education:

There is not a special design for education in the project, but the general belief and wisdom is that agriculture and livestock-based livelihoods, which are practised by more than 80% of the rural population in Sudan are the main sources of income, through which they pay for education, health and other household needs and services. However, educating people about improved means of crop and livestock production and about being aware of their rights and fighting bad habits and behaviour such as violence against women has been part of the project design.

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned

Achieved

Total number of people receiving cash assistance:

No

Choose an item.

NA

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

NA

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction

9. Visibility of CERF-funded Activities

Title	Weblink

3.2 Project Report 21-RR-IOM-005

1. Project Information			
Agency:	IOM	Country:	Republic of the Sudan
Sector/cluster:	Shelter and Non-Food Items Protection	CERF project code:	21-RR-IOM-005
Project title:	Providing life-saving assistance to crisis-affected populations in Sudan to reduce their vulnerability, restore a minimum sense of dignity, mitigate health risks, and improve living conditions.		
Start date:	26/04/2021	End date:	31/12/2021
Project revisions:	No-cost extension <input checked="" type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:		US\$ 6,000,000
	Total funding received for agency's sector response to current emergency:		US\$ 500,000
	Amount received from CERF:		US\$ 1,750,055
	Total CERF funds sub-granted to implementing partners:		US\$ 200,000
	Government Partners		US\$ 0
	International NGOs		US\$ 200,000
	National NGOs		US\$ 0
Red Cross/Crescent Organisation		US\$ 0	

2. Project Results Summary/Overall Performance

Through this CERF Rapid Response grant, IOM and its partners provided protection and Emergency Shelter and Non-Food Items assistance across five localities in West Darfur – distribution of emergency shelters took place in Kulbus, Sirba, Kereneik and Ag Geneina localities, Non-Food Items distribution was implemented in Ag Geneina and Jebel Moon localities and protection services were provided in 30 gathering points in Ag Geneina locality. Under the ES/NFI section, IOM provided Emergency Shelters to 15,318, thus adequately sheltering these individuals and 23,332 Non-Food Items (NFI) kits. The NFI kits follow ES/NFI sectors standards and contains plastic sheets, sleeping mats, jerry cans, blankets and kitchen set sand mosquito nets. In total, 38,561 individuals (7,738 women, 6,426 men, 12,714 girls and 11,683 boys) were reached and provided with ES/NFI assistance. Under the Protection section, IOM provided protection services to 20,500 individuals in total (6,500 women, 4,500 men, 5,500 girls and 4,000 boys), including communities who received awareness sessions, trainings, in kind assistance, referral to different service providers, counselling and civil documentation. In addition, 30 community-based protection committees were established from 55 gathering points, comprising of 221 members. The committees were trained on protection concepts including child protection and Gender Based Violence (GBV) case identification, response, and referral to various service providers. Six community-based protection networks

were also created facilitating services between communities and service providers and supporting individuals who are not be able to come to the service provider agency. The protection network's members were trained on the identification of protection risks, including child protection and GBV cases. 11 community volunteers were selected to identify and register people with special needs in order to provide them with home-to-home information on access the services. In addition, IOM established mobile protection help desk, which provides information related to protection, available services, and referral pathways for communities. The protection help-desk volunteers conducted a mapping exercise to list all humanitarian services available to establish a connection between local NGOs and the community for services such as legal aid or psychosocial services (PSS).

3. Changes and Amendments

Under the Protection section, IOM initially envisioned to reach out to 20,000 individuals, concretely 16,000 internally displaced people (IDPs) and 4,000 individuals from the host communities, disaggregated by sex and age (please refer to the table below for the actions planned in the beginning of the project). In total, IOM reached out to 20,500 individuals with protection assistance (14,000 IDPs and 6,500 individuals from host communities), while the sex and disaggregation of the reached individuals slightly differ, due to the current presence of different age and sex groups in the area.

Under the ES/NFI section, IOM initially envisioned to reach out to 25,000 individuals, concretely 20,000 IDPs and 5,000 individuals from host communities, disaggregated by sex and age (please, refer to the table below for the actions planned in the beginning of the project). In total, IOM reached out to 38,561 (37,693 IDPs and 868 individuals from host communities), while the sex and age disaggregation of the reached individuals slightly differ, due to the current presence of different age and sex groups in the area.

Considering that IOM overreached the foreseen targets, the differences in figures of sex and age disaggregation did not have an impact on the operational, nor logistical implementation of the project.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Protection									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	5,440	4,800	3,520	2,240	16,000	5,500	4,000	2,500	2,000	14,000
Host communities	1,360	1,200	880	560	4,000	1,000	500	3,000	2,000	6,500
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	6,800	6,000	4,400	2,800	20,000	6,500	4,500	5,500	4,000	20,500
People with disabilities (PwD) out of the total										
	748	660	484	308	2,200	700	750	600	560	2,610
Sector/cluster	Shelter and Non-Food Items									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	6,800	6,000	4,400	2,800	20,000	7,623	6,310	12,374	11,386	37,693
Host communities	1,700	1,500	1,100	700	5,000	115	116	340	297	868
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	8,500	7,500	5,500	3,500	25,000	7,738	6,426	12,714	11,683	38,561
People with disabilities (PwD) out of the total										
	935	825	605	385	2,750	948	820	595	391	2,754

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

People Indirectly Targeted by the Project

The overall objective of the project was to expand the protection services to vulnerable crisis-affected people, including those with special needs and expand multi-sectoral lifesaving humanitarian assistance to people displaced, with particular attention to women and girls. The activities implemented under the Protection section during this project in the localities of West Darfur, including establishment of the community-based protection committees, training provided and creation of the protection networks, enable to connect the whole communities with various services providers, including those with special needs and vulnerabilities. The mobile protection help desk also raises awareness about information on protection services and providers available in the area, which will support vulnerable crisis-affected people, including those with special needs.

5. CERF Results Framework

Project objective Providing life-saving assistance to crisis-affected populations in Sudan to reduce their vulnerability, restore a minimum sense of dignity, mitigate health risks, and improve living conditions.

Output 1 Most vulnerable displaced households are provided with Emergency Shelter in West Darfur State

Was the planned output changed through a reprogramming after the application stage? Yes No

Sector/cluster Shelter and Non-Food Items

Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	Number of Individuals who received emergency shelter kits	15,000	15,318	Weekly updates, monthly monitoring reports, final report, and monitoring missions
Indicator 1.2	Individuals adequately sheltered	15,000	15,318	Weekly updates, monthly monitoring reports, final report, and monitoring missions

Explanation of output and indicators variance: In line with the project proposal and project design, IOM provided emergency shelter kits to 15,318 individuals, by which it fulfilled the foreseen target.

