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Humanitarian Emergency Fund

Syria, Yemen and South Sudan

Integrated Report:

- **British Red Cross**
- **Mercy Corps**
- **Tearfund**

BritishRedCross



British Red Cross's Response

The British Red Cross has a long-standing partnership with the Syrian Arab Red Crescent (SARC) as part of the International Red Cross and Red Crescent Movement. They have provided technical support, training, aid experts and funding for crucial staff and equipment, as well as emergency food parcels, blankets, mattresses and other aid, in addition to National Society development. More than five million people have directly benefited from BRC's Syria Appeal, launched in 2012, with many more being reached through the training and support provided to SARC volunteers.

SARC coordinates humanitarian action among UN agencies and other actors in the country. Its branches operate across several sectors - predominantly relief distribution, first aid, water and sanitation, shelter and psychosocial support. To deliver this range of services at scale, the number of SARC volunteers responding in the area was increased, with volunteers working additional shifts to support the response. SARC volunteers are highly skilled, trained, and experienced, and active in all areas of the response: WASH, Health, Shelter, providing psychosocial support, field coordination, population return management, relief, logistics and communications. They directly contribute to the improvement of the hygiene conditions of the targeted population and positively impact their well-being.

Project Plan

With funding from the HEF, the primary objective of SARC's response to the Dara'a emergency had been to support 25,000 internally displaced people on the move, in informal makeshift camps, temporary shelters and points where IDPs were collecting across the Dara'a Governorate, the majority in Zizon and Tal Shebab, with the remainder in Mzereb, Tafas, Yadoda, Busr Sham, and Jbab.

SARC had started pre-assessment and monitoring, and were able to preposition shelter kits, NFI kits and hygiene kits, but not water. From SARC's detailed assessment of water infrastructure facilities, the WASH team found that many of the pumping stations had been damaged during the conflict and that water-trucking services had been interrupted due to lack of fuel or significant increases in fuel prices. The provision of clean drinking water was therefore the key priority due to the 40+ degree temperatures and the risk of dehydration and disease. The only option available was to provide bottled water for many of the areas.

Funding from the HEF would therefore be used to procure and distribute:

- 25,000 water-bottles. The water-bottles provided the only source of clean drinking water until people were accommodated either in shelters or with host communities.,
- 25,000 10-litre, and 16,000 20-litre plastic Jerrycans.

Funding would also enable SARC to increase the number of volunteers who were providing a vital life-saving 24/7 response.

Project Impact

As per the project plan, the water-bottles provided families with the only source of clean drinking water until they were accommodated either in shelters or with host communities, while the Jerrycans enabled the families to store water provided via water trucks or from collective tanks installed by SARC's WASH team.

The funding also supported 350 volunteers, each working 21 shifts over a one-month period, to respond with immediate action to address the humanitarian needs of families whether they were internally displaced or in their original place of residence. Similarly, with the increased number of volunteers that were supported, SARC was able to deploy different teams to respond to several sectors of concern at the same time. The availability of funding for volunteers in this response enabled SARC to reach up to 90,000 households (450,000 people).

Within the wider response, the distribution carried out by SARC staff and volunteers reached almost 100,000 people in 17 different locations. As of December 2018, a total of 716,968 people (143,393 households) received assistance through convoys and services provided by SARC volunteers and staff. More than 115,377 people were received in collective shelters and able to access the variety of services provided by SARC (for example: relief distribution, water and sanitation, psychosocial support, etc).

