

Annual report

 International Federation
of Red Cross and Red Crescent Societies

West & Central Africa Programmes

MAA61001

30/April/2010

This report covers the period 17/January/2009 to
31/December/2009.



Distribution of agricultural materials in Poor during recovery phase after the 2009 floods in Senegal/
International Federation

In brief

Programme purpose: The 2009-2010 West and Central Africa Zone's (WCAZ) Plan aims at providing support to National Societies to properly address the needs of vulnerable people. The 2009 plan of action focuses on the implementation of the safety and resilient community framework. Integrated approach targeting community at risk has been developed with NS and PNS that covers DRR, Health and OD issues at branch level with strong community participation. Some of the projects will continue in 2010. Introducing new farming techniques to improve food production of vulnerable groups to increase their resilience to disasters and increasing knowledge of school children on risk issues will contribute to build pillar for risk reduction culture. NS have been supported to have five-year DRR projects and shift from disaster risk *had hoc* management. More NS will benefit from support for long term DRR issues while assistance will be provided to develop DRR long term strategies where appropriate.

Baseline for food security (FS) programmes have been developed in five NS and have been shared with PNS as it could serve to measure progress made in the field and to develop specific projects. Baselines on food security have been considered as a strong contribution of the Federation to RC-RC Movement work done in the field of FS. Efforts were made to improve preparedness for response at both community and NS levels. Meteorological predictions concerning many time scales (seasonal, monthly and short term — 10 days) have been used to improve disaster management preparedness and response effectiveness. A pilot project of an IFRC desk in ACMAD for short term prediction has been successful as the seasonal predictions in 2009 were not very strong. Lot of unforeseen events happened during 2009 (both flood and drought in the same countries). With support from the climate centre (The Hague) a workshop has been organized in Senegal with Red Cross volunteers, scientists and communities to bridge

knowledge and vulnerability reduction programmes. A methodology has been developed to duplicate this approach in other National Societies. All National Societies in the Sahel Region have been supported in building capacities and teams for preparedness and response with training for Community Disaster Response Teams (CDRT) and National Disaster Response Teams (NDRT) and at branches level. Contingency plans and appropriate regional stocks were available to support NS when necessary. These preparedness measures have been used during the 2009 floods response. Some challenges faced will be addressed in 2010.

The disaster management (DM) programme supports organizational development (OD) activities to link between branch development and DM community service delivery. Support provided to NS focuses on long-term approach to build sustainable capacities to manage DM programme in appropriate manner.

Coordination with PNS based in Dakar and ICRC is established through meetings and regular contact when needed. Emergency preparedness meetings are regularly held with ICRC in Dakar. Partnership has been developed to improve DM service delivery to communities. IFRC WCAZ plays a credible role within the Regional IASC (Inter Agency Standing Committee) Dakar and led the sub committee in charge of DRR/CCA (Climate change adaptation). A solid partnership has been established with ACMAD. A sound relationship with CILSS (AGRHYMET) and ECOWAS respectively on Food security and DRR is being established.

The disaster management plan 2009-2010 for the Zone is in line with the Hyogo Framework of Action, the Global Alliance for disaster risk reduction, Strategy 2010, safer and more resilient communities and the Algiers Plan of Action. It intends to focus on Disaster Risk Reduction, climate change adaptation, food security intervention initiatives at community level, the creation of networks and partnerships to support RC/RC Movement work at field level.

In the framework of the Federation's Global Agenda Goal 2 and in line the Algiers Plan of Action and the African Red Cross and Red Crescent Health Initiative (ARCHI) 2010 the aim of the Zone health and care is to coordinate, monitor, give support and assist National Societies to establish sustainable Health programmes and improve preparedness and response to Public Health matters in emergencies. As for the Secretariat organizational development support plan in West and Central Africa for 2009-2010, it intends to build strong National Red Cross and Red Crescent Societies within the region. This support has to be provided through improving human resources basis both full time professional staff and volunteers; improving their capacities in long term programming and planning together with the other technical departments and stakeholders at country level; and their finance management system and financial sustainability.

The organisational development program aims to build the capacity of the local communities, the civil society and the Red Cross/Red Crescent staff to address the most urgent vulnerabilities. This is in line with Goal no. 3 of the global agenda

The humanitarian consequences of migration in the region are multiple, with situations varying from one context to the other depending on the phase where migrants find themselves: leaving their country of origin, transiting or stranded in a neighbouring country, arriving in the country of destination or returning to their own country. In alignment with Global Agenda Goals 3 and 4, the Migration unit is seeking to increase the National Societies' capacity to address the most urgent situations of vulnerability some migrants might experience, and is supporting National Societies' work in the promotion of respect for diversity and human dignity through the Migration programme.

Programme(s) summary: The West and Central Africa Health Zone Office has coordinated the International Federation Health activities through the three Regional Health and Care Programmes for the 24 National Societies and has achieved positive results for Health programmes and for emergency prevention/response. Most of the activities covered by this 2009-2010 Plan have been finalized during the year. However, by the end of the year the positions of the three regional HIV

officers except for Central Africa and of the watsan Manager in Dakar have been dismissed due to the adjustments in the African Zones. Following these adjustments the three Health coordinators in Africa elaborated a one zone Health structure for Africa. A West and Central Africa Zone Health Meeting were held which provided a forum for discussions/presentations and plans of vital technical topics in the zone. A Public Health in Emergency Meeting was held in Bamako to assess the 3-year PHE programme funded by the Finnish RC. Technical support and monitoring of epidemics/campaigns and outbreaks such as Dengue fever, Meningitis, Cholera, Polio, Yellow fever, Measles and Ebola have been carried out from the zone. A full time malaria delegate, based in Dakar, has given support to National Societies in West and Central Africa. HIV/AIDS activities have continued and in some National Societies in partnership with Global Alliance. A workshop for Facilitators in Community-based health and first aid (CHBFA) for French speaking countries took place in Cameroun. The watsan manager has supported activities pertaining to reporting, finance, proposal writing and monitoring of watsan projects in the Zone.

Four main areas of activities were agreed as framework for Organisational Development (OD) programmes in the West and Central Africa zone. These are NSs' professionalization, capacity building in programming and planning, volunteering management, establishing a strong legal base for NSs' governance and capacity building in finance development. The Federation has adopted a country-focused approach. Some hands-on support was then given to three countries in the Sahel sub-region, as there was no OD focal point for the region till August. West coast sub-region has also been supported through the 08 NS initiative.

As a new area of focus for the International Federation, the Migration initiative had to establish itself among the core programmes implemented in the region. The adoption of a Policy on Migration at the 17th General Assembly most certainly helped in bringing some weight to the initiative, and priority was given to disseminate that policy to the 24 National Societies of West and Central Africa. Building networks within the RC/RC Movement and with outside partners working with migrants has also been a priority for the Migration unit.

Financial situation: The total (2009) budget is **CHF 5,454,989 (USD 5,020,698 or EUR 3,805,892)**, of which 80 per cent covered during the reporting period. Overall expenditure during the reporting period was 27 per cent of the budget.

The total 2009 budget for Migration is CHF 334,374 (USD 309,720 or EUR 228,148), of which CHF 208,552 (62 per cent) covered during the reporting period (including opening balance). Overall expenditure during the reporting period was CHF 94,066 (28 per cent) of the budget. The budget was revised in January to do away with two positions and vehicle related expenses that were not deemed necessary for the first year of the Migration initiative; the Migration team therefore consisted of two persons after a Migration Officer was hired in July. The positive variance of the overall expenditure of the annual budget can be explained by the fact that ways to streamline expenses were always favoured. For example, the regional workshops that were planned for the dissemination of the new Federation Policy on Migration did not cost as much as originally planned; the Migration unit asked the respective regional representatives to be granted some space in their regional meetings to carry out the migration workshop. The first year was also spent travelling to different locations to feed the Migration unit's knowledge and field visits were carried out where National Societies had activities in favour of migrants. The Migration unit always took advantage of international meetings to have the National Societies of the region sit together to discuss possible ways of communication and cooperation. Overall the results are seen as satisfactory as the Migration initiative has just started and is slowly but surely building up in view of the interest of the National Societies in the region.