Activities	Description	Implemented by
Activity 1.1	Conducting needs assessment missions	IOM
Activity 1.2	Procure 3,000 emergency kits.	IOM
Activity 1.3	Transportation of emergency shelters to the distribution sites.	IOM
Activity 1.4	Distribution of emergency shelters to vulnerable households	IOM
Activity 1.5	Undertaking Post Distribution Monitoring exercises.	IOM

Output 2 Most vulnerable displaced households are provided with Non-Food Items (NFI's) in West Darfur State

Was the planned output changed through a reprogramming after the application stage? Yes No

Sector/cluster	Shelter and Non-Food Items			
Indicators	Description	Target	Achieved	Source of verification
Indicator 2.1	Number of Individuals who receive NFI kits	25,000	23,332	Weekly updates, monthly monitoring reports, final report, and monitoring missions
Explanation of output and indicators variance:		IOM provided emergency Non-Food Items kits to 23,332 individuals. The foreseen target under this output was slightly underreached due to the current presence of individuals in the targeted areas.		
Activities	Description	Implemented by		
Activity 2.1	Conducting needs assessment missions	IOM		
Activity 2.2	Procure 5,000 NFI Kits	IOM		
Activity 2.3	Transportation of emergency shelters to the distribution sites	IOM		
Activity 2.4	Distribution of emergency shelters to vulnerable households	IOM		
Activity 2.5	Undertaking Post Distribution Monitoring exercises.	IOM		

Output 3 Protection mechanisms in Ag Geneina locality (including Geneina town and surroundings) are enhanced

Was the planned output changed through a reprogramming after the application stage? Yes No

Sector/cluster	Protection			
Indicators	Description	Target	Achieved	Source of verification
Indicator 3.1	Number of Individuals who receive protection services	20,000	20,500	Attendance sheets, event photos (e.g., during international celebration of 16 days of activism and football match between youths), reports, IPA delivery report.
Indicator 3.2	Quick refresher training for protection workers/volunteers	30	30	Attendance sheets, reports.
Indicator 3.3	Number of community-based protection network/structures identified/created and/or supported to perform referral functions and provide MHPSS to vulnerable groups or individuals.	1	6	List of the committees, reports, attendance sheets.
Explanation of output and indicators variance:		Under this output, IOM supported 20,500 individuals with protection services. In addition, 30 refresher trainings were conducted for volunteers under the community based-protection committees and workers under psychosocial team.		

Activities	Description	Implemented by
Activity 3.1	Establishment, and support to community-based protection network	IOM
Activity 3.2	Protection monitoring activities, including setting up mobile protection/ helpdesks, for identification and referral of at-risk individuals and for engagement with community members to report concerns.	IOM
Activity 3.3	Identification of at-risk individuals, including provision of MHPSS, and legal assistance and guidance on civil documentation.	IOM
Activity 3.4	Increased advocacy and follow up of individual cases and protection issues at the state, locality, and community levels.	IOM

6. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas⁴ often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

a. Accountability to Affected People (AAP)⁵:

To ensure the effective participation of targeted groups (women, girls, IDPs, host communities and people with disabilities) in the decision-making process and further promote AAP, IOM provided trainings and awareness sessions to enhance the knowledge of the communities about the protection of individual rights especially the right of vulnerable individuals. In addition, through the mobile protection help desk, the most isolated and remote communities were reached out with crucial home-to-home information and referral pathways to access various services, including life-saving information about humanitarian assistance. People with special need of urgent support, such as orphaned children or adolescent girls at risk, were immediately linked to available services by Help Desk volunteers. Furthermore, bi-weekly meetings were conducted to discuss the challenges the community is facing and facilitate the way forward.

b. AAP Feedback and Complaint Mechanisms:

Through the establishment of community-based committees (composed of women, men, youth and community leaders), IOM was able to ensure that concerns and feedback from the community were taken into consideration and modifications in the project design/delivery of the interventions implemented when needed. IOM ensured that community members,

⁴ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

⁵ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

especially those with specific vulnerabilities (female headed households, youth, and people with disabilities) were aware and well informed of the feedback mechanisms.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

To create awareness of women/youth associations to understand the protection issues and to be part of the solutions, IOM organized a celebration of 16 days of activism, including awareness sessions on GBV, child protection and PSEA policies. As part of the celebration, football tournament for adolescence was organized in EL MALAK Girls school in Ag Geneina locality to create awareness about protection of people with special need and social cohesion. In total, 10 teams (diverse in IDPs, host communities and nomadic communities) participated in the competition. As part of the awareness sessions, 8 workshops were conducted for youth and adolescence about social cohesion and protection of people with special needs. Furthermore, all staff members within IOM have to undergo a mandatory PSEA training and periodical refresher trainings and implementing partners sign agreements with clauses including PSEA to ensure that PSEA guidelines are adhered to and suspected cases of SEA can be reported through IOM's official channels, while ensuring accessibility, confidentiality of the person reporting the case, and protection of beneficiaries including providing for their immediate needs including counselling and support/basic services in a voluntary and safe manner.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

IOM established and supported mental health and psychosocial team, comprised of 7 social workers from the ministry of health, who were trained on protection concepts and psychosocial services. These are particularly focused on identifying vulnerable people, including SGBV survivors, traumatized children, as well as vulnerable women/girls and referring them to specialized service providers, such as mental health centres. In addition, the psychosocial team provides psychosocial services to GBV survivors. In addition, during the 16 days of activism organized for youth and adolescent in EL MALAK Girls school in Ag Geneina, the participants underwent an awareness session on GBV and child protection.

Create awareness to women/youth associations to understand the protection issues and to be part of the solutions

e. People with disabilities (PwD):

Under the Protection section, IOM has provided protection assistance to 2,750 people with disabilities. IOM also provided training to the community-based protection committees on identification of people with special needs, including those with disabilities and the ways to connect them with the various services so they have access to better protection. In addition, people with special needs, including those with disabilities were reached through the protection help-desk and after their identification, they were immediately linked to available services by Help Desk volunteers. Furthermore, within the project activities, IOM ensures that people with disabilities are fully integrated in the community training sessions. Beneficiaries' selection and their needs are incorporated in the design of the activities. Under the ES/NFI section, people with disabilities and households with children with disabilities were prioritized and selected to receive the housing materials.

f. Protection:

During the project implementation, IOM identified people with special needs, including those under the risks of GBV, GBV survivors, traumatized children, as well as vulnerable women/girls. Protection cases were also referred to the relevant protection mechanism in place at the state level or to the relevant agency as required.

g. Education:

In Sudan, there are approximately 1,461,000 people with education needs (80% are children between the ages of 4 and 17 years old, and 30% are youth and adults between the ages of 18 - 49). The facilities available are limited and can't ensure equitable access to education for all children and youth, school supplies remain low or limited, and the average enrolment for basic school is at 40%. IOM ensures that children and youth are fully integrated throughout all activities under this project.

7. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	Choose an item.	NA

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

NA

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction

8. Visibility of CERF-funded Activities

Title	Weblink

3.3 Project Report 21-RR-FPA-005

1. Project Information

Agency:	UNFPA	Country:	Republic of the Sudan
Sector/cluster:	Protection - Gender-Based Violence	CERF project code:	21-RR-FPA-005
Project title:	Provision of quality comprehensive and life- saving support for GBV survivors among the most vulnerable people in West Darfur		
Start date:	22/04/2021	End date:	21/01/2022
Project revisions:	No-cost extension <input checked="" type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>

Funding

Total requirement for agency's sector response to current emergency:	US\$ 2,177,901
Total funding received for agency's sector response to current emergency:	US\$ 300,000
Amount received from CERF:	US\$ 300,000
Total CERF funds sub-granted to implementing partners:	US\$ 70,404
Government Partners	US\$ 0
International NGOs	US\$ 0
National NGOs	US\$ 70,404
Red Cross/Crescent Organisation	US\$ 0

2. Project Results Summary/Overall Performance

During the reporting period, UNFPA implemented the following activities together with its implementing partner Child Development Fund (CDF):

Conducted two four-day trainings for 50 health care providers on Clinical Management of Rape services. The content of the training included psychosocial support (PSS) and direct patient care for survivors of GBV. Participants were from the State Ministry of Health (SMOH), Child Development Foundation (CDF), Médecins Sans Frontier (MSF), International Medical Corps (IMC) and World Relief.

Provided psychosocial support and case management services to survivors of GBV whose cases were reported to social workers. Survivors of GBV requiring additional services were referred to other service providers, where transportation and other related costs such as for service provision were covered.

Established ten community-based protection networks (CBPNs) in ten IDP gathering points in Geneina. 15 members of each CBPN were provided with a three-day training on GBV core concepts, GBV guiding principles, psychosocial support, existing services and referral systems.

Five temporary Women and Girls Spaces were established in Mohera girl's school, Imam Kazim school, Health science academy, Musheradin and Donkidisa IDP gathering points. The spaces are used for women to have group recreational

activities, access to GBV information and awareness raising sessions, educational and skill building activities and a specialised desk for reporting GBV incidents to assigned social workers.

6 Safety audits were conducted.

Distributed 5,428 dignity kits to displaced and vulnerable women and girls in 10 gathering points. In addition, women and girls received information about forms of GBV, existing services for GBV survivors and referral systems.

3. Changes and Amendments

The dignity kits distributed were from the UNFPA stock. The procurement process for the replenishment of the dignity kits has been started on 22nd of April 2021, with the requisition having been placed on 2nd of May 2021. Due to the impact of COVID19 on supply chains, the order has however not yet been handed over to the freight forwarder and hence has not yet been financially received in the system and charged to the CERF grant. UNFPA hence requested a No Cost Extension until 21st of January 2022 to allow for the procurement process for the replenishment of dignity kits to conclude. The Dignity Kits were financially received within the extension period

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Protection - Gender-Based Violence									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	8,900	255	3,433	127	12,715	5,300	150	2,826	85	8,361
Host communities	0	0	0	0	0	0	0	0	0	0
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	8,900	255	3,433	127	12,715	5,300	150	2,826	85	8,361
People with disabilities (PwD) out of the total										
	427	12	165	6	610	424	0	226	0	650

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

5. People Indirectly Targeted by the Project

In total 27,140 women, girls, men and boys benefitted indirectly from the intervention from awareness raising campaigns informing the whole community about GBV concepts, available services, the importance of reporting sexual violence cases within 72 hours for medical care and generating evidence for legal prosecution, as well as the required community support for GBV survivors. The wider community also benefited from the strengthening of the overall service delivery capacity, including the trainings of health care providers on clinical management of rape. Moreover, items in the distributed dignity kits, such as torch lights, also serve the families of the women and girls who receive them.

6. CERF Results Framework

Project objective	Ensuring the safety, health and dignity of women and girls in the most affected areas in West Darfur Provision of quality multi-sectoral GBV response services to women and girls with a survivor-centred approach and GBV risk mitigation measures			
Output 1	Lifesaving GBV services are available and accessible to women and girls			
Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				
Sector/cluster	Protection - Gender-Based Violence			
Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	Number of women and girls (disaggregated by age) who accessed PSS and case management	90	97	Case management tracking reports and services record
Indicator 1.2	Number of women and girls who attended group PSS and sensitization activities on existing services at the temporary women's space	7200	8,361	Weekly reports from the WCs
Indicator 1.3	Number of health care providers and GBV social workers with demonstrated knowledge improvement after the CMR and Case Management refresher trainings using pre and post trainings tests	55	50	attendance records, post training survey
Explanation of output and indicators variance:		NA		
Activities	Description	Implemented by		
Activity 1.1	Refresher trainings for health care providers on Clinical Management of Rape (CMR) services to survivors of GBV and social workers on GBV case management services for survivors of GBV	UNFPA, SMOH		
Activity 1.2	Provide PSS and case management services to women and girls including survivors of GBV and referrals based on their consent	UNFPA, Combatting Violence Against Women Unit (CVAW)		

Activity 1.3	Conduct group PSS and sensitization activities in the temporary women's spaces on GBV related issues and existing services	Child Development Foundation, CVAW, SMOH
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Output 2	GBV risk mitigation measures contribute to positive changes in reported perceptions of safety and risk			
Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input type="checkbox"/>				
Sector/cluster	Protection - Gender-Based Violence			
Indicators	Description	Target	Achieved	Source of verification
Indicator 2.1	Number of vulnerable women and girls of reproductive age provided with dignity kits, as a part of activities for sharing life-saving protection information	5,428	5,428	Distribution lists
Indicator 2.2	Number of safety audit conducted and recommendations shared with sector leads	6 (one per month)	6	Reports
Indicator 2.3	Number of temporary women's safe spaces supported	5	5	Reports, attendance lists
Explanation of output and indicators variance:		NA		
Activities	Description	Implemented by		
Activity 2.1	Procurement and distribution of dignity kits to vulnerable women and girls of reproductive age, followed by rapid beneficiaries satisfaction assessment	UNFPA, Child Development Foundation, CVAW		
Activity 2.2	Conduct safety audit to assess the safety concerns of women and girls and identify risk factors, provide recommendations to address the concerns	UNFPA, CVAW, Child Development Foundation		
Activity 2.3	Support five temporary women's safe spaces in selected gathering points based on the consultation with women and girls as well as community leaders	SMOH, CVAW		

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas⁶ often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

⁶ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

a. Accountability to Affected People (AAP)⁷:

UNFPA has fully integrated the IASC Commitments for Accountability to Affected Populations (CAAP) at the global, regional, sub -regional and country levels. The planning, implementation, monitoring and evaluation of the specific project and all UNFPA programs are designed to ensure a continuous cycle of information flow from and to the affected and served communities.

The strategic objectives of this project followed the GBV sub-sector HRP 2021 framework and the UNFPA HRP 2021 that is based on a cross-sectoral analysis of gaps and capacities to prevent and respond to protection needs of vulnerable populations, including GBV-related needs.

