

Organization Information		
A1	Organization Name	CARE International in Sudan
A2	Nature of Organization (INGO, UN Agency, National NGO, IOM)	INGO
A3	Organization Main Address (Sudan)	Mamoun Behairy Street, Khartoum, Sudan
A4	Legal Status of Organization	Legal
A5	Registration Status of Organization in Sudan	Registered
A6	Year Established in Sudan	1979
A7	Organization Website	www.care.org
A8	Have you previously delivered DCPSF project(s)?	<input type="checkbox"/> NO <input checked="" type="checkbox"/> YES: If yes, please list date, title, location (state), budget Peace Building Project, South Darfur 2014; 2016 Peace for Recovery Project East Darfur USD 650,000; Peace and Stability for Recovery Project, USD 600,000 South Darfur 2017 - 19; Gender in Peace Initiative, USD 100,000 Darfur 2019;
A9	Is this a consortium application? If yes, please list all agencies.	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES: If yes, please list all consortium agencies. List all agencies in the consortium for this project
Contact Information		
A10	Contact Person for Concept Note	Eatizaz Mohamed Yousif
A11	Job Title/Position	Program Directors
A12	Phone	+249 99 333 3374
A13	E-mail	Eatizaz.MohamedYousif@care.org
A14	Country Director Name	Elfateh Osman
A15	Job Title/Position	Country Director
A16	Phone of Country Director	+249 92 333 3363
A17	E-mail or Country Director	Elfateh.Osman@care.org
ORGANIZATION MISSION AND ACTIVITIES		
A18	Description of the Organization's mission and activities	



	<p>CARE works to save lives, defeat poverty, attain peace, and achieve social justice. CARE implements humanitarian and development programs to support the most vulnerable and marginalized communities with a specific focus on women and girls. Its current programming includes WASH, Health, Nutrition, FSL, and Peacebuilding and Economic Empowerment in five different states around Sudan, including East Darfur. In East Darfur, CARE is one of the most prominent Peacebuilding, WASH, Health, and Nutrition service providers, and it has ongoing projects in six localities (Assalaya, Abu Karinka, Bahar Al Arab, Ed Daein, El Ferdous, and Yassin). Its WASH service also includes more than 40,000 South Sudanese refugees residing in Al Nimir, El Ferdous, and Kario. CARE supports 11 health and nutrition facilities in five localities (Assalaya, Abu Karinka, Bahar Al Arab, Ed Daein, and Yassin), including a stabilization center in Ed Daein hospital. In East Darfur, CARE serves more than 150,000 people, including 41,962 refugees, and projects are delivered in an integrated manner with strong community participation, including women, girls, youth, and people with disabilities. CARE has also supported several communities in these localities through funding from the UNDP DCPSF project, where important structures such as VDCs, CBRMs, women associations, youth associations, natural resource management committees, and demarcation routes are implemented.</p>	
A19	Applicant Declaration	<input checked="" type="checkbox"/> I have read the Full Proposal Guidance and used it for the development of this concept note.

Section B: Project Information

Project details				
B1	Project Title	Enhancing East Darfur state capacity to prevent, detect, and respond to the COVID19 pandemic in three localities		
B2	Project Location – State	North Darfur <input type="checkbox"/>	West Darfur <input type="checkbox"/>	Central Darfur <input type="checkbox"/>
		South Darfur <input type="checkbox"/>	East Darfur <input checked="" type="checkbox"/>	
B3	Project Location – Locality and community	Locality	Abu Karinka	Village(s) Jadel Seed & Bakhit
		Locality	Assalaya	Village(s) Al Sunta
		Locality	Ed Daein	Village(s) Alneem A, Alneem B and Jalabi
		Locality	Enter Locality	Village(s) Enter Villages
		Locality	Enter Locality	Village(s) Enter Villages
		Locality	Enter Locality	Village(s) Enter Villages



		Locality	Enter Locality	Village(s)	Enter Villages	
B4	Project Duration (Number of Months – all projects should be between 1 – 3 months)	3				
B5	Does your organization currently have a field office in the state where the project will be implemented?	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO		
		Address of Field Office	Elnazir District, Ed Daein			
		When established?	2015	Number of Staff:	31	
B6	Estimated Project Budget in USD	50,000				
B7	Executive Summary. Provide a concise executive summary of the project, including what specific results you intend to achieve.					
	<p>As the COVID19 pandemic continues to sweep the world, Sudan has 29 confirmed cases as of April 14, all in Khartoum, with four deaths, after the first case was reported on March 12, 2020. The low number might be attributed to a lack of testing. There are rumored cases around different states, but tests take weeks to confirm since samples are sent to Khartoum.</p> <p>According to INFORM Global Risk Index data, the world's 'highest risk' countries have three times higher exposure to epidemics, such as COVID19, but also have a six times higher risk in terms of their access to healthcare compared to the world's lowest-risk countries. Sudan is among the highest risk countries with one of the weakest capacity to cope with the added stress of a COVID19 pandemic. Therefore, if developed countries with superior financial capabilities, health facilities, and infrastructures are struggling to deal with the pandemic, the impact it will have on high-risk countries, like Sudan, will be devastating. In Sudan, according to the 2020 HNO, 9.3 million people need humanitarian assistance, including refugees and IDPs. Only 33% of health facilities have a complete package of basic health services, including sexual and reproductive health. Hospitals lack basic medicines, with imports having dropped by 35% in the past year, increasing costs by 50-100% while reducing overall availability. Sudan needs more than 44 million USD to respond to the COVID19 pandemic according to the Federal Ministry of Health's March 14, 2020 response plan, and most of it is expected to be covered by different donors.</p>					
	<p>East Darfur state is among the poorest states in Sudan with a 67% poverty rate, a high percentage of malnutrition (10.3% GAM), and poor access to health and WASH services, exacerbated with poor hygiene practices. More than 60% of the population don't have access to health and nutrition messages, and less than 10% of the people consider difficulty breathing as a danger sign. (2019 S3M). Currently, there is only one isolation center that is supported by CARE.</p>					