[*Click here to go directly to the attached financial report.*](#)

[*Click here to go to the Programme update no. 1*](#)

No. of people we have reached: Through DM programmes, 701,915 beneficiaries have been reached; 280 volunteers were trained as NDRT members; and 634 volunteers and community members trained as CDRT members. About 1,400,000 people have been reached through health and care activities. The Malaria related actins helped some 830,000. Volunteers have also been involved in vaccination campaigns where approximately 10,200,000 people, with a majority of children, have been vaccinated. For 2010 approx the same number or even more will be reached. The presentation of the new Federation Policy on Migration was successfully carried out for the Central Africa NS group and the Sahel + NS group in the form of workshops. The dissemination of the Policy is to continue within each NS as it is the responsibility of the management and the governance to do so, but support will provided where and when possible.

Our partners:

The mains partners to the health and care activities are the Swedish RC, Finnish RC, Norwegian RC, Irish RC, Netherlands RC, Nestlé, Shell, USAID, Canadian RC, Danish RC, ICRC, UNICEF, WHO, ECHO, and OCHA. The National Societies also worked with other bilateral partners including the Ministries of Health.

The main partners to the DM programmes are: DFID, the Danish Red Cross, Canadian Red Cross, French RC, Irish Red Cross, Swedish RC, and Spanish Red Cross. The DM unit also works with OCHA, WFP, UNICEF, FAO and OXFAM. Regional partnerships are developed with: ACMAD, CILSS, and ECOWAS. The DM coordinator is chairing the IASC sub-committee on DRR and climate change adaptation. Emergency preparedness committee is set up with ICRC Dakar.

The OD unit worked in collaboration with the Irish Red Cross and government, Danish Red Cross, Canadian Red Cross (in the frame of the 08 NS initiative) the Swedish Red Cross with the support to the volunteering development process and ICRC (Dakar and Conakry offices).

Tighter cooperation was built up throughout the year between the Zone Migration unit and the region's National Societies, the ICRC, and a number of European NS. The Migration unit is also part of the Follow-up Group on Mixed Migratory Flows involving UNHCR, OHCHR, the International Organization for Migration (IOM) and the International Labour Office (ILO). A number of associations and organizations working with migrants were met and an interesting network is being developed in Senegal, Mauritania, Mali and the Gambia.

Context

In West and Central Africa Zone, more than 70% of the population livelihoods depend on the primary sector (agriculture, fisheries, livestock...) and around 90% of agro-pastoral activities in the zone are rain fed. The dependency of the livelihoods of the most vulnerable from climate condition is high. The impact of disasters is being exacerbated by poverty, degradation of the environment and natural resources, migration and population growth. Some countries in the Zone have been experiencing political volatility as well. In the same time population movement from rural to urban areas creates unplanned settlement that leads to urban floods and insecurity. The described context is prone to more disasters and humanitarian situation while the capacity of National Societies and DM department in the Zone needs significant improvement to face current challenges and cover all components of Disaster Risk Management cycle including early warning system and focused partnership to develop quality of DM services provided to communities.

In 2009, West and Sahel part of the Zone have been affected by both drought and floods particularly in the Sahel part. These are probably new disaster patterns and trends due to climate variability/change. Countries like Chad, Niger, Mali, Burkina, Ghana, Togo and Benin experienced both floods in some parts of the country and insufficient rain in other parts which led to food insecurity issues. As a result disaster risk management capacities and resources should be adjusted accordingly.

The political situation and the social instability in Guinea had some negative effects on Health programme implementation for the National Society. Heavy rains were the main cause of an emergency situation with floods in countries such as Burkina Faso, Senegal, Sierra-Leone, Benin and Niger. Almost 800,000 people were affected and health activities have been carried out during the emergency operations. Affected countries had low response capacity from their governments and the majority of people live with less than one US dollar/day. However, National Societies in collaboration and with support from the Federation carried out disaster relief operations and emergency health in partnership with governmental and non-governmental organizations with good results. The issue of climate change could also have a negative effect on epidemics in the region since meningitis outbreak affected nearly 75,000 people with over 3,000 deaths.

The Red Cross/Red Crescent is becoming more and more a development focused organization and adjusting from a relief to development focus with the need to improve planning system and tradition accordingly is another challenge. In addition, financial sustainability, weak finance and human resources and volunteers management systems are common issues for many National Societies. Only two National Societies in West and Central Africa (Cape Verde and Sao Tome & Principe) have sustainable income generating activities to cover their core cost.

Progress towards outcomes

Disaster Management

Outcome

- Reducing the vulnerability of communities to disaster risk and emergency public health to minimize deaths and livelihoods losses by developing risks reduce programs, Early Warning Early Action Systems, reinforce the response capacities and collaboration with climate institutions to support the food security programme and disaster risk contingency planning.

Achievements

As a follow up of the Oslo meeting on Disaster Risk Reduction (DRR) the West and Central Africa Zone has provided support to the Gambia Red Cross Society 5-year DRR project. Same support has been provided to Cameroun Red Cross Society and the activities will continue in 2010. Financial resources have been provided by DP department in Geneva. The Gambia Red Cross Society has conducted the process of risk assessment and priority areas for DRR and a development project in close collaboration with Government and partners.

The Gambia RCS and the Burkinabe Red Cross Society were enrolled in the Programme for Climate Change (PFCC). Both National Societies have accomplished the first steps of the situation analysis with ongoing projects on how programmes would integrate climate change issues on both DRR and humanitarian action. A VCA has been conducted in the Gambia with training for volunteers, field simulation exercise and data collection.

WCAZ has provided support to the Red Cross Society of Côte d'Ivoire to manage a pilot project that aims at improving traditional buildings to better resist to floods. The project has been supported by CraTERRE, an organisation linked to the Architecture Institute of Grenoble University. The pilot phase of this project was conducted in Bhin-houe (Côte d'Ivoire) with 30 volunteers, craftsmen and communities trained on community-building techniques to preserve the habitat from floods. Lesson learned from the pilot project and training tools developed during the pilot phase have been shared and discussed in a workshop organized in Dakar with National Societies of Guinea Conakry, Burkina Faso, Mali, Côte d'Ivoire, Togo and Benin. A significant support has been provided to the targeted National Societies to build their capacities for NDRT and CDRT members.

The following table is highlighting the training organized and the number of trainees:

Countries	NDRT		CDRT	
	Number of session	Number of trainees	Number of sessions	Number of trainees
Mauritania	1	30	2	60
Niger	1	30	3	90
Senegal	2	45	4	110
Guinea Bissau	1	30	3	84
Guinea	1	35	2	60
Mali	1	30	3	90
Cape Verde	1	30	3	90
The Gambia	2	50	2	50
Total	10	280	22	634

The training of NDRT for the Red Cross Society of Guinea and the Senegalese Red Cross focussed on emergency shelter. This DM training programme has been supported by AEDCI through the Spanish Red Cross.

The Project Coordination and Management Group (PCMG) of the West Africa Disaster Management Capacity Building (WADMBCB) project have met for the review of the project. The review highlighted the way forward for implementing concrete activities in the 2009 plan of action. A new operational model for the implementation of the WADMBCB project has been put in place to support the developed plan in line with the review project document. Draft DM policy documents for Liberia and Sierra Leone National Societies have been developed taking into account the national DM policies in these countries.

Constraints

DRR, climate change adaptation and capacity building constitute developmental issues that need medium to long term approaches and stable financial resources and staff. These conditions are not yet met at both National Society and the Zone level. The lack of commitment of some National Societies in empowering their DM focal persons has limited the achievements of DRR goals. The Zone has been providing significant support to NS to meet achievement and fulfil donor's commitment. Stable capacities of National Societies should be strengthened in DRR and CCA to develop sustainable DRR programme and build RC-RC Movement credibility in the areas.

Outcome

- To improve disaster response assistance to meet the needs of people affected by disasters and to restore or improve pre-disaster living conditions and to reduce the risk of future disasters.

Achievements

The West and Central Africa Zone Regional Disaster Response Team (RDRT) database has been reviewed and updated. The database has more than 100 RDRT members. A training session for RDRT members in logistics has been carried out in collaboration with Dubai Regional Logistics Unit (RLU) with 12 participants. WCAZ provided support to NS to assist disaster affected communities through 17 DREF allocations (including epidemics) and four emergency appeals to cover the needs for 621,915 persons.