The objectives are aligned with the findings from UNFPA regular monitoring and the global minimum standards for GBV prevention and response in emergencies, the MYHS and humanitarian principles (i.e. Do No Harm) which are monitored regularly through partners who provide both onsite coaching and mentoring. UNFPA, in close consultation with implementing partners, organised regular monitoring visits and field visits to the targeted gathering points and had individual/ focused group discussions with beneficiaries to gather meaningful feedback on its program, and make timely adjustments of the provided packages during the project period. In addition, UNFPA continued using the beneficiaries' satisfaction tool for Dignity Kits in West Darfur. Community members and women and adolescent girls in particular were co-leading safety audits.

b. AAP Feedback and Complaint Mechanisms:

Information sessions are conducted with a focus on the prevention of sexual exploitation and abuse (PSEA) and sharing the number of the nationwide complaints' mechanism. For other complaints, the main route used by the target population are direct complaints to UNFPA or implementing partner staff. UNFPA compiles and analyses complaints. Depending on the classification of complaints received, next steps are taken, and feedback is provided to the complainant. A more structured AAP mechanism is currently under development.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

UNFPA has a zero-tolerance policy for incidents of sexual exploitation and abuse and strictly follows up on the reported cases and responds to the situation using the survivor-centred and principles approach based on the organization specific and international standards. All UNFPA staff and personnel in West Darfur have received training on PSEA. Furthermore, all implementing partners directly and indirectly engaged with beneficiaries will be trained on PSEA policies as part of the contract agreement. In addition, a clear, simple and accessible reporting system has been promoted to the targeted population to report incidents of SEA. Once reports are made and actions taken, close follow up is made with the survivors of SEA to ensure their safety and access to services as needed.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

⁷ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

The project targeted women, girls, men and boys affected by the humanitarian crisis in the targeted locations to ensure equitable access to available and established resources. In line with the IASC gender & age marker, gender is mainstreamed throughout the project cycle. All community-based interventions sought to mitigate the negative impacts of gender inequality by involving male community leaders and the dissemination of information within and through the established protection networks. In addition, targeting women-led organizations has been a very strategic intervention toward improving the sustainability of GBV programs in the targeted areas and ensuring impact beyond the humanitarian assistance provided.

e. People with disabilities (PwD):

Approximately 8% of the target population reached are persons with disabilities. PwD were reached through awareness-raising interventions, dignity kit distribution and activities offered in the Women Centres. Community-based protection networks are sensitized towards promoting protection, safety and respect for the dignity of persons with disabilities.

f. Protection:

GBV remains a life-threatening concern particularly among women and girls in displacement. The core of the project was the provision of survivor-centred, multi-sectoral GBV services and GBV awareness raising guided by the GBViE minimum standards and IASC guidelines.

g. Education:

Education was not part of the project; however, the Women's Safe Spaces offered various skill building activities including vocational training.

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	Choose an item.	NA

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

NA

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction

| | | |

9. Visibility of CERF-funded Activities	
Title	Weblink

3.4 Project Report 21-RR-CEF-009

1. Project Information			
Agency:	UNICEF	Country:	Republic of the Sudan
Sector/cluster:	Water, Sanitation and Hygiene Education	CERF project code:	21-RR-CEF-009
Project title:	Addressing WASH and Education needs of children and communities impacted by inter-tribal conflicts in West Darfur		
Start date:	22/04/2021	End date:	21/10/2021
Project revisions:	No-cost extension <input type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:		US\$ 20,000,000
	Total funding received for agency's sector response to current emergency:		US\$ 3,500,000
	Amount received from CERF:		US\$ 1,800,000
	Total CERF funds sub-granted to implementing partners:		US\$ 567,751
	Government Partners		US\$ 411,936
	International NGOs		US\$ 0
	National NGOs		US\$ 155,815
Red Cross/Crescent Organisation		US\$ 0	

2. Project Results Summary/Overall Performance

For Education: this CERF project was implemented in partnership with the State Ministry of Education West Darfur and Peace Light national non-governmental organisation in the period April to September 2021.

This final project report presents the education achievements under this project, which assisted 22,488 students (13,082 girls and 9,406 boys) in 35 targeted schools within three localities (El Geneina 24 schools, Beida 7 schools, Kerenik 4 schools). The CERF funding contributed to the provision of learning opportunities for internally displaced and vulnerable host community children to continue their education in a safe learning environment. A total of 89 temporary learning spaces were constructed to host 8,455 students (5,200 girls and 3,255 boys), of which 2,100 are host communities' children (1,240 girls and 860 boys). Furthermore, 35 classrooms were rehabilitated, providing improved learning environment for 3,920 students (2,250 girls and 1,670 boys) in seven schools out of which 2,140 are children from internally displaced communities (1,530 girls and 610 boys).

Teaching and learning materials were distributed in the 35 targeted schools, reaching 18,443 students (10,337 girls and 8,106 boys) of which 2,635 host community children (1,715 girls and 920 boys) as well as 420 teachers (220 men and 200

women) in the localities of Beida, Geneina and Kerenik. Those supplies contributed to an increased enrolment in schools and reduced drop-out in the target areas. The project also supported the training of 690 teachers and parent-teacher association (PTA) members from 31 schools on quality education and co-school managements (435 men and 255 women).

For WASH: through this CERF grant, UNICEF and its partners managed to reach 84,438 people (including 73,590 IDPs) with water, sanitation and hygiene (WASH) lifesaving intervention in 20 gathering points (slightly more gathering points (35) were reached with hygiene supply distribution) and ten (10) nomad communities surrounding Geneina town. The CERF funds enabled UNICEF and the governmental Water an Environmental Sanitation Project (WES) to provide critical water trucking service in 13 gathering points that provided 7.5ℓ/person/day for 17,000 people per day on average over six months. This happened while working on the expansion of the town's water supply network in order to achieve more sustainable water supply for the gathering points. Overall, the water activities managed to serve a larger number of gathering points than the initial plan: seven (7) gathering points were connected to the urban water network (against three (3) planned), ten (10) boreholes were drilled (against three (3) planned) and equipped with six (6) (mini) water yards and four (4) hand pumps. Daily water chlorination was conducted at 13 gathering points. This activity was monitored by 125 trained community volunteers. For nomad communities, eight (8) water facilities were established (2 mini water yards were upgraded, 2 mini water yards were rehabilitated, and 4 hand pumps were constructed) against the original plan of five water yards to be established.

For sanitation and hygiene: an intensive hygiene promotion campaign and solid waste collection and emergency latrine construction was implemented at the gathering points. There was an increased occurrence and risk of communicable disease outbreaks (including COVID-19), due to extremely high congestion. In total, 149 emergency latrines and 60 bathrooms were built, two (2) new latrines were built in schools while 55 latrines were rehabilitated. The sanitation committees active in 20 gathering points (with 100 trained hygiene promoters), with active participation by women in the communities, supported regular activities such as household visits, hygiene supply distribution, community awareness raising, and solid waste collection. In addition, community-led total sanitation (CLTS) was conducted in ten (10) nomad communities as an additional activity. So far, eight (8) communities have already achieved open defecation free status.

