

Report 2006-2007



International Federation
of Red Cross and Red Crescent Societies

Horn of Africa Regional Programmes

Appeal No. MAA64004

This report covers the period of 01/01/2006 to 31/12/2006 of a two-year planning and appeal process.

In a world of global challenges, continued poverty, inequity, and increasing vulnerability to disasters and disease, the International Federation with its global network, works to accomplish its Global Agenda, partnering with local community and civil society to prevent and alleviate human suffering from disasters, diseases and public health emergencies.



Providing vulnerable communities with sufficient quantity of uncontaminated water and adequate sanitation remains a priority for the Red Cross and Red Crescent societies in the Horn of Africa sub-region/Ethiopian Red Cross Society..

In brief

Programme Summary: The main thrust of the Federation's efforts in 2006 was to support its member National Societies in the Sub- region – the Ethiopian Red Cross Society (ERCS) and the Red Crescent Society of Djibouti (RCSD) - to take forward organizational reforms which the societies embarked on a couple of years ago with the intention of improving the effectiveness and efficiency of their services. This implied introducing changes in the way they were organized and worked. Both National Societies have made significant progress and are better prepared to respond to the growing humanitarian challenges in their countries. This is evidenced by an increased number of people reached by the Red Cross and Red Crescent in 2006 through ongoing health and community-based disaster preparedness (CBDP) programmes. The year also brought new challenges such as climatic shocks and disease outbreaks, exacerbating already precarious conditions of vulnerable communities and demanding immediate humanitarian attention. Local capacities have been stretched and the National societies were compelled to temporarily divert some of their resources to respond to the unfolding humanitarian crises. Their efforts contributed to saving lives. Active engagement of Red Cross and Red Crescent volunteers with the local communities has also boosted the visibility of the National Societies and encouraged new partnerships. However more efforts need to be put to strengthen preparedness for emergencies within the organizations and at community level. To have greater impact, the quality and scope of the programmes must also be improved.

The National Societies are now at a crucial stage with new leaderships and new opportunities for growth, and essentially, determination to become well-functioning national societies. More active involvement and support of partners will be indispensable to help them in their endeavours.

Needs: Total 2006-2007 budget CHF 3,668,821 (USD 2,796,357 or EUR 2,370,805), out of which 15.1 per cent covered. [Click here to go directly to the attached financial report.](#)

For more detailed information on 2006 activities, please see Programme Update 1 and 2:

Programme Update no. 1: <http://www.ifrc.org/docs/appeals/annual06/MAA6400401.pdf>

Programme Update no. 2: <http://www.ifrc.org/docs/appeals/annual06/MAA6400402.pdf>

Related emergency appeals:

Ethiopia drought: Refer to <http://www.ifrc.org/docs/appeals/06/MDRET001.pdf>

Ethiopia floods :Refer to: <http://www.ifrc.org/docs/appeals/06/MDRET003.pdf>

No. of people we help: In 2006, over **700,000** people benefited from Red Cross and Red Crescent services, 60 percent of them women:

Table 1. Red Cross and Red Crescent beneficiaries in 2006.

Support provided by the Red Cross /Red Crescent Societies in 2006	Number of people
Hygiene promotion/ Participatory Hygiene and Sanitation Transformation (PHAST) training.	25,510
Access to improved sanitation.	39,445
Access to sufficient quantity of uncontaminated water.	91,685
HIV and AIDS prevention (peer education and awareness raising).	77,730
Home care for people living with HIV (PLWHIV).	719
Access to antiretroviral therapy (ART).	396
Malaria control.	501,345
Strengthening community coping mechanisms via first aid training.	991
Total	737,821

In addition, through emergency response operations, the Red Cross and Red Crescent societies have assisted over 130,000 people:

- Drought response operation in Ethiopia: over 60,000 people.
- Floods response operation in Ethiopia: over 70,000 people.

Our Partners: The Red Cross and Red Crescent partners in the sub-region include community-based women associations (CBWA), various government ministries (such as the ministries of health, water, and urban development), UNFPA, UNICEF, UNDP, OCHA, WHO, WFP, EU, USAID and Association of People Living with HIV and AIDS . Within the Movement, the American, Belgian, British, Danish, Finnish, French, German, Spanish and Swedish National Societies and ICRC.

