

DARFUR: FORWARD HUMANITARIAN STRATEGY
JULY 2004 – MARCH 2005

SUMMARY

Agencies continue to struggle to stabilise the acute humanitarian crisis affecting the people of Darfur. Although humanitarian operations are beginning to ramp up with increased presence of UN agencies, ICRC and NGOs, there is still insufficient capacity on the ground to meet the scale and severity of the crisis. The emerging rainy season poses severe challenges, including increasing logistical difficulties, growing threats of disease, deteriorating public health and the potential for heightened mortality rates. At the same time, the security situation remains unstable. Vulnerable populations, including IDPs, continue to be subject to harassment, human rights violations and abuse on a daily basis. A rapid improvement in protection, security, and response and logistical capacity is therefore critical. Continued high-level political pressure is required on the Government of Sudan to take responsibility for the protection and security of civilians and, along with rebel factions, to comply with ceasefire obligations. Donor funding continues to be slow and insufficient.

INTRODUCTION

2. The aim of this forward strategy is to review the current humanitarian response and determine the UK Government's future engagement. Linked political engagement to address security-related issues is covered separately. Consideration here is given to both war affected populations within Darfur and those displaced into eastern Chad. The planning timeframe is 9 months (July/04-March/05), tying in with the financial year and start of the next major agricultural season. The prime focus is on immediate actions to stabilise the humanitarian situation.

3. The strategy has been developed in consultation with the British Embassy in Khartoum and the Sudan Unit in London and through ongoing dialogue with the Government of Sudan, UN agencies, Red Cross, NGOs and donors in Darfur, Khartoum and London. Given the fluidity of the situation, the strategy will need to be regularly reviewed to take stock of future requirements, notably the transition towards recovery. Required flexibility in action is offered through the inclusion of a contingency fund.

BACKGROUND

Current humanitarian situation & future projections

4. Detailed background and humanitarian analysis is reported elsewhere. In summary, humanitarian needs remain acute and agencies are struggling to stabilise the situation. Over one million people are internally displaced, approximately 105,000 are encamped as refugees in eastern Chad and a further 75,000 are estimated to be in the border area. Populations continue to be at risk of violence, sexual abuse and looting by government-supported militia (Janjaweed), as well as by opposition elements. Protection is a core concern. Pockets of area still remain inaccessible, such as the Jebel Mara, and there continues to be fighting and banditry across the region. Civilians are the prime target of militia attacks and fear returning to their homes, many of which have been destroyed. Their asset base and coping strategies have been severely depleted. African Union ceasefire monitors are not yet fully operational.

5. The initial slow pace of the international response is quickening with many new agencies seeking to engage and UN agencies further gearing up operations. The first wave of agency interventions has been consolidated and is now expanding into new areas. The proliferation of agencies requires robust coordination to ensure appropriate coverage. The ability for agency outreach to support populations away from the main roads is critical.

6. A lot more work is needed to put in place comprehensive analysis of needs and coherent sector strategies. Strengthened coordination remains a top priority.

7. The UN has developed a 90-day plan that sets markers on what needs to be achieved. A core challenge will be ramping up logistics and common services, particularly to address the impact of the rains. These have now started and there is a very real danger of disease outbreaks, notably cholera, malaria and measles, and heightened mortality rates. The UN has indicated that over the coming months 48 locations in Darfur will be fully accessible by road (population: 473,000); 66 will be partially accessible (population: 669,000); and, 11 will be inaccessible (population: 166,000). In Chad, the refugee camps in the southern border area with Darfur will also be cut off from road access. Airlift of non-food items and airdrops of food will be required, the latter presenting protection concerns and difficulties in targeting the most vulnerable.

8. Darfur was chronically food insecure prior to the crisis, recently experiencing repeated years of drought. The conflict severely affected last year's harvest and production this year is expected to be limited. Further numbers of people (including Arab communities) will fail to cope as a result of the knock on effects on the economy and coping strategies. Such a pattern will continue for the next 15 months until the completion of next year's harvest. Such progress is dependent on a political settlement being reached and the displaced feeling confident to return prior to the rains. There will be substantial recovery needs to cement this, given the dispersed nature and scale of destruction within villages. The resettlement process will stir up property disputes, which, like other parts of Sudan, will need resolution. Reconciliation and prevention of further localised

conflict will provoke very real challenges. Entering such a phase would then lock Darfur into countrywide transitions.