3. Changes and Amendments

The focus of water intervention shifted from a short-term response (water trucking) to more medium-term response (establishment of water sources at gathering points). As a result, the number of water trucking beneficiaries was reduced from 50,000 to 17,000 per day (on average), while the beneficiary number for sustainable water sources, such as water yards and urban water network, increased from 10,000 to 41,000. Several additional activities were conducted utilising the fund balance. These additional activities include water quality monitoring and chlorination in 13 gathering points, construction of 60 emergency bathrooms, and CLTS/ hygiene promotion in ten (10) nomad communities.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Education									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	179	179	5,851	8,535	14,744	200	220	9,237	6,736	16,393
Host communities	76	76	2,507	3,657	6,316	55	215	3,845	2,670	6,785
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	255	255	8,358	12,192	21,060	255	435	13,082	9,406	23,178

People with disabilities (PwD) out of the total

25	25	834	122	1,006	25	27	66	96	214
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Sector/cluster	Water, Sanitation and Hygiene									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	10,200	9,800	15,300	14,700	50,000	15,758	12,560	23,520	21,752	73,590
Host communities	2,040	1,960	3,060	2,940	10,000	2,213	2,126	3,319	3,190	10,848
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	12,240	11,760	18,360	17,640	60,000	17,971	14,686	26,839	24,942	84,438

People with disabilities (PwD) out of the total

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

122	118	184	176	600	60	55	80	70	265
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* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

5. People Indirectly Targeted by the Project

The direct beneficiaries of this project are internally displaced persons (IDPs) residing in 20 gathering points and residents of ten (10) nomad communities. Under this project, six (6) water yards and mini water yards, four (4) hand pumps, and two (2) latrines were constructed in the gathering points. In addition, seven (7) gathering points were connected to the urban water network, and 55 latrines were rehabilitated. While these facilities are currently used by the displaced people, when they return to original location, the gathering points will be used by Geneina city residents as public offices (state ministry building etc.), and local people will benefit from the sustainable facilities and services.

6. CERF Results Framework

Project objective	Addressing humanitarian WASH and Education needs of children, women and their families at the IDP gathering points and nomad communities surrounding Geneina town of West Darfur state.				
Output 1	Access to basic, gender-sensitive water supply is improved and sustained for 60,000 IDPs and nomad communities.				
Was the planned output changed through a reprogramming after the application stage?				Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Sector/cluster	Water, Sanitation and Hygiene				
Indicators	Description	Target	Achieved	Source of verification	
Indicator 1.1	Number of people in humanitarian situation who have access to basic water facilities meeting SPHERE standards (minimum 15 litre/ person/ day)	60,000	52,000	Partners' progress reports, monitoring visit reports, monthly output indicators	
Explanation of output and indicators variance:		Due to the reduction of beneficiaries reached with water trucking (plan: 50,000, actual: 17,000) the water activity indicator total has become less than the target. However, it must be noted that most of the beneficiaries (35,000 people) gained access to basic water through sustainable water sources: either access to mini water yards or hand pumps, rather than short-term water trucking.			
Activities	Description	Implemented by			
Activity 1.1	Water Trucking for 20 gathering points in Geneina town	West Darfur State Water Corporation (SWC), Water and Environmental Sanitation Project (WES).			
Activity 1.2	Rehabilitation and expansion of urban water network and extension of water points to IDP gathering points.	West Darfur State Water Corporation (SWC), Water and Environmental Sanitation Project (WES).			
Activity 1.3	Construction of new mini Water Yards for nomad communities outside of Geneina town	International Aid Services (IAS).			
Output 2	Access to basic, gender-sensitive sanitation facilities is improved and sustained for 9,900 IDPs and hygiene awareness raising including COVID-19 prevention reach 60,000 IDPs and nomad communities				
Was the planned output changed through a reprogramming after the application stage?				Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

Sector/cluster	Water, Sanitation and Hygiene			
Indicators	Description	Target	Achieved	Source of verification
Indicator 2.1	Number of people in humanitarian situation who have access to sanitation facilities meeting SPHERE standards (maximum 50 person to share 1 drop hole as initial phase, short-term arrangement)	9,900	11,400	Partners' progress reports, monitoring visit reports, monthly output indicators.
Indicator 2.2	Number of people in humanitarian situation who have participated in awareness raising sessions for hygiene promotion and COVID-19 prevention	60,000	84,438	Partners' progress reports, monitoring visit reports, monthly output indicators
Explanation of output and indicators variance:		The indicator 2.1 achievement is higher than the initial plan due to the larger number of rehabilitated latrines (55 units), each of them is used by 50 people. The indicator 2.2 achievement is higher due to the two reasons, one is the changing number of IDPs in each gathering point over the project period. The second reason is that UNICEF and partners worked in ten (10) nomad communities for CLTS and hygiene promotion, which was not included in the original proposal, and reached 10,848 people from these ten communities		
Activities	Description	Implemented by		
Activity 2.1	Construction of emergency shared latrines at gathering points	Peace Lights for Rural Development Organization (PLRDO), West Darfur State Ministry of Health (SMoH)		
Activity 2.2	Construction of new VIP latrines at gathering points (schools)	West Darfur State Ministry of Health (SMoH)		
Activity 2.3	Rehabilitation of the existing VIP latrines at gathering points (schools)	Peace Lights for Rural Development Organization (PLRDO)		
Activity 2.4	Support solid waste management at gathering points (twice a week)	Peace Lights for Rural Development Organization (PLRDO)		
Activity 2.5	Provision of hygiene kits & WASH NFIs (including soap & Jerrycans)	Peace Lights for Rural Development Organization (PLRDO)		
Activity 2.6	Support hygiene promotion activities, including COVID-19 prevention, at gathering points and nomad communities	Peace Lights for Rural Development Organization (PLRDO)		

Output 3 To ensure continuity of and improved access to quality education for IDPs and host community boys and girls

Was the planned output changed through a reprogramming after the application stage? Yes No

Sector/cluster	Education			
Indicators	Description	Target	Achieved	Source of verification
Indicator 3.1	# of classrooms established and/or rehabilitated to ensure continuity of learning	119	124	Field visit reports
Indicator 3.2	# of IDP and host community boys and girls accessing education	12,192 boys 8,358 girls	22,488 students (13,192 girls and 9,296 boys)	School enrolment registers

Indicator 3.3	# of teachers/PTA with improved capacity to provide and support quality education	510 (50% female)	690 (435 men and 255 women)	Training reports
Explanation of output and indicators variance:		NA		
Activities	Description	Implemented by		
Activity 3.1	Establishment of learning spaces, through temporary learning spaces and rehabilitation of affected classes and WASH facilities	State Ministry of Education and Peace Light Organization		
Activity 3.2	Provision of teaching and learning materials to ensure quality learning environments.	State Ministry of Education and Peace Light Organization		
Activity 3.3	Training of teachers and PTA members to provide and support quality education, through refresher trainings.	State Ministry of Education and Peace Light Organization		

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas⁸ often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

a. Accountability to Affected People (AAP)⁹:

This CERF project was implemented with strong consideration for accountability to affected populations (AAP) at all stages of project implementation. For the project implementation, participation of affected population has been essential, for example targeted IDP communities actively conducted hygiene promotion and solid waste collection as community hygiene promoters. Nomad community residents participated in community-led total sanitation efforts to ensure local ownership of sanitation and hygiene promotion with locals. At the gathering points, 125 IDP volunteers were trained to monitor the quality of supplied water and conduct chlorination if needed. Likewise, school PTA committees and community members were involved in all phases of the implementation of education activities, starting with the selection of school sites, design of temporary learning spaces before the start of the construction, as well as monitoring of implementation. Community members also participated in the distribution of teaching and learning materials to students.

b. AAP Feedback and Complaint Mechanisms:

During this project period, UNICEF West Darfur has initiated a successful pilot, which solicited feedback directly from the IDPs and host communities who received humanitarian services. This was done to ensure timely reporting of any concerns and bottlenecks. The pilot included the engagement of a local telecom provider that provided a phone number for individuals

⁸ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

⁹ AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

to call to file and track their concerns anonymously. The pilot was initially launched at four (4) gathering points, and later expanded to seven (7) gathering points. According to the tracker system, the most complaints and feedback were about health or WASH services at the gathering points. The feedback helped UNICEF's WASH team and implementing partners to address the challenges in a timely manner. Similarly, to ensure addressing all the needs of students, teachers and parents properly, UNICEF developed a hotline reporting mechanism in IDP gathering point schools.