Most of the NS in the Zone systematically use DMIS to report on disasters. The use of DMIS increased significantly in 2008 and 2009. Almost all NS in Sahel and West Coast have been supported for flood contingency plans before the flooding season. The prepositioned stock in Dakar (Senegal), Cotonou (Benin) and Yaoundé (Cameroun) have been used to response to floods.

After a first phase of "life saving" activities the Emergency appeals for Senegal, and the EW/EA Appeal for the Zone (Niger and Mauritania) have been re-oriented to implement recovery activities aimed at the restoration of livelihoods. In Burkina Faso the main programme focused on shelter and watsan; resources for DRR programme like building houses resistant to floods have been

used in that country to train local masons from affected communities and livelihood approach in restoring livelihoods have been developed to link recovery intervention with regular programme in Senegal, Mauritania and Niger. All national societies have been briefed on the fact that principles and values of the Movement should be promoted during relief and recovery activities using significant community “contact”.

A meeting was held in December to reflect on lessons learnt on the 2009 floods response and for National Societies make recommendations on how to improve response activities.

Activities conducted in WCAZ on EW and EA continued in 2009. An EW/EA appeal has been launched based on climate prediction. The EWS project put in place by the Togolese RC for Mono river risk of overflow have been joined by other partners and expanded to more districts along the same river.

To improve communication and working relationship between Climate and Humanitarian organization and the communities, the WCAZ has organised a workshop gathering scientists, climate experts, Red Cross volunteers and community at risk of climate events. The meeting aimed to make the parties understand each other requirements and challenges to develop a fruitful partnership. The exchanges between the two organizations and the community will help climate organization to develop tailored product to the humanitarian organizations needs and for Red Cross volunteers to use provided climate information for DM decision making, and also make sure that interventions are well understood by the beneficiaries. Communities need to be involved and their knowledge in fully taken into account in the process.

The methodology used to bring scientists, communities and Red Cross volunteers to work together has been documented and will be tested again in an other country before being published to strengthening partnership to support the process of bridging knowledge and humanitarian organizations. These networks have been established since 2007 thanks to the supports provided by DFID.

The ultimate medium to long term goal is to improve DM interventions in terms of time (early intervention) and quality.

Constraints or Challenges

Preparedness measures were not implemented during the floods although most National Societies have been supported to put in place these measures in terms of contingency planning, NDRT/CDRT training, workshop on the comprehensive use of climate predictions, etc. The reasons for that 11 National Societies have given are the lack of resources to undertake the preliminary assessment; and the trained volunteers are not always used to undertake the assessment, leading to the poor quality of assessment report that can not allow requesting a DREF on time. Managers at different level “under the pressure of early response” did not attach importance to the preparedness process that has been put in place and *had hoc* measures are being established to meet the requests from different levels “to act quickly and gain visibility”. FACT and ERUs are not involved in the preparedness processes at NS and Zone level. Indicators for capacity building and sustainability should be introduced to measure the success of response operations.

Outcome

- Reduce the risk of food insecurity and improve the living conditions of populations at risk.

Achievements

The food security (FS) programme aims to reduce vulnerability related to food insecurity. It is *de facto* part of safety and resilient community framework and a component of DRR programme.

Programming (crop/livestock situation assessments, baseline surveys and proposal development)

Zone level

- The five countries of the initiative - Burkina Faso, Mali, Niger, Mauritania and DR Congo - have developed the methodology, completed the field assessments, and processed the database with the support of the Federation. The assessment was carried out from January to June 2009. A workshop was held in Dakar and NS. PNS operating in Niger and Mauritania attended the workshop.
- A risk mapping with focus on food security and using VCA tools was conducted in Niger, Mauritania, Mali and Burkina Faso. The objective of this risk mapping was to complete the baseline survey and allow NS (and Zone) to improve proposals in line with the AFSI.
- Materials for community projects on food security using “drop by drop” irrigation method started in 2009 and will continue in 2010.
- Another project using solar energy to provide electricity to school children started in 2009 and will continue in 2010. The objective of the project is to reduce risk of fire, support children, mainly young girls to have better learning conditions at home and to increase their knowledge about the risks.

National Society level

DRC

In 2009, two VCA were conducted in Kisantu in the Province of Bas-Congo and in Mbandaka Pygmy communities Bongode and Ikengeleke. For Kisantu communities, results have shown a low risk of food insecurity. Reports are still being compiled. As for Mbandaka Pygmy communities, results have shown an irregularity in daily meals due to unavailability of food, lack of income and access to land for agricultural activities.

Niger

A joint proposal was made with French Red Cross for Food Facility in Zinder; and another one with Spanish Red Cross for Dosso. A proposal for market gardening project was also funded by the Federation under DFID programme.

Mauritania

- Participation to a workshop on 2009 pasture and harvest forecast;
- Participation to a workshop on a nationwide assessment of food security and nutrition situation;
- Joint livelihood assessment was undertaken with the French Red Cross in M'Bout that aimed to develop a FS proposal which will be funded by the French Red Cross;
- Joint development of a proposal was done with the French Red Cross for Brakna and Gorgol submitted (and approved) to EU.

Programme implementation (includes monitoring and support to bilateral programmes)

✓ Emergency food security (3 months - 1 year)

The Zone office has supported the Red Cross Society of Niger in Agadez with the goal of restarting livelihood activities disrupted by floods in affected communities. The main activities consisted of the procurement and the distribution of agricultural tools, adapted seeds, and material for cages, goats and veterinary assets.

DRC

In collaboration with FAO, the NS participated to the implementation of a project aimed to fight high food prices in Kinshasa city. The purpose of the project was to distribute rice seeds to 735

households in Kinshasa. A market gardening project for 100 households funded by Norwegian Government is being implemented in Kindu, Province of Maniema.

Niger

In collaboration with the Federation, the Qatar Red Crescent, and the Chinese Red Cross, the Red Cross Society of Niger is implementing a recovery project for communities made vulnerable by floods in Agadez.

Senegal

With the technical and financial support of the West & Central Africa Zone, the Senegalese Red Cross conducted a recovery needs assessment in flood affected areas. The findings of this assessment will be used to update the Emergency Appeal for Senegal.

Gambia

A food for work project (clearing farm lands, ploughing, sowing, weeding, road rehabilitation, and re-forestation) has been initiated in partnership with WFP in refugee host communities.

Mauritania

Food distribution activities were carried out in flood affected communities in Tintane with the support of the Qatar Red Crescent.

✓ Recovery & medium-term (1-2 years)

Niger

Two market gardening projects in Zinder and Dosso have been funded under DFID programme.

Mauritania

In collaboration with the Spanish Red Cross:

- A project aimed to improve the living conditions of communities in Inchiri: market gardening, income generating activities, training on basic agricultural techniques and community health.
- Fighting against food insecurity in Nouadhibou: 156 community organizations have developed market gardening activities. They have received agricultural and irrigation kits and were trained on basic agricultural techniques.
- School feeding project in Nouadhibou: provision of balanced meals to students, sensitization on health, hygiene, nutrition, raising awareness about diseases related to hygiene and poor dietary practices.

With French Red Cross

- Food assistance has been provided to 1,800 persons living with HIV/AIDS in Nouakchott in partnership with WFP.
- Community health and nutrition project in Gorgol was funded by ECHO: screening of acute malnourished children, sensitization and education on nutrition, training of community workers.
- In close collaboration with the French Red Cross, a project to support the development of market gardening, fruit trees activities in Boghe was set up.

With Italian Red Cross

- Income generating activities in Gorgol.

With IFRC/Dakar Zone office

- Integrated Food Security and Health project in Tintane: development of market gardening and fruit trees activities, reforestation, hygiene promotion, mother and child health.

- Mauritania Red Cross Village, integrated food security project in Boghe: market gardening, staple food shop and community nursery for kids.

Guinea Conakry

- Community food security project funded by DFID: market gardening and rice production.
- Promotion and re-launch of farming activities through market gardening projects and community collective farming.

Liberia

✓ Food Security project funded by IFRC (DFID) and ICRC

- Distribution of 50 kg of seed rice and five pieces of tools for 3,000 family heads
- Distribution of 50,000 kg of clean rice to 2,000 farm families. The clean rice was provided to protect the seed rice of the farmers.
- Provision of materials for the construction of grain houses. Farmers who received the 50 kg of seed rice will give the same quantity as pay back at the end of the harvest. The pay back will be kept in the grain houses and will be distributed to new farmers in 2010.