Donor response to the crisis

9. Donor response has in general been slow and limited. The UK, through current commitments, is the second largest donor (19.5% of contributions) and overshadows combined EC and ECHO allocations. UK support, including provision of surge capacity, has played a pivotal role in enabling agencies to launch operations. Other donors' disbursement rates have been slow. Many donors, including Ireland, Italy, France, Sweden, Denmark and Japan, have contributions of less than \$5m. There is now growing attention, as evident in the recent flurry of ministerial visits, but pledges remain short of the mark and are affecting the required scale of response. Although pressure to stimulate further donor support should be maintained, the US, EC/ECHO and UK will remain the principal donors.

Assumptions

10. The strategy is based on the overarching assumption that there will be an improvement in the political and security situation. This includes the successful and timely deployment of the AU Ceasefire Commission, as well as sustained international political pressure on the Government of Sudan and the SLA/JEM. There is a need for flexibility in approach to respond to a worsening or rapid improvement in the security situation.

FORWARD GOALS & OBJECTIVES

Goals

Immediate:

- Stabilise the acute humanitarian crisis faced by the war-affected people of Darfur and ensure their protection from further violence, sexual abuse and forced movement.

Medium term

- Support the return of war-affected people to their communities in safety and dignity and the rehabilitation of their livelihoods.

Outputs

- Ceasefire is maintained, security improves and peace process moves forward.
- Government of Sudan and rebel groups rein in their respective militia and ensure the protection and security of civilians.

- Humanitarian agencies have unfettered and secure access throughout Darfur and eastern Chad and are not obstructed in the passage of staff, equipment and commodities.
- Lead (UN) agencies take full responsibility for their designated sectors and develop coherent response strategies.
- Key macro-enablers, such as UN common logistics and services, are enhanced.
- Additional donor finance and in-kind contributions are mobilised to ensure an adequate and timely response.
- A coherent and holistic response, including sectors less palatable to donors (such as cooking fuels programmes) is enabled.
- Partnerships and coordination amongst donors and between operational agencies becomes more robust.

KEY ACTIONS

11. The following outlines specific actions and support that should be considered.

Protection & security

12. Protection and security is paramount for relieving the humanitarian distress of war-affected people in Darfur and eastern Chad.

13. *Key actions:*

- Sustain high-level political engagement to assist the Government of Sudan to meet its responsibilities for the security and protection of civilians and ensure that the Government and rebels comply with the ceasefire obligations and allow the displaced to return voluntarily. Engage others to reinforce this.
- Support the effective deployment of AU monitors, expanding coverage and addressing current violations.
- Include within a funding envelope for UNHCR an allocation to drive forward its support to protection and site planning in Darfur.
- Continue to support the protection mandate and relief operations of the ICRC in Darfur and Chad.
- Ensure effective deployment of OHCHR monitors.
- Engage with agencies to further consider how assistance strategies can best serve protection needs (including child protection agencies).

Access

14. There have been some recent improvements on the entry and movement of agencies, staff, equipment and commodities into Sudan and Darfur and we welcome the commitments set out in the Joint communiqué between the Government of Sudan and the United Nations. Discussions are under way to open up areas under SLA/SLM control. This will expand aid requirements as new populations become accessible.

15. Key actions:

- Sustain high-level political engagement with the Government of Sudan and rebel groups in order to allow unfettered access to humanitarian agencies and AU monitors throughout Darfur.
- Engage with the UN to ensure that its and other agencies' entry into rebel controlled areas for the provision of humanitarian assistance is based on parties complying with the provisions in the ceasefire agreement. Consideration should also be given to strategies for minimising aid diversion, factoring in experiences from other parts of the country.
- Closely monitor Government of Sudan compliance with agreements set for the entry of humanitarian staff, commodities and equipment and exert further political pressure in the event of delays.