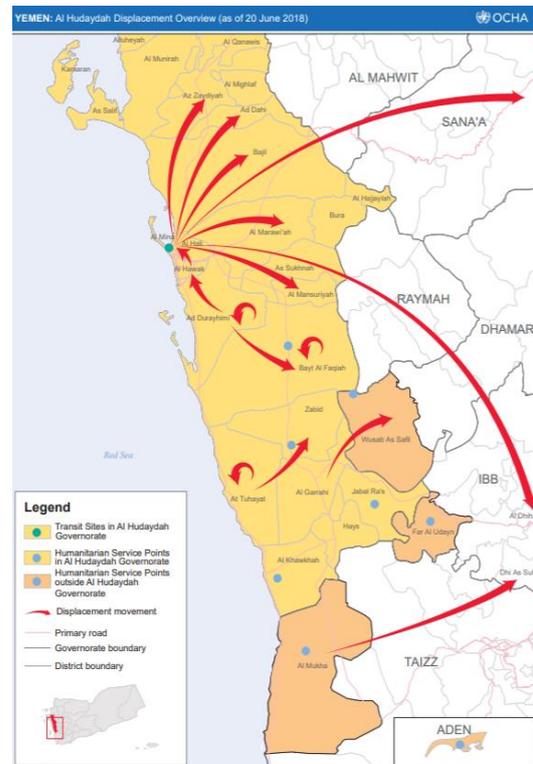
Since the beginning of the response in Dar'a, SARC convoys have reached 26 locations in Dar'a with relief aid to around 412,333 beneficiaries. The Dar'a emergency response is the largest in the history of the Syria crisis to date.

Yemen

The situation in Yemen has been described by the UN Secretary General, Antonio Guterres in April 2018 as the world's worst humanitarian crisis. This complex and protracted emergency is having severe humanitarian consequences upon the Yemeni population.

In June 2018, Hudaydah became a major focus within the Yemeni conflict as the Saudi-led Coalition Hudaydah offensive made significant advances from the south towards Hudaydah town and port.

Yemen continues to face hostilities and armed conflict with active military operations and airstrikes. These military operations have been causing displacements on a daily basis and insecurity even among humanitarian staff. Humanitarian actors continue to face challenges in accessing target communities across the field locations.



<https://reliefweb.int>

Mercy Corps Europe' Response

Mercy Corps has been working in Yemen since 2010, delivering life-saving services and early recovery interventions to communities. With a staff of 250, including international experts, water engineers and public health experts, WASH is Mercy Corps' largest programme in the country. Mercy Corps has a national office in Sana'a with field offices spread across five governorates of Yemen.

This HEF-funded project was originally located in Al-Durayhimi, a district of the Al Hudaydah Governate, where Mercy Corps had already launched hygiene promotion activities as, even before the conflict, the district was a cholera hotspot due to its inadequate water and sanitation facilities.

Mercy Corps' assessment of June 2018 found that the majority of these IDPs were already vulnerable even before the war, barely meeting their minimum survival needs in their original homes. More than 75 per cent of the people in the Al-Durayhimi district were drinking untreated water, lacked clean water collection and storage facilities, and practised poor hygiene. The recent conflict and displacement have only worsened their dire situation as most reported that they fled without any household items or assets.

Project Plan

The project was aimed at supporting 4,500 IDP families and 1,500 families within the host communities of the Al-Durayhimi by providing access to sufficient and clean water services and reducing the spread of WASH-related diseases¹.

Mercy Corps aimed to provide each household with a minimum of twenty litres of drinking water per person each day in line with Sphere standards. The plan included the daily trucking of a sufficient quantity of safe water to designated water points to meet the needs of the local population. Water points would be installed at strategic locations of not more than 500 metres from the furthest settlements. The water tanks would have a high water output to ensure that the queuing time would not exceed 30 minutes.

Mercy Corps would also ensure that the contracted water vendors would commit to conducting water chlorination at the treatment plant/water source and submit water quality testing reports to ensure the quality of the water. Routine inspections of the water trucks would be conducted, either at water source or at delivery point, to ensure cleanliness. Mercy Corps would also conduct random chlorine residual water testing at the point of delivery using DelAgua water-quality testing kits as well as testing for E-coli.