Current context

2006 was a tragic year for many in the Horn of Africa sub-region. It saw the scorching sun drying up rivers, lakes and wells, killing thousands of livestock and damaging crops in areas where majority of the population depends on agriculture to survive. In Ethiopia, 2.5 million people were exposed to famine. The drought was followed by unusually extended and widespread rains that triggered flash floods and overflowing of rivers, lakes and dams. Ravaging waters washed away people's homes and livelihoods. Hundreds were killed and up to 1.4 million were adversely affected, including about 650,000 people who were displaced between October and December 2006. The populations that live along rivers, marshes and other low lying areas were affected with particular severity. An outbreak of acute watery diarrhoea (AWD) that followed the floods added to the concerns.

The emergencies compounded the already daunting chronic conditions. It is estimated that two-thirds of Djibouti's estimated (800,000) people live below the poverty line; 10 percent live in extreme poverty. Malnutrition among children younger than five years is a silent emergency. A survey conducted in 2006 showed that the global acute malnutrition rate had risen to 20.4 percent compared to 17.9 percent in 2002, and severe acute malnutrition was 7.1 percent, against 5.9 percent in 2002 (source: Ministry of Health of Djibouti). The WHO considers a global acute malnutrition rate of 15 percent as critical.

In Ethiopia, statistics show an equally grim reality: Government studies indicate that 44 per cent of the population lives below the poverty line; 90 percent of those are in rural areas. According to the Ministry of Finance and Economic Development (BOFDED), Sustainable Development and Poverty Reduction, more vulnerable households are female-headed households (49 percent). Routine expanded programme for immunization (EPI) stands at 60.8 per cent. For each 1,000 live births, 140.1 children die before reaching the age of five years. Only six per cent of women are assisted by skilled birth assistants during delivery. Maternal mortality rate is very high, affecting 870 per 100,000. Less than 40 percent of the Ethiopian population has access to safe drinking water; in rural areas, where over 80 percent of the population live, only slightly over 25 percent have access to safe water. Only nine percent of the rural households have access to sanitation facilities while only five percent of the total population is estimated to have access to solid waste disposal (ERCS strategic plan 2006-2010).

Progress towards objectives

Djibouti

Health and Care

Goal: The Red Crescent Society of Djibouti has a sustainable impact upon the general health of targeted communities through its health programme.

Objective: The capacity Red Crescent Society of Djibouti in community health and care programming is facilitated through Federation support.

Although efforts have been made to expand the geographic coverage of the Red Crescent programmes, the focus primarily remained on Balbala, where the most vulnerable sections of the population live, including communities displaced by the drought as well as political and economic migrants from neighbouring countries. The emphasis has been on the promotion of hygiene, sanitation and community management of water and sanitation (WatSan) facilities through training of volunteers and community associations in Participatory Hygiene and Sanitation Transformation (PHAST), a methodology that builds on people's innate ability to address and resolve their own problems. In total, 60 volunteers were trained, which brings the total number of PHAST-trained volunteers in various parts of the country to 100. A PHAST tool kit was also developed. It consists of drawings made by local artists to reflect the local culture and conditions. The materials have been vital for helping group participants to develop the skills and confidence, to think problems through, to identify solutions and a plan for change.

The number of community associations trained by the Red Crescent risen from four, with a membership of over 400 households, to 15, with a membership of over 600 households. Use of insecticide-treated mosquito nets (ITNs) was also encouraged to prevent the spread of malaria. The Red Crescent Society of Djibouti (RCSD) distributed 3,000 ITNs to pregnant women, mothers, the elderly and children aged under five years. Forty volunteers were trained in community-based first aid (CBFA).

Results have been inspiring. Subsequent monitoring has revealed that hygiene behaviours and sanitation have indeed improved and there is an increased awareness of water and vector-borne diseases. During the year, two communal clean-up campaigns were held with the participation of 600 people. The National Society also participated in the Ministry of Health-led polio vaccination campaign that targeted children aged under five years. Through peer education efforts, the RCSD has been

advocating for behavioural change and voluntary counselling and testing among groups that are most exposed to HIV and AIDS, with a particular focus on youth. In cooperation with UNFPA, the RCSD also provided food to 150 people living with HIV (PLWHIV). Intensifying advocacy against female genital mutilation was another prioritized area for the Red Crescent action. Many women and girls are still subjected to the cutting. The practice, also known as female circumcision, leaves lasting physical and psychological scars, in addition to risks during childbirth. In partnership with UNFPA, the RCSD initiated discussions on this very sensitive issue with a number of women associations at various meetings and training sessions.

