

# ANNUAL REPORT



International Federation of Red Cross and Red Crescent Societies  
Fédération Internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge  
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja  
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

## EAST AFRICA REGIONAL PROGRAMMES

30 April 2005

### In Brief

**Appeal No.:** 01.10/2004 – [http://www.ifrc.org/cgi/pdf\\_appeals.pl?annual04/011004.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?annual04/011004.pdf)

**Appeal target:** CHF 3,412,740 (USD 2,563,078 or EUR 2,196,807)

**Appeal coverage:** 54.5% ([Click here to access the final financial report](#))

**Appeal 2005:** East Africa regional programmes no. 05AA007 –  
[http://www.ifrc.org/cgi/pdf\\_appeals.pl?annual05/05AA007.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/05AA007.pdf)

*This Annual Report reflects activities implemented over a one-year period; they form part of, and are based on, longer-term, multi-year planning. All International Federation assistance seeks to adhere to the Code of Conduct and is committed to the Humanitarian Charter and Minimum Standards in Disaster Response in delivering assistance to the most vulnerable. For support to or for further information concerning Federation programmes or operations in this or other countries, please access the Federation's website at <http://www.ifrc.org>*

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### Overall analysis of the programme

The regional delegation continued implementing the Strategy for Change, moving from an implementing role to a more facilitating one, at the same time taking on responsibilities for tasks previously performed by the Geneva secretariat.

Focus has been maintained on health activities in line with ARCHI 2010, scaling up HIV/AIDS activities, food security, disaster preparedness and strengthening the capacity of the national societies, whilst at the same time being able to respond to disasters in the region. Emphasis is increasingly shifting to activities directly linked to organizational development and the coordination role of the Federation.

The diversity of size and stages of development at which national societies are, presents challenges in designing a regional program; hence support has had to be tailor-made in most cases to meet the specific needs of each national society. The capacity to understand and implement governance and management systems in conformity with Federation guidelines is quite challenging, particularly in national societies which have traditionally been used to the management system where the President is very often Chief Executive.

A prudent start was made with the initiation of the external relations unit, which unfortunately had to be aborted given the tight financial situation of the regional delegation.

## East Africa regional programmes; Annual Appeal no. 01.10/2004; Annual Report

Several almost simultaneous changes in key senior positions in the region (Head of regional delegation, Head of East-Africa sub-region, Head of Horn of Africa sub-region, Head of Sudan delegation, Head of Somalia Delegation, Federation representative in Eritrea, regional programme coordinator and regional health and care coordinator) reduced the capacity of the regional delegation to provide effective services to its stakeholders and partners in the region during the last half of 2004.

### Objectives, achievements/impact, and constraints

#### Health and care

**Goal: Support national societies in the region to contribute towards sustainable improvement of overall health of vulnerable communities through provision of quality community based health care programmes.**

**Objective: Support national societies in the region and consequently vulnerable communities to address their public health needs in a sustainable manner using the ARCHI strategy while at the same time building upon the capacities of national societies to rapidly and effectively address public health needs in emergencies (preparedness and response).**

**Expected result 1: technical support within the ARCHI framework has been provided to national societies to scale up health and care initiatives by 2007.**

The support provided during the course of 2004 is specified in the table below.

Country	Health	HIV	Water and Sanitation (WatSan)
Djibouti	<ul style="list-style-type: none"> <li>§ Integrated Health Seed Project (IHSP) including distribution of 700 insecticide treated mosquito nets</li> <li>§ Establishment of partnerships with other stakeholders in the country</li> </ul>	<ul style="list-style-type: none"> <li>§ Peer education training of Red Crescent volunteers</li> <li>§ PHAST training workshop for 19 volunteers in Belbala branch</li> </ul>	<ul style="list-style-type: none"> <li>§ IHSP, PHAST<sup>1</sup> training</li> <li>§ Recruitment of IHSP project coordinator</li> </ul>
Eritrea	<ul style="list-style-type: none"> <li>§ Integrated health programme (HIV, malaria, sexually transmitted infections (STI) and TB.</li> <li>§ training of schools and communities in community based first aid (CBFA); training in malaria prevention; and training of women in home management</li> <li>§ Food security and health assessments</li> </ul>	<ul style="list-style-type: none"> <li>§ Review of manual and curriculum for peer education training</li> <li>§ Review of community health and HIV/AIDS programme</li> <li>§ Establishing partnership with association of people living with HIV/AIDS (PLWHA)</li> <li>§ Story telling competition for world AIDS Day.</li> </ul>	<ul style="list-style-type: none"> <li>§ Support to drought relief operation and preparation of assessment report.</li> </ul>

<sup>1</sup> PHAST- participatory hygiene and sanitation transformation.