For the gathering points that are not covered by this pilot, traditional consultation modalities, including small group community meetings, were conducted to receive feedback from the community members. UNICEF's Geneina Field Office also conducted almost daily field visits and focus group discussions with representatives of the concerned population.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

As mentioned on the proposal, PSEA risk assurance procedures were fully integrated into UNICEF's partnership procedures, and both non-governmental partners (IAS and PLRDO) were assessed and encouraged to improve their SEA risk rating (from medium to low). Internally, UNICEF has in-country and HQ-level reporting channels and procedures for victim assistance and accountability. During the Geneina IDP emergency response, UNICEF ensured that community members are aware of the complaint mechanism, which was managed by the protection sector. UNICEF also supported capacity-building of frontline workers to report sexual exploitation and abuse concerns through internal reporting channels. Through continuous partnership engagement, UNICEF partners are trained on safe and confidential reception and handling of sexual exploitation and abuse allegations and providing survivor-centred referrals. Partners are also encouraged to have reporting channel information and updated gender-based violence (GBV) referral pathways available to staff at all times.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

To ensure project interventions address practical and strategic gender needs, the project used and considered gender disparities and social analysis in design the activities to promote women empowerment and encouraged the participation of women, youth and girls in all school activities and events including composition of committees, teachers /PTAs training and encouraging active and positive participation of both males and females in planning, implementation and evaluation of their initiatives.

For WASH activities, the emergency latrines and water collection points are mostly located inside the gathering points' boundaries to avoid long travel time for women and children. Emergency latrines were constructed with 'spiral entrance' to ensure privacy of the occupants in a limited space. With user feedback, the WASH partners progressively improved the emergency latrine superstructure from simple plastic sheet to plastic sheet with timber frame and then to metallic sheet door during the project period to make latrines more robust and private.

e. People with disabilities (PwD):

UNICEF and implementing partners ensured that selected emergency latrines were accessible for people with physical disabilities. Two (2) latrines in schools were also built with accessible ramps. Hygiene promoters were trained and conducted regular household visits to engage and support people with specific needs so that they can perform personal hygiene activities with dignity.

The education sector partner IAS conducted the needs assessment in targeted schools and identified students with disabilities who have been unable to access to education due to their vulnerability and assisted them accordingly. Good to mention that each school was given a questionnaire to monitor and report disability, of children in case found.

f. Protection:

For both WASH and education interventions, protection was ensured for all beneficiaries, especially vulnerable women, adolescent girls and children. UNICEF and its partners have informed the communities about the feedback mechanism on general programmatic issues and protection-related cases in cooperation with the protection sector in West Darfur.

g. Education:

The education response under this project was coordinated through the Education Sector, together with the State Ministry of Education, and informed by needs assessments within the IDP communities as well as host communities. As some of the schools in Geneina are still used as gathering point for the IDPs, UNICEF WASH intervention selected more sustainable means to secure access to basic water and sanitation even after the departure of IDPs in future, so that school children can continue to use water points and latrines in the long-term.

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	Choose an item.	NA

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

NA

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction

9. Visibility of CERF-funded Activities

Title	Weblink
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Voice of Children in West Darfur

[Voices of children in Sudan's West Darfur | UNICEF Sudan](#)

Story on WASH

<https://www.unicef.org/sudan/stories/community-led-sanitation-efforts-gives-hope-and-health>

Project Report 21-RR-WHO-007

1. Project Information			
Agency:	WHO	Country:	Republic of the Sudan
Sector/cluster:	Health	CERF project code:	21-RR-WHO-007
Project title:	Supporting the emergency health response to population displacements due to inter-communal conflict in El Geneina, West Darfur		
Start date:	26/04/2021	End date:	26/01/2022
Project revisions:	No-cost extension <input checked="" type="checkbox"/>	Redeployment of funds <input type="checkbox"/>	Reprogramming <input type="checkbox"/>
Funding	Total requirement for agency's sector response to current emergency:		US\$ 1,200,000
	Total funding received for agency's sector response to current emergency:		US\$ 60,000
	Amount received from CERF:		US\$ 599,139
	Total CERF funds sub-granted to implementing partners:		US\$ 111,347
	Government Partners		US\$ 70,028
	International NGOs		US\$ 0
	National NGOs		US\$ 41,319
Red Cross/Crescent Organisation		US\$ 0	

2. Project Results Summary/Overall Performance

- The CERF funded action supported the emergency health response after internal displacement due to intercommunal violence in the area of El Geneina in 2021. The aim of the action was to improve access to and quality of health care for the IDP population, to improve disease surveillance and outbreak investigation and to improve infection prevention and control and hygiene in health facilities and thus, to contribute to a reduction of morbidity and mortality in the target population.
- Procurement and supplies of essential medicines, diagnostics and basic equipment for primary health care and referral health facilities including Covid-19 related IPC supplies and diagnostics tests were carried out as planned (10 IEHK , 10 composed sets of TESK modules and 5000 full sets of PPEs, 2000 Covid-19 PCR tests, WASH and vector surveillance materials). Disruption of international supply line and closure of Port Sudan affected the delivery of supplies and WHO distributed therefore supplies from its rolling stock to assure timely response. PPEs were procured and distributed to health facilities to protect health frontline workers in the context of ongoing Covid-19 transmission, laboratory diagnostic tests were procured and distributed to national public health laboratories.
- Operational support to 4 mobile and fixed primary health care facilities were implemented through NGO partners and the SMOH. One of the clinics provided services 24h/7. The clinics provided services to IDP and host communities in

El Geneina town, 38,163 OPD consultations and 1407 ante and postnatal care consultations were conducted., 4863 children vaccinated in EPI, 60 moderately and severely malnourished children identified and referred to appropriate nutrition services and 112 patients referred to secondary health care services.