UN Coordination

16. DFID has been instrumental in the launch of OCHA's activities through the provision of Senior Humanitarian Advisers and the deployment of equipment for the Humanitarian Information Centre. OCHA's performance to date has been judged positively, with other donors (such as ECHO) now looking to financially support and sustain OCHA operations. While no further financial support is required at this juncture, the UK will need to continue to support OCHA politically in its central role in coordination, policy and advocacy.

17. Key actions:

- Sustain high-level support to the UN to provide continuity for the position of Humanitarian Coordinator and strengthen this office with high calibre senior officials.
- Encourage UN agencies at headquarter and field-level to take responsibility for their designated sectors.
- Sustain support to ensure OCHA can accommodate the proliferation of agencies, foster credible partnerships and avoid fragmentation of effort.

Donor coordination & lobbying.

18. Current UK support represents a 19.5% contribution of the overall response in Darfur and Chad. Many donors that would be usually expected to provide significant support only have a 1% share. This is having an impact on the ability of agencies to launch and expand operations.

19. *Key actions:*

- Sustain high-level pressure on donors to provide adequate and timely response to the crisis and ensure pledges are transformed into disbursements. This should increasingly entail coordinating with UN agencies to target specific donors to fill critical shortfalls.
- Enhance capital and Khartoum level donor coordination, notably with USAID and EC/ECHO. Give greater focus to how resources are collectively allocated to enable the appropriate speed and coverage of operations and to avoid fragmented funding.
- Lobby EC to release additional funds for Darfur and accelerate disbursement rates.

Common services

20. The ability of the UN and NGO partners to scale up the response to meet requirements and the impact of the rains will be dependent on increasing the capacity of common services, notably logistics and communications. Common services will drive the response. The UN is currently actively engaged in planning for significantly enhancing its logistic capacity for both food and non-food transport in both Darfur and Chad.

21. *Key actions:*

- Consider support for common services. Lobby the UN and other donors to provide additional and strengthened common services to agencies.
- Assess with the UN the need for the Humanitarian Coordinator's office to be strengthened to drive forward common operational services, supported by control of a Special Operations budget.
- Ensure the Government of Sudan gives agreement to the UN for the use of additional airlift in Sudan and Darfur and allow the importation of additional trucking capacity.

Food

22. The nutritional status of the displaced is extremely sensitive to food aid delivery. Delivery will become increasingly problematic during the rains, with the requirement for enhanced trucking and air capacity. The WFP EMOP for Darfur

(\$195.3m) is 33% funded. For Chad (\$17.3m), it is 46% covered. While, on current WFP estimates, the pipeline is relatively stable until September, additional support is required now to enable further planning and pre-positioning and (where possible) local procurement of key food commodities.

23. Key actions:

- Lobby EC to release funds from the 9th EDF for food aid in Darfur.
- Consider further funding for WFP operations in Darfur and Chad.

Nutrition

24. DFID has invested significant funds in nutritional programmes through agencies such as MSF Holland, Belgium and France, ACF, Goal and UNICEF. DFID has also provided support for related sectors, such as health and water – key contributors to the overall nutrition situation. There remains no comprehensive analysis of the nutritional and food security situation, or a coherent strategy for tackling malnutrition. This should encompass other core, inter-related sectors.

25. Key actions:

- Re-float the concept of a Nutrition Coordination Cell, lobby nutrition agencies to develop a plan for it and provide funding for its launch. This cell should provide regular update of the situation, develop and review the response strategy and identify key areas that need to be prioritised.

Shelter, NFI & cooking fuels

26. Plastic sheeting and blankets are 82% and 90% covered through USAID and DFID provisions. USAID has undertaken to fill the gap and provide additional stocks as required. UNJLC (the agency coordinating NFI provisions) requires additional finance to secure the pipeline for locally produced NFIs (jerry cans, soap, kitchen sets, etc.). Despite being appealed for, there is no strategy or response for addressing cooking fuel requirements. As a result: IDPs are forced to sell part of their food ration to buy fuel, so contributing to malnutrition; IDPs are exposed to increased risk of violence or rape whilst collecting fuel wood or fodder for their livestock; and, the environment surrounding IDP concentrations is being denuded, posing longer term risks. Scarce fuel resources are leading to increasing tensions between IDPs and host communities. This is likely to require a range of solutions, including firewood, charcoal, kerosene, as well as (possibly) communal kitchens and fuel-efficient stoves.