Organizational Development

Goal: Implementation of the characteristics of a well-functioning national society has improved in the Red Crescent Society of Djibouti in the areas of foundation, capacity and performance.

Objective: The Red Crescent Society of Djibouti's institutional capacity and its progress towards operating as a well-functioning national society is enhanced through Secretariat support.

The focus of the Federation Secretariat's support in Djibouti has been to help the RCSD to rebuild its self after being dormant for years. A new organizational structure (organogram) has been designed, and is awaiting governance approval. It will be presented to regional committees for adoption prior to its implementation. Significantly, for the first time in many years, the National Society held a General Assembly. It elected a new board and adopted the new statutes. The new leadership has pledged to take forward the necessary reforms and has embarked on the development of a strategic plan (2007-2010).

Active involvement and support of Partner National Societies (PNSs) in the strategic planning process will be important to transform their fragmented engagement into a stronger and broader alliance, to be formalized through a cooperation agreement strategy (CAS). To improve coordination within the organization, the society introduced weekly staff meetings. It also started reviving its dormant branches and establishing new ones. The RCSD currently has 240 regional committees and six branches. Building expertise at local level to scale up community-based work is now seen as a priority.

Humanitarian Values

Goal: Movement Principles and Humanitarian Values are known and respected throughout the region and discrimination against vulnerable groups is reduced.

Objective: The information unit of the Red Crescent Society of Djibouti is an active member of the regional communications forum, has developed its potential to respond to humanitarian emergencies, and has increased the capacity of the National Society to promote Movement Principles and Humanitarian Values in the Eastern Africa region.

The National Society's Humanitarian Values programme was largely on the ICRC-funded activities, including a survey to establish the image of the Red Crescent Society of Djibouti among the population as well as volunteer self-evaluation trainings and dissemination sessions. The National Society, in collaboration with ICRC, conducted an assessment in Djibouti City and the regions to establish its image among the population. The assessment surveyed a population sample of 100 people, including the young and the elderly. Among its findings, 43 percent of the population said they were aware of the Red Cross/Red Crescent activities, and the majority in this percentage were the elderly (80 percent). Branch self-evaluation trainings on behaviour of volunteers during emergency situations, targeting 20 volunteers per region, were conducted in Ali Sabieh, Arta, Dikhil, Obock and Tajourah regions by ICRC. Four dissemination sessions on the International Red Cross and Red Crescent Movement were also organized.

Ethiopia

Health and Care

Goal: The health and care for vulnerable households and communities – including those affected by conflict, epidemics (including HIV and AIDS) and disasters – is improved while the vulnerability of the community is decreased.

Objective: The Federation facilitates the development of the Ethiopia Red Cross Society (ERCS) capacity in community-based health and care programming including HIV and AIDS and water and sanitation activities by strengthening the capacity of staff and volunteers to reach the most vulnerable communities and building their capacity and awareness on disease transmission and control.

The ERCS has been trying to improve and expand its programming at grass-roots level with the battle against HIV and AIDS being the focus of its community-based efforts. It is estimated that 6.6 percent of the population in the country is HIV-positive, but few have courage to admit it openly due to denial, on fear of and discrimination. Because of its special status, reputation and thousands of volunteers, the Red Cross is in an ideal position to challenge the labels that divide people. In an effort to encourage open discussion on the virus, the Red Cross convened 716 forums in 2006. The forums were attended by women and men of all age, community elders and leaders; in total, some 3,248 people took part.



Red Cross volunteers talk with their peers to encourage tolerance and action against discrimination and social exclusion

In partnership with UNDP; 28 eight core trainers and 280 community conversation facilitators were trained and 56 community conversation groups with 50 to 60 members each, were formed. Through peer education, the ERCS reached some 77,650 school children in 206 schools. Basic home-care was provided to 719 PLWHIV. Of these, 396 undergo antiretroviral therapy and Red Cross volunteers have been visiting them regularly to ensure compliance to the treatment; the government of Ethiopia avails antiretroviral free of charge. To improve access to safe water and adequate sanitation, the Red Cross has been digging wells, distributing water treatment chemicals and personal hygiene the locally available materials, and raising community awareness on basic hygiene, such as hand washing. In total, some 275 water points were constructed and 1,375 water management committees were formed by the ERCS in 2006. Thanks to Red Cross efforts, some 18,237 households (91,185 people) now have access to uncontaminated water and 7,809 other households (39,045 people) have sanitation facilities in 275 kebeles, within 73 woredas. A hundred and fifty people were trained as trainers in PHAST methodology, which brings the total number of PHAST-trained volunteers in various parts of the country to 1,300. Over 25,000 people have been reached through ERCS hygiene promotion activities.