Outcome

- Build partnerships and enhance coordination to support and translate global level Federation engagement at Zone level.

Achievements

Strong partnerships have been built with meteorological organizations especially ACMAD with the signing of a Memorandum of Understanding (MoU) between ACMAD and the West and Central Africa Zone to support disaster management programmes. This partnership supports the EW/EA framework which aims at providing early information to Red Cross and Red Crescent to take early action during climate related disasters. This partnership is being extended to support small farmers along the rivers basin in the Zone through appropriate hydrologic prediction. The current network between the Federation and the climate organization will progressively be extended to hydrology as the information provided are accurate for RC/RC decision making processes.

The DM unit is member the International Strategy for Disaster Response (ISDR). It is a credible actor in the Hyogo Framework for Action by leading the regional climate consultation process in the preparation of the 2009 Copenhagen 15th summit. The International Strategy for Disaster Response and WCAZ sent a joint letter to advocate for climate change adaptation policy and strategies to be prepared for the United Nation Framework Convention for Climate Change (UNFCCC) Conference in Copenhagen in December 2009 as part of DRR programmes.

Four countries (Niger, Gambia, DRC and Congo Brazzaville) have been supported in the country climate change adaptation consultations to advocate activities with National Societies and focal point of government for climate change adaptation. The objectives of the consultation is to ensure that climate adaptation policy integrate community dimensions giving “human faces” to climate change. In coordination with Climate Centre, the EW/EA experience of West Africa in 2008 has been documented by external consultant

Regular contact was built with CILSS and the Food security IASC group to monitor the food security situation in the Zone mainly in Sahel. The FS EWS enabled the DM WCAZ to be aware in October 2009 of the probable food security problems in the Sahel region for 2010. A Memorandum of Understanding is being discussed with CILSS to support WCAZ FS programming.

The Disaster Management Coordinator is part of the restricted CILSS partners’ annual meeting (Food Crises Prevention Network Forum) regularly organized by OECD in Paris.

The coordination with Movement partners is done on a regular basis at both country and regional level. Limited joint projects have been developed, but regular information enabled PNS and the Federation to provide coordinated support to NS.

Dialogue with ECHO for coordinated project submission by PNS is really improving in the Zone.

A joint emergency preparedness committee between DM WACZ and ICRC is in pace and regular meetings are held to exchange of information on preparedness measures like stock prepositioning and to discuss common issues to ensure operational coordination of NS programmes.

DM WCAZ extended partnership with scientific institutions to Architecture Institute of the University of Grenoble (France) in DRR/shelter area to support vulnerable communities to build houses resistant to flood integrating simple modern techniques in their traditional knowledge of building.

Regular contact with major donors like DFID, USAID, ECHO and World Bank (GF DRR) is maintained to discuss common concerns or to undertake joint activities like the PDNA (Post Disaster Need Assessment; WB GF DRR).

OCHA and the Federation have organized annual flood preparedness meeting with both representative from national disaster management bodies and DM focal points from NS. This annual meeting constitutes a good forum to develop common understanding of technical issues and DM strategies, but also a good opportunity to improve collaboration between governments and “their” national societies.

Health and Care

Programme Objective: To improve and maintain an effective coordination, cooperation and technical support role in the health sector leading to an improved advocacy, communication and external relations within the zone.

Outcomes

- The Zone health coordination is effectively executed through coordination, planning, performance monitoring and evaluation as to assist National Societies in developing and establishing sustainable community based health programmes and to develop improved preparedness and response in the health sector in line with the Global Agenda Goal 2.
- Partnerships with main organisations within the zone in the health sector are maintained and further developed.

Achievements

The Health Zone office in Dakar continued to work as the coordinating unit in the Zone and supported the three health units in the regional representations and the 24 National Societies in planning, monitoring and harmonizing health activities. Coordination with the other African Zones and Geneva continued and a one Zone Health structure was elaborated in the end of the year due to the rightsizing in the zone. In 2009, the new Health and Care Coordinator was introduced at the annual zone health meeting which took place in the beginning of September. This was a forum for exchange, planning, monitoring and coordination for National Societies. Later on, a regional health network meeting for the West Coast took place in Ghana where coordination activities of the West Coast regional office were strengthened. In the area of Health, the Health coordinator, the watsan manager, the malaria manager and the H2P manager have participated in meetings with partner organizations like WHO, OCHA, UNICEF, USAID and other stakeholders during the year. The full time malaria delegate, a H2P manager and a watsan manager based in Dakar have been providing technical support to National Societies and Regional representations in West and Central Africa in coordination with the Health and Care Coordinator.

Constraints or Challenges

The major constraint to the full support to NS was the insufficient number of competent technical staff. At the end of 2009, the positions of the two out of the three Regional HIV/AIDS managers and the one of the Zone watsan manager are still vacant. Funding for key positions is crucial for good technical support to NS. In many NSs the development of a solid Health programme requires a better support in cooperation with OD.

Programme component 1: HIV and AIDS

Outcome

- Vulnerability to HIV and its impact is reduced by preventing further infections, expanding care, treatment, support and reducing stigma and discrimination.

Achievements

The Federation had limited financial resources to support the West and Central Africa zone in the area of HIV /AIDS. Nevertheless, many NS have HIV programmes in place and continue the implementation of their important programmes and receive technical support through the Regional Health/HIV managers. In West Coast, the Sierra Leone Red Cross Society has reached some 45,000 peers through peer education activities and 105 PLWHIV on positive prevention methods; the Togolese Red Cross has reached about 118,000 beneficiaries on preventive messages, 4,450 VCT referrals and 673 PLWHIV. The Nigerian Red Cross Society has trained 27 trainers under the Global Alliance programme and produced 21,235 IEC materials to enhance its HIV/AIDS activities. In Central Africa, in partnership with the Global Alliance, Central African Red Cross Society has trained 314 peer educators and conducted 849 talk sessions where 37,000 people and 3,661 PLWHIV have been reached; 12,350 condoms have also been distributed. In Gabon around 600 PLWHIV have received home-based care from the Red Cross Volunteers. In the Sahel + region, the Gambia Red Cross Society is a part of the Global Alliance and participates in a broad approach. It is trying to mainstream HIV prevention across all sectors within the community. The NS has produced HIV prevention and stigma reduction materials, carried out training, awareness campaign, VCT campaigns and home-based care. The Senegalese Red Cross has worked in different areas like prevention, stigma, VCT and support to PLWHIV.

Constraints or Challenges

Limited financial resources constituted the main constraint to the development of sustainable HIV programmes in the NS. Lack of focal person on Regional level made it difficult to collaborate with the NS.

Programme component 2: Health in Emergencies

Outcomes

- Preventive and curative activities for recurrent and newly emerging health problems in the Zone have been identified and improved upon.
- Access to curative and preventive health services are improved in the target area.

Achievements

A three year Programme for Health in Emergencies (PHE) funded by the Finnish RC in CAR, Sierra-Leone, Ghana, Ivory-Coast and Mali was finalized in 2009. The programme was assessed in Bamako during a meeting with NS focal points; even the transfer of the programme into CBHFA was discussed for Mali, Ivory Coast and Ghana (the meeting's report can be provided upon request). All partners agreed that the previous activities could be well implemented into CHBFA. The Finnish RC is willing to continue supporting the implementation of CBHFA in these three countries. In Mali 29 supervisors and 300 volunteers have been trained in PHE in five districts.

Focus has been on Human Pandemic Influenza, Meningitis and Cholera. During the second part of 2009 the NS of Ghana trained 400 community dwellers on emergency preparedness and response

while the NS of Côte d'Ivoire empowered 300 and 170 community members respectively on emergency preparedness and response. These volunteers together with new ones will now be involved in the implementation of CBHFA programmes for these three countries.

In West Coast the NS of Benin, Côte d'Ivoire, Ghana, Nigeria, Sierra-Leone and Togo participated in a Polio Regional DREF and the activities of the Red Cross volunteers contributed to the good coverage recorded in these rounds. Data from Benin, Togo and Côte d'Ivoire showed that 1,032,000 children aged 0-59 months were reached through the activities of volunteers in these rounds. The same contribution to polio eradication initiative was also recorded in Central Africa and in Sahel countries. In Burkina Faso the participation of Red Cross volunteers in the Polio campaign was evaluated by an external consultant together with the Federation. The results of the polio evaluation in Burkina Faso were successful and the report revealed that the Burkinabe Red Cross Society (BRCS) branch offices at district level are known to stakeholders as an implementing agency with particular talent in social mobilization. At community level, in most places visited, the BRCS was trusted by the community, especially when the volunteers were wearing some form of Red Cross ID, they are accepted in the houses, and are listened to carefully. The Red Cross volunteers are very often more trusted than the government health workers who are most of the time unknown to the local population.