- 12 environmental cleaning medical waste management campaigns were carried out in 18 health facilities (15 temporary health facilities at IDP sites and 3 fixed health facilities). This included provision of supplies, segregation of waste, collection and safe management at final disposal sites of 2.5 metric tons of medical waste. Water quality control was carried out in the health facilities during campaigns with 108 samples tested for FRC (72% meeting the WHO requirements). Sanitary inspection was conducted to identify and eliminate the potential sources of contamination around water sources. Cleaning tools, water containers, soap, disinfectants and waste management kits were distributed to health facilities.
- 30 medical staff from Tandalti (ElGeneina), Azarne & Sisi (Krienik) as well Kondabi & Beer dageeg (Serba) were trained in disease surveillance and over the reporting period, diseases surveillance data from 41 temporary/mobile health clinics at the IDP gathering points and 54 fixed health facilities at the state localities were collected, informing health partners. 6 outbreak investigation missions were conducted, 3 for whooping cough, 1 for suspected Cholera and 2 for scabies Krienik and ElGeneina localities. WHO and SMoH/EHA jointly with PHC department conducted five supervision and monitoring visit to the health facilities servicing IDP gathering points in ElGeneina and in Krienik locality 3 supervision and monitoring mission to 11 sentinel sites were conducted each of them of a period over 3 days. WHO and SMoH/EHA continued to monitor assessed basic health needs and access to care in 85 IDP gathering point (19,914 HH of 97,425 people) in and outside El Geneina and shared the information and resulting recommendation to partners to inform service delivery.
- With the support of CERF RR, the entomological surveillance activities were fully achieved targeting 8 sentinel sites in West Darfur state, including EL Geneina. A total of 288 vector surveillance visits were carried out in the 8 sentinel sites based on the seasonal frequency, and the breeding sites positivity during the project implementation period was reduced from 60% to 6.7%. which reduces the exposition of the IDPs. A total of 16,516 mosquito larvae breeding sites inspection took place in line with 1,231 rooms checked for adult population monitoring.
- Vector surveillance tools and personal protective equipment for vector control operators were procured and distributed to improve the coverage and enhance community participation in vector surveillance. The findings of above vector surveillance provided directions to the mosquito larvae control inspections and adult mosquito control measures covered by other WHO funding sources.

3. Changes and Amendments

A no cost extension (NCE) for three months was requested since initially, there were less demands for operational support from health partners than expected and delays in the supply chain had occurred. During the NCE activities were implemented and the overall scope of the intervention did not change.

4. Number of People Directly Assisted with CERF Funding*

Sector/cluster	Health									
Category	Planned					Reached				
	Women	Men	Girls	Boys	Total	Women	Men	Girls	Boys	Total
Refugees	0	0	0	0	0	0	0	0	0	0
Returnees	0	0	0	0	0	0	0	0	0	0
Internally displaced people	21,250	20,400	22,100	21,250	85,000	22,392	21,496	23,286	22,393	89,567
Host communities	12,500	12,000	13,000	12,500	50,000	13,724	13,174	14,273	13,725	54,896
Other affected people	0	0	0	0	0	0	0	0	0	0
Total	33,750	32,400	35,100	33,750	135,000	36,116	34,670	37,559	36,118	144,463
People with disabilities (PwD) out of the total										
	5,063	4,850	5,265	5,063	20,241	5,418	5,201	5,634	5,417	21,670

* Figures represent best estimates of people directly supported through CERF funding. Disaggregation by sex and age represents women and men ≥18, girls and boys <18.

5. People Indirectly Targeted by the Project

184,956 beneficiaries were reached through multi-donor funded health promotion campaigns in the IDP gathering sites, schools, mosques and youths and women groups and in the host communities. Due to the overlapping areas of intervention, it is likely that a proportion of the beneficiaries were targeted several times by the different campaigns and that the number of individuals receiving the health messages is actually smaller. The 12 waste management and hygiene campaigns improved hygiene and infection prevention and control in the 18 targeted facilities but it is actually not possible to estimate how many people benefit from this type of intervention since it is not only the patients consulted in the targeted facilities but also the staff, caretakers and accompanying family members who are less exposed to a risk of disease transmission (especially Covid-19) in health facilities with improved hygiene and waste management. Also, disease and vector surveillance are a benefit for the entire population, IDP and host community. The targeted populations of all these interventions might overlap. Therefore, we consider the population indirectly targeted by the project as the 185,956 beneficiaries reached by health messages.

6. CERF Results Framework

Project objective	The objective of the project is to improve access to and quality of health care for the IDP population and thus, to contribute to a reduction of morbidity and mortality in the target population.			
Output 1	Access to and quality of health care are improved for the IDP population in Elgeneina and its surroundings			
Was the planned output changed through a reprogramming after the application stage? Yes <input type="checkbox"/> No <input type="checkbox"/>				
Sector/cluster	Health			
Indicators	Description	Target	Achieved	Source of verification
Indicator 1.1	Number of outpatient consultation supported	25,000	37,963	Activity report, supervision visit ¹⁰
Indicator 1.2	Number of IEHK kits procured and distributed to partners	10	10	Waybill, donation certificate
Indicator 1.3	Number of waste management campaigns	12	12	Activity reports
Indicator 1.4	Number of TESK kits (surgical supply for 50 interventions) distributed to referral hospitals	10	10	Waybill, donation certificate
Indicator 1.5	Number of joint supervision visits	12	8	Activity reports
Explanation of output and indicators variance:		There were less joint supervision visits by WHO and SMOH implemented than planned due to the security situation in and around El Geneina. More consultations than expected were conducted since a large number of gathering sites were reached by mobile activities.		
Activities	Description	Implemented by		
Activity 1.1	Operational support to 5 fixed and /or mobile primary health care structures	PCDR (Peaceful Coexistence ORG for Development reconstruction NNGO), SMOH		

¹⁰ Clarification provided by country office on overachievement: The health information system in Sudan is not automated hence the outpatient clinics report the incidences of consultations. Therefore, duplication of reporting is unavoidable.

Activity 1.2	Procurement and supply of essential medicines and material for PHC and referral structures	WHO
Activity 1.3	Waste management campaigns to collect and dispose of medical waste In health facilities	WHO
Activity 1.4	Support to referral hospitals through provision of surgical and medical supplies and laboratory consumables and supplies	WHO
Activity 1.5	Joint supervision with the MOH of health facilities	WHO/SMOH

Output 2 Disease surveillance and outbreak control is strengthened in the reception sites and surrounding host communities

Was the planned output changed through a reprogramming after the application stage? Yes No

Sector/cluster	Health			
Indicators	Description	Target	Achieved	Source of verification
Indicator 2.1	Number of alert investigations by RRT supported by WHO	72	6	Activity report
Indicator 2.2	Number of vector surveillance missions to 8 sentinel sites supported by WHO	288	288	Activity report
Explanation of output and indicators variance:		For indicator 2.1. There were much less outbreak alerts than expected in the IDP sentinel sites and therefore less alert investigation. Instead, assessment missions in 85 IDP sites targeting more than 19,914 households of 97,425 people took place to follow health needs and access to health care for the IDPs and inform health partners interventions.		
Activities	Description	Implemented by		
Activity 2.1	Alert investigation for infectious diseases with epidemic potential and other health hazards carried out by RRT supported by WHO	WHO/SMOH		
Activity 2.2	Vector surveillance missions to 8 sentinel sites are carried out to inform about the risk of increased transmission and inform the vector control carried out by WASH	WHO/SMOH		