Furthermore, Mercy Corps would provide households with adequate and appropriate water collection and storage Jerrycans, complemented by training on cleaning and the safe storage of water. In addition, the plan included hygiene-awareness sessions, particularly on hand washing, safe excreta disposal and protecting drinking water from possible contamination.

Project Impact

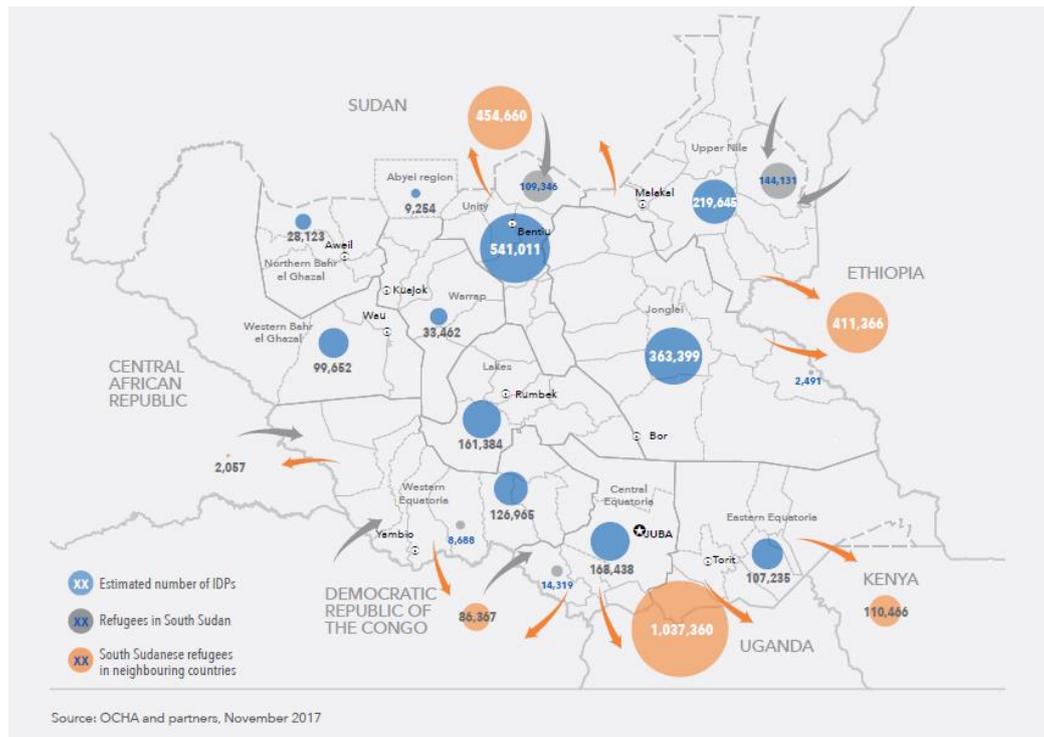
Since the start of the project in August 2018, continued military offensives, including air strikes and direct ground combat in Al Hudaydah Governorate, forced the continued displacement of IDP families and host communities to new locations, while the security of humanitarian personnel could no longer be guaranteed.

Despite the persistent insecurity and challenges of accessibility, including the continued displacement of families from the original target location, Mercy Corps has responded effectively to the acute WASH needs of extremely vulnerable households in a timely, qualitative and dignified manner, in order to save lives in these populations.

- Approximately 5,000 households have been provided with at least 20 litres of clean drinking water, trucked through on a daily basis. These households include 3,500 families who fled to Alkhabt district of Al Mahwit Governorate and 1,500 households who moved to Bura and Al Sukknah districts of Hudaydah Governorate.
- A total of 65 water tanks were installed at strategic locations thereby reducing the walking distance to collect water from one kilometre to no more than 500 meters:
 - Each water tank was fitted with at least four functioning water outlets thereby reducing queueing time from one hour to less than thirty minutes.
- A total of 5,800 20-litre Jerrycans were purchased and distributed to households. On-site demonstrations on cleaning the Jerrycans were also conducted during distribution exercises. The planned public hygiene-awareness sessions could not be conducted, however, due to non-cooperation from the local authorities and lack of appropriate permits.
- The drinking water was chlorinated, using standard chlorination protocols at the water source, and the water quality monitored by Mercy Corps staff. The quality of the water was assessed as good taste, clear and without any unwanted smell. The water trucks were monitored on a daily basis and random chlorine residual water testing at the point of delivery by use of DelAgua water-quality testing kits were conducted.