West Africa has been seriously hit by Meningitis with nearly 75,000 affected people and over 3,000 deaths in 2009. A DREF was launched for Burkina Faso and Niger where the NS performed social mobilization and education campaigns for over 3,000,000 beneficiaries. Over 21,000 people suffered from a Dengue outbreak in Cape Verde. This epidemic was hitting for the first time in the region. A DREF was launched and the NS of Cape Verde in cooperation with the Federation worked on prevention and care for 75,000 beneficiaries.

In 2009, Cholera outbreaks were not so frequent in the Zone. A DREF was launched for the Democratic Republic of Congo to reach 160,000 beneficiaries in Katanga and 250,000 in Kivu. Cameroun also had experienced an outbreak where 800,000 beneficiaries were reached through a DREF. Outbreaks were also recorded in Congo Brazzaville and Togo where some 500,000 beneficiaries have been reached.

A campaign on yellow fever was carried out by the Sierra Leone Red Cross Society with the support of the Federation West Coast office. The campaign allowed reaching 1,518,340 beneficiaries aged 9 months and above. The NS of Ghana reached 61,215 children while the Red Cross Society of Côte d'Ivoire reached 252,236 children during these campaigns. During an outbreak in CAR IFRC facilitated the deployment of 200 volunteers who assisted the Ministry of Health. In CAR during a Measles immunization campaign 50 volunteers reached 12,325 people and discovered 213 cases in partnership with UNICEF. In Cameroun, 40 volunteers have facilitated vaccination for 124,789 children. In 2009 an outbreak of Ebola started in DRC where 15,000 beneficiaries were reached by volunteers through a DREF allocation.

Constraints or Challenges

- Lack of efficient performing tools: to move from response to prevention, there is the need to develop better tools for prevention to avoid outbreaks and epidemics.
- The sustainability of trained volunteers for emergencies.
- Implement and mainstream public health in emergencies into CHBFA programmes.
- Maintain qualified staff in NS.

Programme component 3: Community-based health and first aid

Outcome

- Increased resilient communities capable to cope with health and disaster challenges taken up through community based integrated health and first-aid activities.

Achievements

The Zone health and care team has continued to support reinforcement and implementation of community-based health and first aid; the new CHBFA manuals are ready. Many of the activities in public health in emergencies can and will be integrated into CHFBA. An evaluation of the CBHFA programme was conducted in Liberia. The NS of Nigeria, Liberia, Ghana and Sierra Leone attended the tool kit training for Malaria in Nairobi, Kenya. A workshop for experts-facilitators in CBHFA for French speaking countries took place in Cameroun. In Cameroun and Central Africa six community based organizations have gathered women practising female genital mutilations and about 100 women have stopped these activities. Instead women have been enhanced in leadership and partnership development. In the end of the year a meeting was held in Bamako with five National Societies to discuss the transfer from PHE into CHBFA in 2010. In Sahel the Senegalese Red Cross has received technical and financial support from the Federation to develop community health scaled interventions on Integrated Management of Childhood Illness (IMCI). The overall objective has been to contribute to the reduction of child and maternal morbidity and mortality rates. Activities included awareness and good practice in child health. The same approach has been developed in the Gambia Red Cross Society where about 100 villages of the western and central regions were targeted. In Mali the National Society has implemented a project for child survival supported by the Danish RC.

Constraints or Challenges

- To get funds for sustainable long term programmes in CHBFA.
- To integrate different vertical programmes into a more holistic programme such as CHBFA.
- To establish an improved collaboration with OD to get sustainable CHBFA programme.

Programme component 4: Malaria

Outcome

- Vulnerable populations, children under five years and pregnant women are protected against Malaria.

Achievements

Since Malaria is one of the main health hazards in West and Central Africa, the participation in large scale mosquito nets distribution is a priority for many NS in the Zone. Therefore a lot of technical support is required from the Zone. A total of 937,532 beneficiaries have been reached by IFRC Malaria activities of which 827,532 have received an integrated health message such as nutrition, vaccination and de-worming sensitization:

- In Burkina Faso, the Federation has funded the first Universal level distribution of LLINs in Diebouougou health district. The NS mobilized 336 volunteers for pre campaign sensitization and registration, distribution activities and post campaign Hang Up activities. Every household (18,410 in total) in Diebouougou was targeted with LLINs with one LLIN provided for every two people.
- In Liberia the IFRC has had the oversight of additional Keep Up activities during the year.
- In Mali the Federation is in the second year of a three-year Keep Up programme in two districts, mobilizing 350 volunteers every month.
- The Federation has received for the Senegalese Red Cross Society a USAID grant to support pre, during and post distribution activities in eight regions during a national campaign integrated to nutrition for children under 5. About 1,850 volunteers have been mobilized for this campaign.
- In Sierra Leone, the Federation and the National Society carried out a mass distribution of 60,000 LLINs involving 200 volunteers. The SLRCS also conducted Keep Up activities in eight branches.
- In Nigeria, the Federation office had a grant from USAID accepted in October 2009 for Cross River State, funding activities in 2010 to bring a recent campaign for children under 5 up to Universal coverage followed by Hang Up activities, mobilizing 3,206 volunteers. A designated malaria delegate is in place to manage the project.

Two years of work has culminated with the publishing of a RC/RC malaria toolkit which addresses all major issues pertaining to malaria activities. The English version was published in November and 17 National Societies were trained in its use in Nairobi in December, including Nigeria, Ghana, Liberia and Sierra Leone. The French version as well as the Portuguese one will be published in 2010.

Constraints or Challenges

- Sustainability of a continuous use of impregnated bed-nets despite support and funding;
- Implementation of vertical programmes;
- Resistance problems.

Programme component 5: H2P

Outcomes

- To ensure functional coordination between global, national, district and community level stakeholders, including the UN system, in the preparedness and response of the humanitarian sector.
- To strengthen the in-country capacities of staff and volunteers of significant humanitarian and civil society organizations to carry out the influenza pandemic preparedness plans and protocols.
- To support the development of influenza pandemic preparedness plans and protocols of the humanitarian sector in the areas of health, food security and livelihoods in designated countries.

Achievements

There have been several activities undertaken by the Federation in assisting National Societies with financial and technical support, to prepare for and respond to an outbreak of pandemic influenza in their respective countries. Essential to the programme's success is the ongoing collaboration and coordination with multiple implementing partners, including NGOs, UN agencies, local governments and Movement partners. Fifteen (15) National Societies implementing H2P projects are developing pandemic preparedness and response plans, training staff and volunteers, providing consistent messages to their communities in addition to ongoing in-country coordination with all stakeholders. Health, Food Security, livelihoods and communications working groups consisting of the Federation and partner organizations have developed tools, materials, guidelines and a website for pandemic preparedness and response efforts.

Through the DFID funding and with a USAID funded H2P project, the Federation has provided 15 National Societies in West and Central Africa with basic guidance and H1N1 communications campaign —“Your best defence is you”. These NSs are: Benin, Ghana, Liberia, Mali, Nigeria and Senegal, for H2P Long projects (12 months); Gambia and DRC for H2P Accelerated Project —AP (3 to 6 months); Cameroun, Central African Republic, Côte d'Ivoire, Congo Brazzaville, Gabon, Sao Tome & Principe and Sierra Leone. Furthermore, the Federation is providing more comprehensive support to eight of these National Societies and their communities for preparedness and response activities (Benin, DRC, Gambia, Ghana, Liberia, Mali, Nigeria and Senegal). These projects help NS develop partnerships, train volunteers (an average of 300 volunteers per country) and community leaders, and initiate detailed business continuity and pandemic response plans. 3 RC Country Plans out of the six expected have been submitted to Dakar by the NS with H2P Long project: six out of eight NS with H2P-Long and H2P-AP are member of the National Pandemic Influenza Committees.

Constraints or Challenges

- To get sustainability for H2P programmes within the NS;
- To get sufficient and knowledgeable technical staff;
- The funds and the timeframe of the project.

