



# Sudan



## Country Snapshot

Population	34.3 million
Life expectancy	61.1 years
Adult literacy rate	62%
Access to improved water source	60.1%
GDP per capita (PPP)	\$2,800
Estimated poverty incidence (% of total population)	46.5%
Under-5 mortality rate:	78 per 1,000 live births
Maternal mortality rate:	216 per 100,000 live births
HIV prevalence (population aged 15-24 years):	0.5% males & 1.24% females

**Program Overview:** CARE International Switzerland (CIS) is CARE International’s programme office in the Sudan, and was opened in late 2009 following the earlier expulsion from the country of a number of international NGOs, including the former CARE. Since October 2009, CIS has been offering life-saving humanitarian assistance to internally-displaced and other conflict-affected populations in South Darfur and South Kordofan, with a particular focus on women and children under 5. In Kassala, CIS exclusively supports a Sudanese NGO’s food security and women’s economic empowerment program. In the year ending June 2012, CIS implemented a range of humanitarian and rural recovery projects, with total expenditures of over USD 8.3 million, and benefiting an estimated 450,000 people in need. Our projects include the provision of life-saving services – water, sanitation, hygiene (WASH), and health and nutrition – as well as interventions that aim to help households and communities rebuild their lives and livelihoods in the longer term.

### Emergency Programming in South Darfur

The program offers humanitarian assistance and livelihoods support to an estimated 434,310 internally displaced and other conflict-affected populations in South Darfur, covering Nyala, Kass and Gereida localities. The interventions include primary and reproductive healthcare services, including protection, as well as nutrition and WASH interventions. WASH interventions include operation/maintenance of water supply systems, monitoring of water quality, construction/repair of latrines, solid waste collection and disposal, hygiene and health education, vector control and capacity building of local organisations and communities. Health & Nutrition interventions specifically target women of reproductive age and children under 5 years of age. The interventions include: support to primary/reproductive health care centres, provision of medical supplies and drugs, provision of preventative and curative nutrition services and provision of technical support and capacity strengthening of health authorities. CIS strategically partners with local government, local NGOs (LNGOs), CSOs and communities to provide services in all sectors, aiming at strengthening local capacities and promoting sustainability.





### **Emergency Programming in South Kordofan**

Following the eruption of conflict in South Kordofan in June 2011, CIS shifted its interventions from development to provision of humanitarian assistance to the affected populations. Although programming over the past year has been severely constrained due to the outbreak of conflict in the state and restricted access by INGOs, CIS has been able to re-establish a modest program of humanitarian assistance comprising of WASH, nutrition and livelihoods interventions. CIS strengthens the capacity of local NGOs to implement interventions that benefit a total of 35,000 beneficiaries.

### **Early Recovery & Development Programming in South Darfur**

A growing portion of the program promotes sustainable post-conflict recovery in rural areas around Kass and Gereida localities. Recovery assistance is provided to rural communities – some recently returned home following displacement – to re-establish their lives through food security, economic empowerment (includes VSL, with a focus on women, working with farmers and agro-pastoralists to increase productivity, and restoring local infrastructure such as markets), and peace building interventions. To support Darfur's transition to early recovery, CIS strategically partners with local government authorities, NGOs, CSOs and communities to provide services, aiming at strengthening local capacities and promoting sustainability of successful interventions.

### **Building Resilience of Communities in Kassala**

In Kassala state in the East of Sudan, CIS works exclusively in support of a Sudanese NGO's 3-year food security and women's savings and loans program, by providing remote technical backstopping and capacity strengthening support. With particular focus on women and youth empowerment, the project operates in 17 rural and peri-urban communities, and is expected to reach 42,451 beneficiaries.

### **The Transition to Early Recovery and Development Programming**

In July 2012, CIS launched a 3-year strategic plan that was developed through a participatory process, and was built on the findings of three interrelated exercises - 1) an evaluation of context and operating environment, 2) an analysis of women and girls' empowerment in Sudan, and 3) a CIS internal review.

*CIS envisions a Sudan in 2025 where significant progress has been made in the fight against extreme poverty and discrimination. In particular, we see positive transformational change taking place in the lives of vulnerable women and girls in the poorest parts of the country.*

To contribute to this vision, CIS aims to transition programming focus from humanitarian assistance to long-term programming for the empowerment of vulnerable women and girls. In particular, CIS will (i) support women's participation in economic activity, (ii) support efforts to increase the provision and accessibility of reproductive health services, and (iii) continue to support the delivery of humanitarian assistance to affected populations when the need arises.

To achieve this, CIS will work through partnership with government, civil society and the private sector, building capacity to ensure sustainability. In addition, CIS will gradually move away from direct implementation - except in cases where available national capacities are insufficient to meet needs.

### **Major donors**

CARE USA, Common Humanitarian Fund (CHF), Dutch Ministry of Foreign Affairs, The European Commission's Humanitarian Office (ECHO), The European Union (EU), German Ministry of Foreign Affairs, Luxemburg Ministry of Foreign Affairs, USAID's Office of Foreign Disaster Assistance (OFDA), UNICEF & WFP.

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