¹ More than half of the IDP families who had fled the Al Hudaydah conflict had integrated with host communities, while others had taken up residence in schools or mosques.

South Sudan



Map of South Sudan and neighbouring countries, November 2017.

South Sudan gained statehood in 2011 but by December 2013, violent conflict erupted between the Government and armed opposition groups, reflecting longstanding ethnic divisions in the country, and the intertwined history of civil conflict that led to independence from Khartoum to the north. Despite efforts at peace talks, continued violence, human rights abuses, and sustained economic decline – combined with a failure of governance and political leadership - have created crisis conditions for millions of South Sudanese.

More than seven million people are in need of humanitarian assistance and protection in South Sudan itself, and around 2.5 million refugees in neighbouring countries require assistance. During 2018 the situation deteriorated further within South Sudan, with on-going violence causing continued humanitarian needs and increased displacement to neighbouring countries.²

Prolonged conflict, economic instability poor harvests and the consequent disruption of livelihoods severely limited the availability of food in Greater Mundri, South Sudan. Even before the onset of the lean season, needs assessments were reporting that the majority of people were not receiving enough food on a daily basis, levels of malnutrition had increased, and resistance to disease was decreasing

Tearfund's response

Tearfund has been working in South Sudan since 1978, supporting partner organisations and working to deliver relief and resilience-building projects to conflict and disaster-affected populations. Currently, Tearfund operates across eight counties in Jonglei, Northern Bahr el Ghazal, Western Equatoria and Eastern Equatoria states, implementing Food Security and Livelihoods, Nutrition, and Water, Sanitation and Hygiene projects. In partnership with national NGOs, Tearfund is conducting peace building, emergency response and food security projects in Aweil East, Juba and Mundri counties.

² OCHA (2018) Humanitarian Bulletin South Sudan May 2018, Issue 5. OCHA: Geneva.

The project is integrated within SEM and Tearfund's wider programme strategies. SEM's strategy aims to reduce the food gap through emergency food assistance and empower vulnerable households to participate in livelihoods activities that would improve their living conditions in the long term. While Tearfund's strategy includes supporting target communities to improve their food security and livelihoods opportunities, increasing the capacity of local partners in humanitarian response.

Project Plan

Tearfund's project aimed to provide one and a half month's food supplies to 500 of the most vulnerable households in Mvolo County, Greater Mundri, with each household receiving 150kg of maize grain, 21 kg of beans and 9 litres of cooking oil to provide sufficient caloric intake for one and half months according to SPHERE standards.

Tearfund's partner, SEM would be responsible for implementing the project. Having been working in the Greater Mundri area since 1998, SEM would be well placed to coordinate with payam³ leaders and local community structures, including churches, to gain support for the project and agree on the selection criteria. As local markets were not functioning, the supplies were expected to have been purchased in Juba. The SEM logistics team would lead on the procurement, supervised by Tearfund's own logistics team to ensure that the correct policies and procedures were effectively applied.

Project Impact

The project has been largely successful in achieving its outcomes as each of the 500 households received their allocation of maize grain, beans and oil, sufficient for one and a half months as per Sphere standards. Through the provision of food, the most vulnerable households⁴ were no longer turning to negative coping strategies such as skipping meals and foraging for wild roots/shoots.