Programme component 6: Watsan

Outcome

- Access to safe water and sanitation services is improved in the target area and diarrhoeal diseases preparedness and response increased in sub-Saharan Africa.

Achievements

Since April 2009 a watsan delegate is based in Abidjan, and is working with both Nigeria and Côte d'Ivoire National Societies on their watsan programme which is financed by Shell, Nestle and Belgium (Flanders) Red Cross. Two other watsan delegates have worked in two country delegations, one for Chad in the refugee camp and for the host population (about 60,000 beneficiaries), the other one in DR Congo for Central provinces, and he is also supervising the watsan officer of the NS for Western RDC. Since October, a watsan delegate has joined the Floods operation in Burkina Faso. He has replaced a watsan RDRT, who worked in the FACT team for the start up activities of this operation. A joint health and watsan risk reduction project was started in Tintane in collaboration with the DM team. The global meeting for the zone watsan coordinator was held in Dakar. The ACP water facility coordination at zone level was managed by the senior watsan officer from Geneva and the watsan manager of the Zone. The watsan manager started the flood response in Mauritania in collaboration with the DM team mainly for the identification of sites and distribution of NFI and food. Watsan RDRT members were deployed in the framework of the following operations: foods in Burkina Faso; refugee operation in Chad for software management; cholera and refugee operation in Congo. NDRT/RDRT members who were working in the refugees operation in Cameroun and in Chad have moved by the end of their mission to the Central Africa refugees operation on food security. About 25 RDRT watsan members were trained or refreshed in Yaoundé on kit 10 and parts of kit 5. This opportunity was seized to start the arrangement of the watsan part of the warehouse in Yaoundé. Project propositions have been sent to Nestle that is now funding position of the watsan delegate in Côte d'Ivoire and a new watsan programme.

Constraints or Challenges

- Funding the position of a Zone watsan manager.
- Security issue in Guinea that hampered the filed mission of the watsan manager.

Organizational Development

Support to Sahel sub-region (Guinea RC, Senegalese RC, Mali RC)

Restructuring/staffing plan: Guinea

In February 2009, as a result to an internal crisis (staff strike, resignation of key management staff...) within the Guinean RC, the Federation supported the NS for the organisation of an extraordinary General Assembly that elected a new governance team. This new team expressed a strong and insistent will to bring change and to take things forwards within the NS. It is important to recall that the Guinean RC was created in a disaster context (the earthquake of 1883) and has been experimenting disaster situations till recently in 2004. Now the big challenge for this National Society is to move from disaster management to long term development projects with professional recruited staff and sustainable activities. The Federation then committed itself in supporting this change process. The zone OD coordinator carried out a first mission to Guinea in February 2009 to facilitate governance training and set up orientations for collaboration with the Federation. In a second mission, in March/April the OD coordinator conducted an institutional analysis that pointed out the following HR/ management issues:

- The staff paid on the NS core budget was facing 10 months of unpaid salaries in February;
- the lack of contract and job descriptions for the staff;
- the salaries are lump sum payment without any provision for social security;

- Water and energy supply issues in the headquarters make unproductive working days and does not promote hygiene.

These statements led to the elaboration of a restructuring plan with a new organogramme and job descriptions for the key management positions. This restructuring plan was adopted in a coordination meeting in July 2009 that gathered all the stakeholders (IFRC, ICRC, Danish RC, government, NS). At the end of the process, 11 positions were maintained, three have changed and only two positions had to be cancelled because of lack of funding. Concerning funding, the Danish Red Cross committed in supporting eight positions (four at the headquarters and four in the field), while ICRC committed in supporting five positions and IFRC provided equipment (computers, internet, telephone and internet installation) with the assistance of the IT department in Dakar. Regular follow up meeting are organized twice a year to insure the right implementation of the plan.

Long term and strategic planning: Mali

The Mali Red Cross that was supported in elaborating its strategic plan in 2004 had its strategic plan expired by the end of 2008. In coordination with the Canadian RC, it was agreed that the NS would conduct an evaluation of the former strategic plan with analysis and comments. In October 2009, the zone OD coordinator had a trip to Bamako to run this evaluation. At the end of this evaluation, a report was produced and shared with the other departments (DM, Health and Migration) for discussions and input that finally led to the organization of the planning workshop in March 2010.

Legal base: Senegal

In December 2008, a General Assembly was organized by the Senegalese Red Cross that decided a statutes review to establish clear separation between governance and management positions. Youth representation in the governance team is also an issue to be addressed through this process. A national commission for statutes review was appointed by the General assembly. This commission is made of a representative of the Presidency of the Republic, a representative of the Ministry of Health and medical prevention, a representative of the Ministry of Justice, five (05) members of the Senegalese Red Cross who have already worked on the revision of the statutes and rules of procedure, two representatives of the Red Cross Youth. It was agreed that the Federation and the ICRC will follow the whole process as advisors. The steps below were agreed:

- Redaction of ToR (IFRC, ICRC and NS);
- Adoption of the ToR by the Governance;
- Appointment of a restricted redaction committee;
- Statutes review workshop 1 (redaction committee);
- Statutes review workshop 2 (national commission appointed by the general Assembly);
- Approval of the draft revised statutes by the Governance;
- Geneva comments on the draft revised statutes;
- General Assembly for adoption of the revised statutes.

The draft statutes were shared with the joint commission for NS statutes review in Geneva that sent comments. A working session took place on 04 March to discuss these comments and take them into account in the final draft that has been adopted by the General Assembly held on 16 March.

Support to West Coast sub-region (08 NS initiative)

In the frame of the 08 NS initiative that gathers four hosting NS — HNS (Mozambique, Côte d'Ivoire, Sierra Leone, and Liberia) and four PNS (Norway, Netherlands, Great Britain, and Canada) two meetings were organized in 2009. The first meeting, a midterm review held from 5 to 6 May in Sierra Leone reviewed the progress made by the concerned hosting National Societies concerning the four main areas of interventions of the initiative namely definition of core costs, elaboration of business plans, achievement of efficient human resources, and development of finance management. The participants also seized the opportunity of this meeting to develop a tool, the Measurable Partnership Chart (MPC) that will help evaluate the quality of partnership within the

initiative. The second meeting (15-17 November) aimed to present HNS's business plans, and make an evaluation of the MPC and the outcomes of the evaluations. A discussion also started to extend the initiative. It was decided that this discussion would continue further and the participants would come in 2010 with propositions.

Outcomes/Expected results	Achievements
<p>R.1. Improved National Societies' leadership capacity to develop and implement programmes. The indicators for this are professional staff available, governing boards and management members trained, updated strategic plans available, long term health projects being implemented, intensified partnership.</p>	<ul style="list-style-type: none"> • A restructuring plan has been elaborated and adopted in a coordination meeting with partners in July in Guinea. • A final evaluation of the former strategic plan for the five past years was conducted by the Zone OD coordinator and shared with the other departments for recommendations. This analysis led to the elaboration of a new strategic plan in March 2010. • The terms of reference have also been elaborated with the technical assistance from the zone OD coordinator for an HR audit in Côte d'Ivoire Red Cross.
<p>R.2. A framework for volunteering management exists and is implemented by National Societies. The indicators are clear guidelines for volunteers management, the availability of annual reports on volunteers and human resources</p>	<ul style="list-style-type: none"> • A meeting was held with all the stakeholders to take forward the process of implementing functioning volunteers' databases in the National Societies.
<p>R.3. Guidelines for finance management exist and are followed by National Societies. The main indicator is that regular evaluation and audit report showing progress exist.</p>	<ul style="list-style-type: none"> • Through the frame of the 08 NS initiative, four National Societies and particularly the Red Cross Society of Côte d'Ivoire have been supported in defining its core costs and elaborating its business plan (on going).

Migration

At first, the Migration initiative had planned the carry-out of a study on migration (causes and definition of roles and responsibilities of the International Federation): "to better understand the context, and to facilitate effective and more strategic support and advice to the National Societies in their work with migrants". As the Migration Manager started in her position in January 2009, it was quickly decided that, instead of an extensive research comprising of 24 different contexts and NS, an overview of the current situation was necessary to target specific areas of intervention as well as of NS for the Federation's impact to be more significant. From the first weeks of the year, it was decided to indeed map the needs and vulnerabilities of migrants through the work of NS in the field of migration.