7. Effective Programming

CERF expects partners to integrate and give due consideration to cross-cutting issues such as Accountability to Affected People (AAP), Protection from Sexual Exploitation and Abuse (PSEA), People with disabilities (PwD), Centrality of Protection as well as Gender and Age. In addition, the Emergency Relief Coordinator (ERC) has identified four underfunded priority areas¹¹ often lacking appropriate consideration and visibility: women and girls, people with disabilities, education and protection. **The following sections demonstrate how cross-cutting issues and the ERC's four underfunded priority areas have been addressed through project activities and should highlight the achieved impact wherever possible.**

¹¹ These areas include: support for women and girls, including tackling gender-based violence, sexual and reproductive health and empowerment; programmes targeting people with disabilities; education in protracted crises; and other aspects of protection. The ERC recommended an increased focus on these four areas to ensure that they be given due consideration by RC/HCs and UNCTs/HCTs when prioritizing life-saving needs for inclusion in CERF requests. While CERF remains needs-based, the ERC will be looking for country teams to prioritize projects and mainstreamed activities that systematically and effectively address to these four historically underfunded areas. Please see the Questions and Answers on the ERC four priority areas [here](#).

a. Accountability to Affected People (AAP) ¹²:

WHO conducted jointly with SMOH, outbreak investigations in Kreinik and El geneina localities, supervision visits in sentinel sites and health structures and independent assessments in collaboration with SMOHs in 85 gathering sites of IDPs. During the assessments individual and group discussions take place including women, girls and PwD in order to assess the health status of the population, identify health needs and pass appropriate health messages and information adapted to the health risks such as Covid-19, water borne diseases like Cholera and for Scabies.

b. AAP Feedback and Complaint Mechanisms:

No complaints about activities funded by CERF or other donors were obtained. Feed-back on WHO and potential complaints, can be posted through complaint boxes in the states at the different sites of interventions to give communities the opportunity of anonymised complaint. In addition, WHO staff and non-staff members are encouraged to report any suspicious wrongdoing to WHO and in order to avoid retaliation the identity of a whistle-blower that comes forward for advice regarding suspected wrongdoing is protected. Staff and non-staff can contact for advice the Ethics team in the Office of Compliance, Risk Management and Ethics (CRE) or can report through the Integrity Hotline. WHO Sudan country and state office staff are briefed on the policy and are encouraged to promote it in the areas of implementation.

c. Prevention of Sexual Exploitation and Abuse (PSEA):

WHO adheres to a strict zero tolerance policy with regards to SEA and by makes available reporting and protection mechanisms for staff, collaborators and beneficiaries. Any acts of physical violence and sexual harassment is addressed. WHO staff must undergo regular, obligatory PSEA training and face-to-face training was conducted for staff. WHO expanded its collaboration with the PSEA network established in Sudan and advanced the implementation of the PSEA Joint Framework of Action and the Sudan PSEA program. A dedicated officer to scale up PSEA in Sudan is under recruitment as part of a strategy steered by WHO headquarter. Beneficiaries and staff can report through anonymised processes and through hotlines. No complaints have been received during the reporting period.

d. Focus on women, girls and sexual and gender minorities, including gender-based violence:

WHO mainstreams gender in its project implementation and to promotes gender equality and equity in health service delivery. During CERF funded project implementation, WHO collected and analyzed sex, age and disability aggregated data especially during the assessment and supervision visits and through the disease surveillance network to monitor implications of the crisis on the IPD population with a special focus on women and girl. Gender balance among health workers was promoted to ensure that female workers are accessible to meet the medical, social and protection needs of women and girls. 60% of the staff trained in disease surveillance was female. Procurement and distribution of medicines

¹² AAP and PSEA are part and parcel of IASC commitments, and therefore mandatory for compliance for all UN agencies and partners. Agencies do not necessarily need to establish new AAP and PSEA mechanisms for CERF projects if functioning ones are already in place. For more information please refer to the [IASC AAP commitments](#).

and medical supplies improved access to health care for the overall population, all genders and age groups and address some of the specific needs of women and girls in reproductive health care.

e. People with disabilities (PwD):

The CERF funded project increased access to and quality of health care for the IDP population and to reduce morbidity and mortality in the reception sites of ElGeneina and surrounding localities and immediate host communities. The interventions are targeted to the general population including people living with disabilities. WHO promoted adequate access to health services for PwD with the population living in camps and in the host communities.

f. Protection:

WHO has a comprehensive approach to health as a human rights. This CERF funded project targeted IDPs and the immediate host communities through scale up service delivery and access to health. The project integrated specifically vulnerable populations such as people over 60, children under five at risk and women particularly exposed in IDP settings. The project takes thus into account the principles of equity, equality and non-discrimination. Services were delivered specifically in the areas of the reception sites of IDPs to address also the problem of barriers of access to health through health care delivery closed to the beneficiaries.

g. Education:

NA

8. Cash and Voucher Assistance (CVA)

Use of Cash and Voucher Assistance (CVA)?

Planned	Achieved	Total number of people receiving cash assistance:
No	Choose an item.	NA

If **no**, please describe why CVA was not considered. Where feasible, CVA should be considered as a default response option, and multi-purpose cash (MPC) should be utilised wherever possible.

If **yes**, briefly note how CVA is being used, highlighting the use of MPC, and if any linkages to existing social protection systems have been explored.

NA

Parameters of the used CVA modality:

Specified CVA activity (incl. activity # from results framework above)	Number of people receiving CVA	Value of cash (US\$)	Sector/cluster	Restriction

9. Visibility of CERF-funded Activities

Title	Weblink
NA	NA

ANNEX: CERF FUNDS DISBURSED TO IMPLEMENTING PARTNERS

CERF Project Code	Cluster/Sector	Agency	Implementing Partner Name		Sub-grant made under pre-existing partnership agreement	Partner Type	Total CERF Funds Transferred to Partner US\$
			Extended Name	Acronym			
21-RR-WHO-007	Health	WHO	PEACEFUL CO-EXISTENCE ORG FOR DEVELOPMENT & RECONSTRUCTION (PCDR)	PCDR	No	NNGO	\$41,319
21-RR-WHO-007	Health	WHO	GOVERNMENT OF SUDAN	GOS	No	GOV	\$37,822
21-RR-WHO-007	Health	WHO	GOVERNMENT OF SUDAN	GOS	No	GOV	\$32,206
21-RR-CEF-009	Education	UNICEF	Ministry of education west Darfur	MoE	Yes	GOV	\$411,936
21-RR-CEF-009	Education	UNICEF	Peace Lights For Rural Development Organization	PL	Yes	NNGO	\$155,815
21-RR-IOM-005	Protection	IOM	World Relief	WR	Yes	INGO	\$200,000
21-RR-FAO-005	Agriculture	FAO	Community Development Agency	CDA	No	NNGO	\$49,803
21-RR-FPA-005	Gender-Based Violence	UNFPA	CHILD DEVELOPMENT	CDF-West Darfur	Yes	NNGO	\$70,404