27. Key actions:

- Consider support for NFI and cooking fuels. Lobby UNJLC to develop a cooking fuels strategy for Darfur, consider providing funds to launch

this programme and leverage additional donor support. Consider allocating a proportion of the envelope to maintain the pipeline for locally procured NFIs, until other donor finance, notably ECHO's, comes on stream.

Water & sanitation

28. Only about a third of the estimated 1.2 million war-affected people have access to safe drinking water. 85% of the population have no access to safe excreta disposal. There is a very high risk of water borne diseases. UNICEF reports that diarrhoea prevalence rates are over 40% among children under-5 in certain locations. There is no strategy presenting the range of interventions and scale of resources required to address need. Coordination between agencies engaged or planning activities in the sector needs to be strengthened. The sector lacks sufficient delivery capacity.

29. Key actions:

- Consider funding for enhancing water and sanitation delivery. The focus should be on support to UNICEF for identifying, funding and leveraging additional finance for mobilising additional capacity from the region or internationally that can become immediately operational.
- Expand turnkey water and sanitation operations (such as through Oxfam) as necessary.

Health

30. WHO, under the new leadership of Health Action in Crisis (HAC) department, is using Darfur as a test case for a more energetic and engaged response to humanitarian crises. A health strategy is emerging, which seeks to have a solid, no nonsense relationship with its government counterpart and strong partnerships with health agencies. An immediate requirement is to enhance preparedness for responding to communicable disease control, as well as establishment of a basic level of secondary referral care across the region.

31. Key actions:

- Lobby other donors to provide sufficient funds to UNICEF to allow the continuity of the drug pipeline.
- Consider further funding for WHO's response. Given previous support provided (fund and surge capacity), any further funds should be based on progress made by WHO in realising its strategy. This should complement recent institutional support provided to HAC.

- With the high level of Gender Based Violence, continued support is required to ensure that agencies are mainstreaming protection and HIV/AIDS prevention through increased awareness and post-exposure prophylaxis, in line with IASC guidelines.

Agriculture, food security & environment

32. With widespread displacement, ongoing insecurity and significant livelihood destruction, agricultural production in the current main agricultural season is expected to be minimal. Some opportunities exist for vegetable production over the winter, but require immediate resources to allow for procurement lead times, as well as security to allow people to plant. The same applies for next year's main season. A lack of early funding for bulk purchase will drive up costs. Households have lost key productive assets, such as livestock, due to looting, disease, lack of access to fodder or being forced to sell them to make ends meet. Many of the displaced have retained donkeys, which are used for transport and agricultural activities. Lack of fodder and veterinary care is affecting their health and FAO estimates that over 290,000 donkeys are at risk of perishing if there is inadequate assistance. In addition to a further depletion of their asset base, it will result in increasingly reliance on manual labour, notably for women. There is increasing overgrazing and deforestation around IDP concentrations, posing increased protection risks with the need for people to travel further distances. Consideration will need to be given to the environmental clean up of camps when they are vacated.

33. Key actions:

- Consider support for FAO. This could include support to emergency veterinary assistance and cost efficient bulk buying of seeds and tools.
- Encourage the UN to undertake an environmental impact assessment.

Refugees (Chad)

34. With ongoing insecurity along the Chad-Sudan border, UNHCR is planning for a total caseload of 200,000 refugees by the end of the rainy season. There is concern that security or Government of Sudan's policy of forced resettlement could increase refugee numbers. There is an urgent requirement to relocate refugees from the border area to ensure protection. Further camps are under construction to absorb these. Water availability is posing serious problems and inflaming tensions with local communities. Health, malnutrition and water borne diseases are also main concerns.