A total of 1,345 volunteers were trained on malaria prevention. The ERCS distributed a total of 200,000 insecticide-treated mosquito nets to 100,000 households. To strengthen the capacity of the local medical facilities to respond to disease outbreaks triggered by climatic shocks, the ERCS, with the support of Partner National Societies, donated two emergency health kits and eight cholera kits to the Ministry of Health. Each kit is sufficient to treat 1,000 patients for three months.

Disaster Management

Goal: The disaster preparedness and response capacity of ERCS at headquarters and branches is strengthened and coherent responses provided to the vulnerability of communities.

Objective: The preparedness and response capacity of the ERCS is strengthened through Federation support.

Community-based first aid has been an important part of the Red Cross efforts to strengthen self-sufficiency of local communities, considering the low capacity of local health care systems to respond swiftly to daily emergencies, including natural or man-made disasters. In 2006, ERCS trained 951 people. The National Society was involved in two emergency operations during the year and provided assistance – in the form of emergency food and non-food items, safe water and adequate sanitation to over 150,000 people. To strengthen its preparedness for future disasters, the ERCS was supported to preposition essential items such as water containers, tools and other non-food items.

Organizational Development

Goal: Implementation of characteristics of a well-functioning national society has improved the ERCS in the areas of foundation, capacity and performance.

Objective: ERCS has strengthened its capacity at headquarters and branches to respond to humanitarian emergencies and development needs of the communities.

The major thrust of the Federation's efforts was to support the ERCS to take forward the reforms that the society embarked on in 2004. The task for 2006 was to implement the new organogram, which was confirmed in 2005 and start decentralizing functions from the headquarters to the branches; the ERCS currently has 11 regional branches, 27 zonal and 41 woreda offices. The re-organization process is ongoing to build a professional and accountable team with the full capacity to deliver the key functions.

Humanitarian Values

Goal: Movement Principles and Humanitarian Values are known and respected throughout Ethiopia and discrimination against vulnerable groups is reduced.

Objective: The information unit of the ERCS is an active member of the regional communications forum; has developed its potential to respond to humanitarian emergencies; and increased its capacity to promote Movement Principles and Humanitarian Values in the East African region.

With the support of ICRC, the ERCS has been promoting the International Humanitarian Law (IHL) and the Fundamental Principles both within and outside the organization. The aim was not only to raise the profile of the Red Cross, but to encourage more people to join the National Society as agents of change. The ERCS currently has some 2 million registered members and 75,000 active volunteers.

Working in partnership

Both National Societies in the sub-region receive practical and financial support from a range of Movement and non-Movement partners, including UNFPA, UNICEF, UNDP, OCHA, WHO, WFP, European Union, USAID and the Association of PLWHIV. The National Societies worked closely with their national and local government representatives to address the growing humanitarian challenges. Noteworthy is the cooperation of Red Cross and Red Crescent branches with local community-based organizations, for example, *Idiroch* (local self-help associations), *kebele* (village) administrations, youth and women's groups. These partnerships helped extend programme areas and reach new beneficiary groups.

The needs, however, significantly outweigh the current responses. In light of the magnitude of the challenges, a more active engagement of partners is required to support the Movement to accomplish more.

Contributing to longer-term impact

The Red Cross and Red Crescent Societies have played an instrumental role in responding to climatic shocks and health epidemics that exposed thousands of people to suffering. Movement volunteers worked round the clock and demonstrated an inspiring dedication to bring, at times, life-saving aid to the vulnerable. Massive health education campaigns that were rolled out across the region contributed to reducing child mortality, improving maternal health and combating HIV and AIDS, malaria three of the Millennium Development Goals - and other diseases. The expansion of malaria in mid and low altitude areas has by far become the major health concern. Only one percent of the population in Ethiopia sleeps under ITNs. According to ERCS, malaria accounts for 10 per cent of all disease related deaths and causes illness to an estimated 1.5 million people. HIV and AIDS and diarrhoeal disease are the other major diseases plaguing the health sector. Although deaths and new infections are still quite high, interventions that promote behavioural change are proving successful. Via peer education and 'community conversations' (public forums), the Red Cross and Red Crescent is reducing intolerance, discrimination and social exclusion and promoting respect for diversity and human dignity. Although, the coverage still remains scattered, access to sustainable water has also improved. As a result of the Red Cross and Red Crescent efforts, over 100,000 people now have uncontaminated water and adequate sanitation facilities.