While the food distributions were conducted as planned, the project had to be extended by one month to allow the food to reach the distribution centres as rains had made some roads impassable and diversions had to be taken to avoid insecurity in the area.

Methodologies

In Syria, SARC staff and volunteers work with focal points in the targeted communities. These include mayors, local councils, local community leaders and others identified by the affected community. Their insight and ability to provide feedback on behalf of the wider community helps prioritise needs, especially given the limited resources available. SARC collects information through multiple means of assessment, triangulates the information provided and shares details of the resulting response plans with these local leaders. For example: the locations of responses are informed by local leaders on behalf of the affected communities, triangulated with SARC monitoring and assessment. In Dar'a, the response included both food and non-food convoys, based on needs assessments undertaken by SARC volunteers and feedback from the community on their priority items.

In Yemen, Mercy Corps conducted focus group discussions (FGD) and key informant interviews with the targeted conflict-affected families, enabling their key priorities to be ranked in terms of relevancy. Mercy Corps organised separate interactive sessions for people with

³ Local administrative areas.

⁴ In consultation with the community, the targeted households comprised 287 households with children under five years or pregnant and lactating women, 119 households with people living with disabilities or elderly people, and households which were headed by women or children.

additional needs mainly women, elderly and people with disabilities in order to design activities that would also meet their needs. Representatives of these core groups were later involved in the final prioritisation and ranking of the key needs and the preferred interventions. In all the FGDs and key informant interviews conducted with key stakeholders and other special groups, improving access to clean drinking was ranked as the main priority for the majority of the conflict-affected households.

In South Sudan, Tearfund staff discussed the project aims and activities with the wider community who played a pivotal role in ensuring that only those who fit into the agreed selection criteria were included in the project and ensured that the correct number of households were identified within the project areas. The criteria for selecting the most vulnerable households were then discussed with various community groups including churches and community leaders, and with the participation of women. Individuals were selected from these groups to help identify the households who fitted the criteria. The final list of households was verified by the wider community through meetings. Community leaders were provided with the final list of names to add another layer of verification and transparency.

The participation of the community in meetings and frequent community discussions helped to reduce any potential conflict that could have been caused by the project, while at the same time ensuring that the aims of the project were understood by a large percentage of the community. The local authorities also played a role in verifying the selected beneficiaries, and their involvement and buy-in of the project activities ensured wider community acceptance.

Monitoring, Evaluation, Accountability and Learning (MEAL)

For the Syrian Red Crescent, there was limited time and resource to dedicate to assessment, monitoring and evaluation. The priority was to provide life-saving assistance in response to the rapid onset and scale of the humanitarian need emergency in contrast to a longer-term, slow-onset emergency or development programme. Similarly, the fluctuating security situation and impeded access meant that all travel opportunities need to be capitalised upon to deliver assistance as rapidly as possible.

In mitigation, SARC has been combining response distributions with needs assessments in order to maximise the efficiency of access opportunities and volunteers' time. For example: as all affected persons were in need of food relief, so volunteers were also working to undertake needs assessments for other assistance required during these mass distributions.

A post-distribution monitoring was conducted in January 2019 to verify the impact of the project and to collect feedback from beneficiaries used to improve current and future responses. Funding for the rapid mobilisation of volunteers, as first responders, is considered to be the best investment SARC partners can make in the initial stages of a response.

For Mercy Corps Europe, staff conducted a baseline study before the launch of the project and the Monitoring, Evaluation, Accountability and Learning (MEAL) department supported the project in the collection, analysis and reporting of data on outputs and outcomes, as well as external factors that had been used to inform management decisions on the project. The Community Accountability and Response Mechanism (CARM) enabled the beneficiaries and other stakeholders to provide feedback and complaints in a confidential and convenient manner.