35. Key action:

- Consider further funding for humanitarian operations in eastern Chad and Darfur.

NGOs & ICRC

36. To date, DFID has committed £10.7m to NGO operations in Darfur since Oct/03. Recently it encouraged new agencies to engage and for those already present to expand operations. It is envisaged that a further £5m will be committed from existing resources. Close donor coordination, notably with ECHO and USAID, should be undertaken when considering further funding allocations.

37. In the case of ICRC, DFID has committed £3m to its operations since Nov/03. Its annual Sudan appeal of CHF 46m (£20.2m) has been expanded by CHF 31m (£13.6m) in response to the Darfur crisis. Its new overall requirement remains under 50% funded.

Monitoring, review & evaluation

38. The following arrangements are proposed:

- Detailed evaluations of specific agency programmes to be undertaken from Sept/04, involving humanitarian advisers in Khartoum and, as required, technical advisers in the Sudan Unit. Where possible, this should be undertaken on a joint basis with other donors, as well as the agencies concerned.
- The strategy to be reviewed regularly to reflect political, security and humanitarian developments. In depth reviews to be undertaken quarterly and to focus on forward projections of need. These should be undertaken in Sept/04 with the decline of the rains and in Dec/04 to consider opportunities and requirements, if appropriate, for recovery prior to the next agricultural season. Efforts should be made to integrate Darfur within the broader strategy for Sudan.
- Appropriate monitoring and evaluation arrangements to inform its global Institutional Strategic Partnership programmes with agencies, other institutional support packages (such as that provided to WHO's HAC) and wider policy initiatives, such as Good Humanitarian Donorship.

RISKS

- Collapse of the ceasefire agreement and deterioration of security within Darfur and eastern Chad.
- Militia continue to undertake violent attacks and sexual abuse of civilians.
- Lack of progress in reaching a political settlement in Darfur.
- Reduced access leads to the formation of aid magnets and acute problems for public health.
- Targeting of aid workers and the contraction or suspension of aid delivery.

- Continued shortfall in donor engagement, resulting in failure of the international community to contain the acute humanitarian crisis, leading to escalating mortality rates.
- Government forcibly resettles or relocates civilian populations.
- Detrimental impact on the north-south peace process.
- Poor rains and worsening food security situation.
- Overstretch of aid agencies and the impact for recovery in the event of a comprehensive North-South peace agreement.

Darfur Cell, Sudan Unit

6 July 2004

UK GOVERNMENT-FUNDED HUMANITARIAN INTERVENTIONS IN DARFUR, SUDAN

UK Funding Timeline for Humanitarian response to Darfur

Sept 2003 – March 2004 UK committed £9.5m in response to Darfur.
April 2004 Secretary of State announces further £10m
June 2004 Secretary of State announces further £15m during his visit to Darfur.

Total DFID Humanitarian response **£34.5m**

In addition, the UK has also contributed £2m to the AU monitoring mission from the Africa Conflict Prevention Pool.

Total UK Response **£36.5m**

The table below represents funding commitments for interventions that have been agreed with humanitarian agencies. The current total of agreed funding commitments is about £28m. We are currently agreeing further commitments that will reflect our allocation of £34.5m.

Date	Agency	Description	Total Cost (£)
Agreed Commitment To UN Agencies			
Oct to Dec 2003	UNHCR	Supplementary Appeal for Emergency Assistance to Sudanese Refugees in Eastern Chad – 2003	1,000,000
March 2004 to Jan 2005	UNHCR	Emergency Assistance to Sudanese Refugees in Eastern Chad	1,000,000
Nov 2003 to March 2004	WFP	Additional Contribution to 2003UN Appeal, due to Crisis in Darfur, to Provide Emergency Food Assistance to Sudanese Populations Affected by War and Natural Disasters	2,000,000
March to Dec 2004	WFP	Emergency Distribution of Food Aid Commodities to Sudanese Refugees in North East Chad	1,000,000
May 2004 to Dec 2004	WFP	Emergency purchase and distribution of Food Aid for internally displaced Sudanese in Darfur.	2,000,000
Feb to Dec 2004	UNICEF	Emergency Assistance to Humanitarian Crisis in Darfur for Health; Water Supply; Water and Environmental Sanitation; Relief and Shelter Items; and the Protection of Children	1,000,000
May 2004 to Dec 2004	UNICEF	Additional support to humanitarian assistance for crisis in Darfur; emergency nutrition; emergency health care and the protection of children	1,500,000
May 2004 to	WHO	Emergency primary health care and response to	1,500,000