Outcomes

- A clear mapping of activities implemented by RC/RC Movement components in the Zone is presented.
- A coordination mechanism is established between all RC/RC Movement components engaged in activities to assist migrants in the Zone.
- A common strategy to assist migrants is developed with the input of the WCAZ on the needs and vulnerabilities of migrants, the root causes and the trends in the region, paving the way to a coordinated and efficient approach of all RC/RC Movement components involved in assisting migrants.

- The Federation has provided technical support to the Zone National Societies' project proposals drafting.

Achievements

Field missions were carried out to do a mapping of activities implemented by NS for migrants. In 2009, three NS had started or had ongoing activities for migrants: Senegal, Mauritania and Mali. Meetings with local/national authorities on migration related issues and with migrants associations and other organizations working in the field of migration were also held.

The information sharing between NS in the region has been very minimal, close to non-existent. Given that some of these NS see the same migrants crossing their borders and are offering similar services to the most vulnerable ones, it is indeed necessary to develop coordination mechanisms between them. Meetings were held to give an opportunity to discuss issues shared by NS in the region with Migration focal points, and an electronic bulletin with the purpose of sharing valuable information between NS working with migrants and their partners within the RC/RC Movement should be published in early 2010.

The first phase of the Migration initiative was to map the needs of migrants and capacities of the region's NS, and to disseminate the new Policy on Migration. These activities, together with regional RC/RC Movement meetings have helped in going towards building a common strategy that is underway to assist migrants and that requires more time to take shape.

The NS' awareness towards the possible needs and vulnerabilities of migrants having been raised through the presentation of the Policy on Migration, the interest of working with migrants where needed and valuable might develop further; the Federation aims at supporting NS that will choose to do so

Working in partnership

The European Union through CEMAC supported PPROLUSIDA in Central Africa. UNICEF, through the Global Funds contributed among other partners in Central Africa. In Sahel PMI/USAID is funding health programmes through the Federation, as well as Against Malaria Foundation (AMF), Shell Company, the Canadian RC, the Alliance of Malaria Partners (AMP), UNICEF, WHO, Plan Burkina and JICA. Other main partners in the region are ICRC, Swedish RC, Finnish RC, Norwegian RC, Danish RC, Irish Government, Spanish RC, French RC, Japanese RC, Australian RC, Nestlé, Belgium RC, WFP, and ECHO.

A DRR project is being conducted in Tintane (Mauritania) in which the Canadian RC is providing support in health and branch capacity development. DM is also delivering DRR services to community at risk.

Collaboration between DM WCAZ and ICRC Dakar regional office enabled joint support to Guinea-Bissau RC in Contingency stock.

Base line studies on food security were conducted in five countries in the Zone and results have been shared with all PNSs. The information contained in the base line is used by PNSs to develop specific projects. Information on who is doing what and where is being disseminated by DM WCAZ to all PNSs involved in food security.

External partnership

The MOU signed between the Federation and ACMAD has been implemented and a focal point from the Federation has been working in ACMAD for three months during the rainy season to provide climate information that are being used by NS for DM decision making. The project will continue in 2010.

The Zone DM unit undertakes regular consultations with other regional partners like CILSS and ECOWAS and the MOU is being discussed. A continuous dialogue with humanitarian partners is kept ongoing in the IASC framework. Exchange of information between partners on common issues helps to improve DM programmes.

The Organisational Development strategy for West & Central Africa received support from many bilateral and multilateral partners namely Danish Red Cross present in Togo, Mali and Democratic Republic of Congo, Swedish supported OD processes through Federation with great interest for volunteering development, Canadian, British, Norwegian, Netherland RC are present mainly in Liberia, Sierra Leone and Côte d'Ivoire in the framework of the 08 NS Africa Initiative, Croix-Rouge de Belgique is in Burkina-Faso, Democratic Republic of Congo and Mali. The Swiss Red Cross is working with the Togolese Red Cross and Mali Red Cross, while the Icelandic Red Cross is in the Gambia. The Spanish RC is supporting through the IDWARC project, ICRC offices in Dakar, Abidjan, Guinea and Mauritania are investing in Human Resources for National Societies, volunteers' management processes and planning activities.

Tighter cooperation was built up throughout the year between the Zone Migration unit and the region's National Societies, the ICRC and a number of European NS (in particular with the PERCO members – Platform for European Red Cross Cooperation on Refugees, Asylum Seekers and Migrants). The Migration unit is also part of the Follow-up Group on mixed migratory flows involving UNHCR, OHCHR, the International Organization for Migration (IOM) and International Labour Office (ILO).

Contributing to longer-term impact

The monitoring and evaluation of programmes must be improved and standardized. Coordination mechanism from the NS to Regional Office and to the Zone must also be strengthened. More supervision from the Regional office to the NSs is essential. More Community empowerment and commitment is also crucial for longer term impact, as well as more implementation of solid CBHFA programmes.

Community based disaster risk reduction programme (CBDRRP) contributes significantly to reduce vulnerability through the increased knowledge of community at risk in terms of agricultural techniques, building houses resistant to floods and mitigating impact of floods. The community based project reached great achievements and knowledge acquired by the beneficiaries will help to take decision which will improve their resilience.

However, without a minimum of engagement from the local authorities to build road, electricity facilities, water, schools and other basic public services the CBDRRP sustainability will not be ensured.

The aim of the organisational development support is to improve National Societies' service delivery basis. The emphasis put on long term planning will improve the impact of the development activities. Addressing financial sustainability of National Societies will make them stronger and less dependant from external donors to cover their core costs. Ensuring coordination among all the stakeholders will facilitate communication and better synergy in the support coming from different parts, improve experience sharing and promote best practices.

Looking ahead

More support to NS in terms of leadership, resource mobilization, monitoring, evaluation and reporting should be provided. A better cooperation with OD within the programmes from planning to reporting is to be worked out.

The 2010 DM plan of action will ensure continuity in the focus on DRR and preparedness for response and also will also work on the implementation of the strategy 2020.

Sustainable Partnership based on MoU as the one signed with ACMAD will be extended to CILSS and ECOWAS to support the RC&RC work at community level.

In 2010, emphasis will be put on facilitating cooperation and coordination between NS within and outside the Zone. Cross-regional issues should be identified to enable NS supported by the

Migration unit to develop cross-regional initiatives and cooperation projects among them. Some time will be allocated to identifying potential sources of funding for those initiatives and projects to take place. Building partnerships within the RC/RC Movement and with other organizations will also be on the agenda in order to build synergies in the field of migration in the region.

How we work	
<p>The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".</p>	<p>Global Agenda Goals:</p> <ul style="list-style-type: none"> • Reduce the numbers of deaths, injuries and impact from disasters. • Reduce the number of deaths, illnesses and impact from diseases and public health emergencies. • Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability. • Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.
Contact information	
<p>For further information specifically related to this report, please contact:</p> <ul style="list-style-type: none"> • In Dakar: Daniel Sayi, Acting Head of Sahel Region Representation, West Africa, phone: +221 86936 40, Fax:+221 33 820 25 34, email: daniel.sayi@ifrc.org • In Southern Africa: Alasan Senghore, Director for Africa Zone, Johannesburg, email: alasan.senghore@ifrc.org; phone +27 11 303 9700; mobile +27 71 872 5111; fax +27 11 884 0230 	

[<final financial report below; click here to return to title page>](#)