However, the project faced difficulties in getting permits from the government to conduct bi-weekly post water distribution monitoring and KAP end line surveys in order to understand the level of satisfaction of the with WASH services. Furthermore, the conflict that erupted four weeks before the end of the project caused further displacement of the beneficiaries rendering it difficult to conduct post-distribution monitoring. Nonetheless, the Community Accountability

and Response Mechanism (CARM) had been working well and the beneficiaries had been providing feedback regarding their satisfaction with the project. Since the project could not get permits to conduct surveys in the field, it relied on the CARM System mainly through hot lines and suggestion boxes to collect information from the beneficiaries regarding the project achievements and the necessary adjustments for future programming in a similar context.

Mercy Corps used community suggestions and feedback to adjust project activities. Some of beneficiaries' suggestions and feedback that changed project delivery were as follows:

- The choice for the sites of the water tanks was made by mainly women and girls to take care of their safety and ease of accessibility. They decided on the most strategic sites to take care of their protection and accessibility needs.
- Women and girls were consulted on the choice of their preferred types, colour and volume of the Jerrycans. White 20-litre Jerrycans were the preferred option given their transparency and ability to carry more water.
- People gave continuous and generally positive feedback on the taste, smell and general quality of the water provided by the contracted water vendor. Two complaints regarding the unpleasant smell of the water resulted in the water vendor being advised to allow the water to settle some hours after chlorination before loading.

It was also evident that emergency projects, implemented in active conflict locations with poor governance systems, need to be more flexible in terms of geographical targeting, nature of activities and the project duration. Furthermore, an implementation period of three months was also very short considering the access constraints and numerous approvals required by the local authorities before activity implementation. Some of the new approval requirements were only introduced by the local authorities during the project period and were never envisaged during the project design.

For Tearfund, the project staff conducted both a baseline and end of project evaluation to assess the effects of activities. Monitoring of the food items was undertaken before distribution in the form of quality testing, and at the point of distribution where rations were weighed. People were consulted with regards to the place and time for distributions that would provide the most safety and convenience for them. Feedback mechanisms included a dedicated phone number, staff and community focal points and feedback boxes. The use of the phone number, however, was limited by the lack of phone network coverage in the project areas.

Focus group discussions and community meetings were conducted throughout the implementation of the project and results of the baseline and end of project findings were shared with community members. In total, 14 pieces of feedback were received and, while all complaints were acted upon, there was little scope to change the project design in response to feedback as the project was delivered through one single distribution. Most of the complaints received were regarding the variety of items distributed (i.e. the need to take into account other needs such as NFIs) and the need to expand the reach of the project and to extend it to a larger number of people as so many community members were vulnerable.

An end of project survey was also conducted with 50 households. Both qualitative and quantitative methods were included in data collection to determine opinions of the distribution process, to identify the end-use of the food received, to establish if the food caused any conflict within the household/community, and to examine the accountability of the intervention.

Forty-nine of respondents reported they were satisfied with the project's approach. The main lessons learned from the end of project report survey were:

- the need to intensify information dissemination efforts,
- the need to take into account more integrated approaches (to respond to other needs) and
- the need to further contextualize feedback mechanisms.

While the beneficiaries in the project areas had prioritised food, their other needs, such as shelter, healthcare and water could not be met by this project. With additional funding, a more integrated programme would also have enabled more people to be included in an area where most people are considered vulnerable and in need of assistance.

Key Challenges

Across Syria, frontlines continue to move, causing displacement (many people have been displaced multiple times), affecting access, and the needs of affected communities. One in two Syrians have been displaced by the conflict, either abroad or within their country. In 2018, up to 1.3m people were newly displaced. Even where communities have been able to return home they find homes and businesses damaged or destroyed, and little in the way of basic infrastructure. Currently, the Red Cross and Red Crescent is helping to provide 80 per cent of Syria's water needs.

In Yemen, persistent insecurity and humanitarian access constraints still remain the major challenge facing actors operating in Hudaydah Governorate, as well as Yemen in general. For Mercy Corps, this resulted in the frequent displacement and scattered movements of the IDP households due to ongoing, or renewed, military offensives. Their original target of 6,000 households had to be reduced to 5,000 as they were forced to shift their WASH activities to new project locations in response to IDPs continuous displacements which was never envisaged during the project design stage.