The role of women in water management has been proactively promoted. Like in many parts of Africa, women in Ethiopia bear the main burden and they are more vulnerable to waterborne diseases. By bringing wells closer to their homes, women no longer need to walk long distances or spend hours waiting to fetch water. Their exposure to sexual violence and exploitation has also been reduced. Through CBFA and PHAST training, Red Cross and Red Crescent contributes to creating more self-sufficient communities.

Looking Ahead

The National Societies of Djibouti and Ethiopia are at a crucial stage with new opportunities for growth, and essentially, determination to become well-functioning organizations. Organizational reforms will allow the National Societies to better serve the vulnerable segments of the population in the region. In particular, the focus will be on expanding partnerships, scaling up local fundraising, improving planning, reporting, monitoring and evaluation functions and strengthening preparedness of the National Societies for disasters. Efforts against malaria, HIV and AIDS and other preventable diseases will be stepped up.

The Red Crescent Society of Djibouti has been selected for intensified capacity building, a modality for the provision of additional tailor-made assistance to enhance its capabilities to deliver expanded programmes and fulfil the Federation's Global Agenda. CAS is a priority in both countries for 2007. As part of the global initiative, a new framework for partnerships Operational Alliances is proposed to be piloted with the National Society in Ethiopia to enable it to reach more vulnerable people with scaled-up programmes and better quality services. The pilot initiative will offer a unique and exciting learning opportunity to create institutional knowledge on alternative approaches to realizing the goals of the Federation's Global Agenda.

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International Federation of Red Cross and Red Crescent Societies

MAA64004 - HORN OF AFRICA

Financial Report 2006

Selected Parameters	
Reporting Timeframe	2006/1-2006/12
Budget Timeframe	2006/1-2007/12
Appeal	MAA64004
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
A. Budget	2,727,902	337,889		384,849	218,182	3,668,821
B. Opening Balance	68,697	199,182		42,826	16,045	326,751
Income						
<u>Cash contributions</u>						
<i>British Red Cross</i>	0	0		0		0
<i>DFID Partnership</i>	13,970	33,926		17,961		65,857
<i>Finnish Red Cross</i>	19,563			3,913	553	24,028
<i>Swedish Red Cross</i>	120,705			34,487	15,519	170,712
C1. Cash contributions	154,238	33,926		56,361	16,072	260,596
<u>Reallocations (within appeal or from/to another appeal)</u>						
<i>British Red Cross</i>		-43,425				-43,425
<i>Finnish Red Cross</i>				16,000	-16,000	0
C3. Reallocations (within appeal or		-43,425		16,000	-16,000	-43,425
<u>Inkind Personnel</u>						
<i>American Red Cross</i>				1,447		1,447
<i>Finnish Red Cross</i>					8,500	8,500
C5. Inkind Personnel				1,447	8,500	9,947
C. Total Income = SUM(C1..C6)	154,238	-9,499		73,808	8,572	227,118
D. Total Funding = B + C	222,935	189,683		116,634	24,617	553,869

II. Balance of Funds

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
B. Opening Balance	68,697	199,182		42,826	16,045	326,751
C. Income	154,238	-9,499		73,808	8,572	227,118
E. Expenditure	-90,208	-59,022		-79,533	-25,031	-253,794
F. Closing Balance = (B + C + E)	132,727	130,661		37,101	-414	300,075