International Federation of Red Cross and Red Crescent Societies

MAA61001 - West and Central Africa

Annual Report 2009

Selected Parameters	
Reporting Timeframe	2009/1-2009/12
Budget Timeframe	2009/1-2009/12
Appeal	MAA61001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
A. Budget	1,860,000	1,792,601	234,068	606,374	961,947	5,454,989
B. Opening Balance	687,880	363,889	561,839	0	333,854	1,947,463
Income						
Cash contributions						
American Red Cross					5,000	5,000
Australian Red Cross		-11,494				-11,494
Danish Red Cross			121,973			121,973
Danish Red Cross (from Danish Government)			-17,496			-17,496
DFID Partnership grant	322,333					322,333
Finnish Red Cross		52,392			77,705	130,097
Finnish Red Cross (from Finnish Government)		296,886			56,732	353,618
Help us Help		26,801				26,801
Icelandic Red Cross					0	0
Irish Government		-138,289	-85,666			-223,955
Japanese Red Cross		0				0
Netherlands Red Cross	28,818					28,818
Netherlands Red Cross (from Netherlands Government)	22,361					22,361
Norwegian Red Cross	95,421	21,206		82,888	15,500	215,015
Norwegian Red Cross (from Norwegian Government)	197,388	190,855				388,243
Other	196,565	152,873	81,893		178,442	609,773
Procter & Gamble		55,212				55,212
Qatar Red Crescent		291,164			1,151	292,315
Shell		8,643				8,643
Spanish Government			-529,800			-529,800
Spanish Red Cross	156,960		242		-156,960	242
Sumitomo Chemical Co. Ltd		25,805				25,805
Sweden Red Cross		46,376				46,376
Sweden Red Cross (from Swedish Government)	243,022	306,660	35,183	125,664	59,293	769,821
Unidentified donor	-8,359	10,050				1,691
United Arab Emirates Red Crescent	0					0
USAID		13,849				13,849
C1. Cash contributions	1,254,509	1,348,988	-393,672	208,552	236,863	2,655,240
Outstanding pledges (Revalued)						
Australian Red Cross		-7,959				-7,959
Finnish Red Cross		-36,000			-57,920	-93,920
Finnish Red Cross (from Finnish Government)					30,600	30,600
Netherlands Red Cross (from Netherlands Government)	22,318					22,318
Norwegian Red Cross					-12,500	-12,500
Norwegian Red Cross (from Norwegian Government)	55,988					55,988
Qatar Red Crescent		-379,724				-379,724
Spanish Red Cross			-17,959			-17,959
Sweden Red Cross (from Swedish Government)	109,328	39,713		0		149,040
USAID		249,821				249,821
C2. Outstanding pledges (Revalued)	187,634	-134,149	-17,959	0	-39,820	-4,294
Income reserved for future periods						
Norwegian Red Cross (from Norwegian Government)	-55,988					-55,988
Spanish Government	-49,783					-49,783
USAID		-15,339				-15,339

International Federation of Red Cross and Red Crescent Societies

MAA61001 - West and Central Africa

Annual Report 2009

Selected Parameters	
Reporting Timeframe	2009/1-2009/12
Budget Timeframe	2009/1-2009/12
Appeal	MAA61001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

C3. Income reserved for future periods	-105,771	-15,339				-121,110
Inkind Personnel						
<i>Finnish Red Cross</i>					52,800	52,800
<i>Germany Red Cross</i>		31,000				31,000
<i>Norwegian Red Cross</i>					74,400	74,400
<i>Sweden Red Cross</i>		38,817				38,817
C5. Inkind Personnel		69,817			127,200	197,017
Other Income						
<i>Miscellaneous Income</i>	20,170	233			44,275	64,679
<i>Services</i>		-4,051			106,642	102,591
C6. Other Income	20,170	-3,817			150,917	167,270
C. Total Income = SUM(C1..C6)	1,356,542	1,265,500	-411,630	208,552	475,160	2,894,123
D. Total Funding = B + C	2,044,422	1,629,389	150,209	208,552	809,013	4,841,586
Appeal Coverage	110%	91%	64%	34%	84%	89%

II. Balance of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
B. Opening Balance	687,880	363,889	561,839	0	333,854	1,947,463
C. Income	1,356,542	1,265,500	-411,630	208,552	475,160	2,894,123
E. Expenditure	-1,712,844	-1,449,559	-118,414	-94,044	-588,471	-3,963,331
F. Closing Balance = (B + C + E)	331,578	179,830	31,795	114,508	220,543	878,255

International Federation of Red Cross and Red Crescent Societies

MAA61001 - West and Central Africa

Annual Report 2009

Selected Parameters	
Reporting Timeframe	2009/1-2009/12
Budget Timeframe	2009/1-2009/12
Appeal	MAA61001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure						TOTAL	Variance A - B
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination			
A		B						A - B	
BUDGET (C)		1,860,000	1,792,601	234,068	606,374	961,947		5,454,989	
Supplies									
Shelter - Relief	762,100	33,999						33,999	728,101
Construction Materials		9,870						9,870	-9,870
Clothing & textiles	25,000	59,740	107			310		60,157	-35,157
Food	23,000	1,480	589			2,012		4,080	18,920
Water & Sanitation	52,500	8,271	32,646			-2,549		38,368	14,132
Medical & First Aid		1,703	10,425			3,061		15,189	-15,189
Teaching Materials	125,250		10,253					10,253	114,997
Utensils & Tools	69,000	44,182						44,182	24,818
Other Supplies & Services			9,705					9,705	-9,705
Total Supplies	1,056,850	159,245	63,725			2,833		225,804	831,046
Land, vehicles & equipment									
Land & Buildings		-6,119						-6,119	6,119
Vehicles	2,232		9,832					9,832	-7,600
Computers & Telecom	16,729	22,198	2,826		1,702	3,933		30,660	-13,931
Office/Household Furniture & Equipm.		2,949	9,791					12,740	-12,740
Others Machinery & Equipment	2,500								2,500
Total Land, vehicles & equipment	21,460	19,028	22,449		1,702	3,933		47,113	-25,652
Transport & Storage									
Storage	14,960	16,695	6,167			3,210		26,072	-11,113
Distribution & Monitoring	4,300	50,042	17,567	249	71	2,275		70,204	-65,904
Transport & Vehicle Costs	147,771	53,876	50,046	-1,982	1,165	26,493		129,598	18,173
Total Transport & Storage	167,030	120,613	73,780	-1,733	1,236	31,978		225,874	-58,843
Personnel									
International Staff	1,339,584	300,879	305,165	86,550	42,452	224,798		959,845	379,739
Regionally Deployed Staff						-1,164		-1,164	1,164
National Staff	458,225	108,357	38,795	118	9,770	12,877		169,916	288,309
National Society Staff	155,535	65,801	36,261	10	835	-2,458		100,448	55,086
Consultants	32,575	54,989	39,192			36,114		130,295	-97,720
Total Personnel	1,985,919	530,026	419,413	86,678	53,057	270,167		1,359,341	626,578
Workshops & Training									
Workshops & Training	762,530	402,954	571,967	1,835	3,407	73,941		1,054,104	-291,575
Total Workshops & Training	762,530	402,954	571,967	1,835	3,407	73,941		1,054,104	-291,575
General Expenditure									
Travel	150,344	119,366	68,118	6,538	24,391	51,512		269,926	-119,582
Information & Public Relation	278,886	38,839	39,995	375	35	27,220		106,464	172,422
Office Costs	138,515	48,339	21,318		916	-23,595		46,977	91,538
Communications	31,684	30,681	8,109	-404	2,113	9,383		49,882	-18,198
Professional Fees	-48,950	10,197	241	-1,560		3,473		12,352	-61,301
Financial Charges	6,410	7,263	19,059	-251		-86,677		-60,606	67,016
Other General Expenses	456,244	847	353		0	3,310		4,510	451,733
Total General Expenditure	1,013,133	255,531	157,193	4,698	27,455	-15,372		429,504	583,629
Depreciation									
Depreciation						-6,939		-6,939	6,939
Total Depreciation						-6,939		-6,939	6,939
Programme Support									
Program Support	354,567	114,107	97,526	7,723	6,659	30,623		256,638	97,929
Total Programme Support	354,567	114,107	97,526	7,723	6,659	30,623		256,638	97,929
Services									
Services & Recoveries		1,727	5,420			134		7,281	-7,281
Shared Services		180,383	77,307	19,327		206,152		483,169	-483,169

Selected Parameters	
Reporting Timeframe	2009/1-2009/12
Budget Timeframe	2009/1-2009/12
Appeal	MAA61001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A							B	A - B
BUDGET (C)		1,860,000	1,792,601	234,068	606,374	961,947	5,454,989	
Total Services		182,110	82,727	19,327		206,286	490,450	-490,450
Operational Provisions								
Operational Provisions	93,500	-70,769	-39,221	-114	527	-8,980	-118,558	212,058
Total Operational Provisions	93,500	-70,769	-39,221	-114	527	-8,980	-118,558	212,058
TOTAL EXPENDITURE (D)	5,454,989	1,712,844	1,449,559	118,414	94,044	588,471	3,963,331	1,491,658
VARIANCE (C - D)		147,156	343,042	115,654	512,330	373,476	1,491,658	