November 2004		communicable diseases in Darfur; support to measles vaccination programme	
May 2004 to July 2004	UN Joint Logistics Centre	Support to enable UNJLC to co-ordinate the logistics of an effective humanitarian response in Sudan	250,000
June 2004 – Sept 2004	UNOHCHR	Support to Office of the High Commissioner of Human Rights for deployment of Human Rights monitors in Darfur	250,000
Support to the ICRC			
Nov to Dec 2003	ICRC	Contribution to the ICRC 2003 Emergency Appeal for Sudan	1,000,000
June 2004 – Dec 2004	ICRC	Contribution to the ICRC 2003 Emergency Appeal for Sudan	2,000,000
Agreed Commitment to NGOS			
Oct 2003 to Sep 2004	SC-UK	Emergency Response to Conflict Related Internal Displacement in North Darfur	500,000
Jan to April 2004	MSF-F	Emergency Assistance to IDPs in Darfur – through increasing access to health care in conflict areas, disease prevention, halting nutritional deterioration and treating malnourished children	491,369
June to Dec 2004	MSF-F	Emergency Assistance to IDPs in Darfur – through increasing access to health care in conflict areas, disease prevention, halting nutritional deterioration and treating malnourished children	1,006,860
Jan to Dec 2004	MSF-H	Darfur Components of Emergency Health Interventions in Northern Sudan Project	1,301,822
Feb to Nov 2004	GOAL	Emergency Assistance to Population in Kutum Province, North Darfur – through a combined Health, Nutrition and Shelter Intervention	575,963
March to December 2004	ACF	Emergency Nutrition Programme in North Darfur	250,000
Mar 2004 – Nov 2004	ACF	Emergency Nutrition Programme in North Darfur	623,326
April 2004 to Dec 2004	OXFAM	Public Health Humanitarian Response Darfur (Water/Sanitation Programme)	2,193,161
May 2004 to Oct 2004	MSF-Belgium	Emergency Health Care for IDPs in North Darfur	671,300

<u>May 2004 to Oct 2004</u>	CARE	Logistics operation to improve access to shelter and non-food items for IDPs in Greater Darfur	603,195
<u>June 2004 to Mar 2005</u>	International Rescue Committee	Provision of Environmental Health, Primary Health and Child Protection Services for War Affected Communities in North Darfur	728,849
<u>June 2004 to June 2005</u>	SC-US	Emergency Water and Sanitation Intervention in West Darfur	676,206
<u>June 2004 to May 2005</u>	SC-UK	Emergency Response to Conflict Affected Population in South Darfur	1,068,777
Secondments			
March – June 2004	OCHA	Secondments of 4 staff (1 Khartoum, 3 in Darfur)	278,759
May – July 2004	UNJLC	Secondment of 3 staff to UNJLC	125,000
June – Sept 2004	UNICEF	Secondment of 3 staff to UNICEF	130,000
June – Sept 2004	WHO	Secondment of 3 staff to WHO	230,000
Water			
June 2004 – January 2005	UNICEF	Airlift of one truck-mounted drilling rig, truck, pick up and four water tankers	780,000
Non-Food Items			
May – June 2004	WFP	Provision of 264,800m of rope, 31,500 tarpaulins and 86,000 blankets	1,400,822
June 2004	OCHA	Humanitarian Information Centre	110,000
Total			<u>£28,245,409</u>
Humanitarian Assistance (DFID) Committed to Darfur since Sept 03			

May 2004	AU Monitoring Mission	Support for swift deployment of AU monitors (From Africa Conflict Prevention Pool)	2,000,000
Total UK Response to Darfur to date			<u>£30,245,409</u>

8 July 2004