Therefore, based on CARE's discussion with MOH, WHO, UNICEF, and other partners, the provision of timely and accurate information to communities about the pandemic using existing community structures and all other available means is paramount. Sudan has one of the weakest health systems in the world, and prevention through awareness-raising key to safeguarding the communities' wellbeing. Provision of water supply service, hand washing facilities, soap, and other disinfectants are critical both at communities and health facilities level. There is also a need to provide Personal Protection Equipment (PPE) for health service providers and outreach workers.

CARE has also supported several communities in these localities through funding from the UNDP DCPSF project, where vital structures such as VDCs, CBRMs, women associations, youth associations, natural resource management committees, and demarcation routes are implemented. Through UNDP DCPSF funding, CARE will provide appropriate awareness and preventive skills for women and men leaders of these structures and the general community to respond to COVID19 threats. Furthermore, support will be given the health facilities these communities access and use.

VILLAGES	PLANNED INTERVENTIONS	Female		Male	
		Adult	Youth	Adult	Youth
Alneem A, Alneem B, Al Sunta, Bakhit, Jalabi, and Jadel Seed	Training of 100 (60 women and 40 men) community based conflict resolution mechanisms, women and youth association group leaders on COVID19, surveillance, isolating and reporting suspected cases, and outbreak management. The training will be conducted based on the MOH and WHO guidelines, keeping the trainees ten or less at a time and maintaining social distancing.	40	20	30	10
Alneem A, Alneem B, Al Sunta, Bakhit, Jalabi, and Jadel Seed	Provision of house-to-house COVID19 messaging, including prevention, symptoms identification, social distancing, and contacting the ministry of health to 56,700 people by the 100 trained people in collaboration with other existing trained health workers in the areas. The unique vulnerabilities and needs of pregnant lactating women, children under five, and people with a chronic illness will gain focus on the training and the outreach activities.	13,608	16,443	11,340	15,309
Alneem A, Alneem B, Al Sunta, Bakhit, Jalabi, and Jadel Seed	Establishing three Early Warning and Reporting (EWAR) mechanisms, one per the targeted locality, using the trained village development committees, women and youth association group leaders, and conduct active case surveillance in close coordination with SMOH. Clear communication lines will be established between the communities and with MOH and CARE.	13,608	16,443	11,340	15,309
Alneem A, Alneem B, Al Sunta, Bakhit, Jalabi, and Jadel Seed	Printing 30,000 different IEC materials in Arabic, including pamphlets, based on FMOH/WHO guidelines to be used at health facilities, public areas, and house-to-house distributions, maintaining social distancing. CARE will ensure the IEC materials distribution covers the different groups of the communities (men, women, boys, and girls, including people with disabilities, old ages, and other vulnerable groups). This will be in addition to radio messaging (see below). Furthermore, whenever the opportunity arises, the sharing of household chores among family members and caring for one another will be promoted.				
Alneem A, Alneem B, Al Sunta, Bakhit, Jalabi, and Jadel Seed	Raising communities' awareness using community radio stations for two months, considering the differentiated needs of women, girls, boys, and men in pastoralist, farming, and refugee settings.	13,608	16,443	11,340	15,309
Alneem A, Alneem B, Al Sunta, Bakhit, Jalabi, and Jadel Seed	Provision of assorted PPE for health care service providers in the targeted three localities and community outreach workers, if available. CARE will try to explore local production.	50	25	40	15



Alneem A, Alneem B, Al Sunta, Bakhit, Jalabi, and Jadel Seed	Installing child friendly 40 handwashing facilities at health facilities and other public gathering areas and provision of soaps for three months. Water will be trucked using donkey carts in areas where water is not available, and communal washing facilities will be managed in coordination with community leaders.				
Total		13,608	16,443	11,340	15,309

Note: the number of total population that will be reached by the project can be much higher as Radio can reach more numbers than face to face communication.

Results: Monitoring and Evaluation

How will you measure change in your project? What are your plans to monitor and evaluate your project?

CARE will use **gender lens** in addressing the needs of the affected groups, **gender, and age marker** to evaluate and take appropriate corrective action on the proposed actions, and organize review sessions with targeted project participants and partners to ensure implementation of the project.

CARE also recognizes that meeting material needs without considering key **protection principles** results in harming at risk groups. Important aspects of protection are well-considered on such as safety, dignity, access, setting suable accountable mechanisms, and ensuring active participation of women, men, girls, boys, people with disability, pregnant and lactating women, children all groups in the conflict-affected population in East Darfur. Furthermore, **Do No Harm** tool will be used to avoid or mitigate potential negative effects of any response action.

CARE has different **feedback mechanisms** to support better projects’ performance and ensure the attainment of the anticipated results on women, girls, boys, and men based on internationally agreed IASC principles and CARE’s strategic commitments for women empowerment and gender equality.

The **monitoring plan** will respect social distancing and will include phone calls and monthly reporting. Targeting, distribution of items, and training will be monitored using data collection formats.