International Federation of Red Cross and Red Crescent Societies

MAA64004 - HORN OF AFRICA

Interim Financial Report -2006

Selected Parameters	
Reporting Timeframe	2006/1-2006/12
Budget Timeframe	2006/1-2007/12
Appeal	MAA64004
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation		
A							B	A - B
BUDGET (C)		2,727,902	337,889		384,849	218,182	3,668,821	
Supplies								
Clothing & textiles	64,200							64,200
Water & Sanitation	894,000					3	3	893,997
Total Supplies	958,200					3	3	958,197
Land, vehicles & equipment								
Vehicles	110,000							110,000
Computers & Telecom	66,000				2,954		2,954	63,046
Office/Household Furniture & Equipm.		265					265	-265
Others Machinery & Equipment	44,000							44,000
Total Land, vehicles & equipment	220,000	265			2,954		3,219	216,781
Transport & Storage								
Storage						2,219	2,219	-2,219
Distribution & Monitoring						6,759	6,759	-6,759
Transport & Vehicle Costs	273,896	2,040	4,750		3,284	-8,598	1,476	272,420
Total Transport & Storage	273,896	2,040	4,750		3,284	380	10,454	263,442
Personnel Expenditures								
Delegates Payroll	313,200				29,596	85,536	115,133	198,067
Delegate Benefits	236,000	8,869	20,736		22,849	-58,626	-6,172	242,172
Regionally Deployed Staff	100,000							100,000
National Staff	211,388	1,010	4,540		1,069	-3,355	3,263	208,125
National Society Staff	89,468	26,999			1,872	3,305	32,176	57,292
Consultants	10,000							10,000
Total Personnel Expenditures	960,056	36,877	25,275		55,387	26,860	144,399	815,657
Workshops & Training								
Workshops & Training	510,276	4,993	8,594		1,627	1,881	17,095	493,181
Total Workshops & Training	510,276	4,993	8,594		1,627	1,881	17,095	493,181
General Expenditure								
Travel	178,940	4,015	5,272		9,572	568	19,428	159,512
Information & Public Relation	45,900	136	37		1,069	61	1,303	44,597
Office Costs	54,880	1,037	128		996	8,659	10,821	44,059
Communications	30,000	5	191		1,406	5,894	7,496	22,504
Financial Charges		7,152			-235	-607	6,310	-6,310
Other General Expenses	198,200	3,120	11,593		609	-20,194	-4,872	203,072
Total General Expenditure	507,920	15,465	17,222		13,418	-5,618	40,486	467,434
Federation Contributions & Transfers								
Cash Transfers National Societies					5,221		5,221	-5,221
Total Federation Contributions & Tr					5,221		5,221	-5,221
Program Support								
Program Support	238,473	5,864	3,836		5,164	1,591	16,455	222,019
Total Program Support	238,473	5,864	3,836		5,164	1,591	16,455	222,019
Operational Provisions								
Operational Provisions		24,704	-655		-7,522	-66	16,462	-16,462
Total Operational Provisions		24,704	-655		-7,522	-66	16,462	-16,462
TOTAL EXPENDITURE (D)	3,668,821	90,208	59,022		79,533	25,031	253,794	3,415,027
VARIANCE (C - D)		2,637,693	278,866		305,317	193,151	3,415,027	

International Federation of Red Cross and Red Crescent Societies

MAA64004 - HORN OF AFRICA

Selected Parameters	
Reporting Timeframe	2006/1-2006/12
Budget Timeframe	2006/1-2007/12
Appeal	MAA64004
Budget	APPEAL

All figures are in Swiss Francs (CHF)

IV. Project Details

Project	Name	Opening Balance	Income	Expenditure	Closing Balance	Budget	Variance
		A	B	C	A + B + C	D	D - C
Health & Care							
PDJ401	Seed Project	68,697	33,533	-90,208	12,022	201,142	110,934
PET401	Health	0	120,705		120,705	194,995	194,995
PET402	Water & Sanitation	0	0		0	2,331,765	2,331,765
Sub-Total Health & Care		68,697	154,238	-90,208	132,727	2,727,902	2,637,693
Disaster Management							
PET009	Floods Response 2007	0	0		0		0
PET161	DP	28,636	33,926	-8,747	53,815	129,055	120,308
PET166	Food Security (Horn)	59,186	-43,425	-15,761	0	208,834	193,073
PET517	Food Security	111,361	0	-34,514	76,846		-34,514
Sub-Total Disaster Management		199,182	-9,499	-59,022	130,661	337,889	278,866
Organisational Development							
PDJ002	Naitonal Society	42,821	21,874	-72,189	-7,495	256,659	184,470
PET001	Institutional Develo	5	51,934	-7,344	44,596	128,190	120,847
Sub-Total Organisational Development		42,826	73,808	-79,533	37,101	384,849	305,317
Coordination & Implement							
PET101	Progr. Coord.&Manage	16,045	8,572	-25,031	-414	218,182	193,151
Sub-Total Coordination & Implement		16,045	8,572	-25,031	-414	218,182	193,151
Total	HORN OF AFRICA	326,751	227,118	-253,794	300,075	3,668,821	3,415,027