Families, who had already fled the fighting and settled in the Al Durahymi district, were forced to flee again to comparatively safer locations in the neighbouring Bura and Al-Suknah districts of Al Hudaydah Governate. The humanitarian situation in these settlements deteriorated as local authorities introduced travel restrictions prohibiting humanitarian actors to access the locations, denying the delivery of clean water. Fearing further attacks from the advancing military offensive, the families were displaced a third time, fleeing to remote locations in the Al Khabt district of Al-Mahwit Governate. Already facing acute water shortages and poor primary healthcare services in these areas, and with no active WASH partner in the new location, the local authority, through the National Agency for Coordination of Humanitarian Affairs (NAMCHA), granted Mercy Corps the appropriate travel permission in order to set up part of its WASH activities and provide clean water. The remoteness of some of the new locations also incurred higher costs of trucking the water, chlorination and water-treatment.

Furthermore, Mercy Corps was recording at least one incident per week where staff had been denied access to the project locations, despite having travel permits and official clearance. Neither could they implement public hygiene messaging to the targeted beneficiaries as this activity was stopped by local authorities despite their prior approval during the design stage.

In South Sudan, the financial costs of delivering aid are among the most expensive in the world. When Tearfund's proposal was written, it expected its supplier would procure the food supplies from markets in Juba, as local markets were not functioning. However, the chosen supplier procured the food from markets in Uganda as they were offering significantly better prices for the same quantity and quality of supplies. Indeed, even with the extra costs of transport included, this proved more economical than procuring directly from Juba.

The original plan had also been to distribute the food supplies in one location in central Mvolv, within reasonable access for the majority of the households. Given the level and scale of need and the feedback expressed by beneficiaries that the project should have included more people, there was a high risk that beneficiaries may have their entitlements taken away from them. Moreover, it became apparent that a smaller group located further out in Mvolv county, in the payam of Wowo, would have had to walk the twelve miles out and back with their supplies. In such dangerous territory, this would have exposed them to greater risk of

violence, both physical and sexual, kidnapping by rebel groups, and robbery. The team therefore had to arrange for the supplies to be transported to a second location and both Tearfund and SEM remained vigilant at all points of the project cycle, and dedicated security focal points were on hand to consistently monitor conditions along the supply and transportation chain, as well as within Mundri so that there was no theft or looting experienced during the project.

Budget

Humanitarian Emergency Fund Project Expenditure			
Description	British Red Cross	Mercy Corps	Tearfund
SUPPLIES/MATERIALS	£ 96,599	£ 73,618	£ 62,223
WASH	£ 96,599	£ 73,618	
Food - See note below			£ 59,101
Accountability to Affected Populations			£ 683
Capacity Building			£ 2,439
LOGISTICS		£ 11	£ 4,659
Office		£ 11	£ 4,659
PERSONNEL		£ 1,548	£ 25,634
In-country locally engaged staff		£ 1,548	£ 22,056
In-country expatriate staff			£ 3,578
Personal Support			£ 1,415
Communications			£ 1,415
Contribution to wider response		£ 19,561	
TOTAL DIRECT COSTS	£ 96,599	£ 94,738	£ 93,931
Indirect Cost Recovery	£ 3,401	£ 5,262	£ 6,069
TOTAL PROJECT COSTS	£ 100,000	£ 100,000	£ 100,000
Core Humanitarian Standards			
Funds transferred to*:			
1. International NGOs			£ 14,804
2. Southern international NGOs (SINGOs)			
3. Affiliated national NGOs			
4. National NGOs	£ 98,130		
5. Local NGOs			£ 85,196

Note: Includes the cost of transportation of food supplies from markets in Uganda