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<b>Country</b>	<b>Health</b>	<b>HIV</b>	<b>Water and Sanitation (WatSan)</b>
Ethiopia	<ul style="list-style-type: none"> <li>§ National measles campaign</li> <li>§ Meningitis preparedness</li> </ul>	<ul style="list-style-type: none"> <li>§ Mid-term evaluation of HIV/AIDS programme</li> <li>§ Facilitation at home based care workshop</li> <li>§ Support to antiretroviral treatment (ART) proposal</li> <li>§ Story telling competition for world AIDS Day</li> </ul>	<ul style="list-style-type: none"> <li>§ developing a monitoring and Evaluation tool on hygiene promotion for Illubabor branch with the support of the British Red Cross</li> <li>§ Field pre-testing of the tool to train staff and volunteers on its application.</li> </ul>
Kenya	<ul style="list-style-type: none"> <li>§ Integrated health projects in Siaya, Bureti and Kajiado branches</li> <li>§ Strengthening volunteer base</li> <li>§ Blood donor recruitment curriculum development</li> <li>§ Review of first aid manual</li> </ul>	<ul style="list-style-type: none"> <li>§ Development of HIV and AIDS workplace policy for staff and volunteers</li> <li>§ Support in developing a commercial workplace programme including supporting two workshops to review the resource pack developed and to train facilitators for the programme.</li> <li>§ Documentation and launching of Mombasa branch home based care programme as a best practice</li> <li>§ Development of abstract for international HIV and AIDS conference in Bangkok</li> <li>§ Support in developing ART proposal, family home based care programme, peer education, and story telling competition for world AIDS Day</li> <li>§ Support to establishing partnership with National Empowering Network of PLWHAs.</li> </ul>	<ul style="list-style-type: none"> <li>§ Support to Kajiado IHSP including PHAST and a baseline survey training for 25 Volunteers</li> <li>§ Support to the WatSan components of the drought operation in Kwale and Makueni districts</li> </ul>
Madagascar	<ul style="list-style-type: none"> <li>§ Support to the national measles campaign, capacity building and on training on social mobilization and scaling up malaria interventions</li> </ul>	<ul style="list-style-type: none"> <li>§ Support to the development of the national society's strategic plan 2004-2006</li> </ul>	
Rwanda	<ul style="list-style-type: none"> <li>§ Support to the planning of distribution mechanisms for the malaria programme in Butare</li> </ul>	<ul style="list-style-type: none"> <li>§ Support to policy and strategy for assistance to orphans and vulnerable children as well as to the strategic plan</li> </ul>	

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<b>Country</b>	<b>Health</b>	<b>HIV</b>	<b>Water and Sanitation (WatSan)</b>
Somalia	<ul style="list-style-type: none"> <li>§ Support to the strategic health plan 2005-2009</li> <li>§ Support in developing training curriculum for traditional birth attendants and in review of family planning protocol</li> <li>§ Support to the development of a malaria proposal to Global Fund and to the action plan for malaria interventions</li> <li>§ Support in identification of areas of intervention for harmful effects of female genital mutilation</li> <li>§ Evaluation of syndromic approach of STI</li> </ul>		<ul style="list-style-type: none"> <li>§ Co-facilitation at PHAST training for 23 participants drawn from the Somali Red Crescent, UNDP, UNICEF, ADRA and WFP</li> <li>§ Co-facilitation at PHAST training in four regions of Somalia</li> <li>§ Support in developing proposal for EU funding</li> <li>§ Procurement of technical equipment</li> </ul>
Sudan	<ul style="list-style-type: none"> <li>§ Capacity building &amp; training on social mobilization</li> <li>§ FACT<sup>2</sup> mission assessment</li> <li>§ Establishing partnership with Concern Worldwide (Darfur) and partnership for EPI (country);</li> <li>§ Social mobilization workshop for staff of Khartoum state branch</li> </ul>		<ul style="list-style-type: none"> <li>§ Review of Red Sea State drought operation</li> <li>§ Identification of volunteers for national watsan disaster training</li> </ul>
Seychelles	<ul style="list-style-type: none"> <li>§ Support to CBFA proposal development</li> </ul>		
Tanzania	<ul style="list-style-type: none"> <li>§ Evaluation of Masasi integrated health project</li> <li>§ Input to blood donor recruitment proposal</li> </ul>	<ul style="list-style-type: none"> <li>§ Support for OVC workshop and home based care proposal development</li> <li>§ Facilitation of youth peer education training</li> </ul>	<ul style="list-style-type: none"> <li>§ Support to Masasi IHSP</li> <li>§ Final evaluation of Lugufu and Kasulu refugee water supply programmes</li> </ul>
Uganda	<ul style="list-style-type: none"> <li>§ Scaling up routine immunization activities</li> <li>§ Support to Reaching Every District (Mbarara) malaria proposal and the promotion of insecticide treated mosquito nets (ITNs)</li> </ul>	<ul style="list-style-type: none"> <li>§ Support to the Youth Peer Education, the midterm evaluation of the home based care programme and the development of an ART proposal</li> <li>§ Support to Uganda component of the Empowerment of African Young People Initiative</li> </ul>	<ul style="list-style-type: none"> <li>§ PHAST training</li> <li>§ Review Kampala East community based health programme</li> <li>§ Construction of latrines, water kiosks, and protection of springs in South-West refugee operation in Uganda</li> </ul>

<sup>2</sup> FACT – Federation assessment and coordination team(s)

## East Africa regional programmes; Annual Appeal no. 01.10/2004; Annual Report

The health and care support unit also provided numerous supports to other programmes of the regional delegation as part of promoting a closer integration of activities (outlined in the table below):

Health	HIV	Water and Sanitation
<ul style="list-style-type: none"> <li>§ Regional malaria workshop</li> <li>§ Development of blood donor self assessment questionnaire for national societies</li> <li>§ Participation at East Africa Roll Back Malaria Network (EARN)</li> <li>§ Measles partnership initiative</li> <li>§ Participation at the food security scenario planning workshop for Horn of Africa</li> <li>§ Participation at the Health retreat Geneva</li> <li>§ Organizing and facilitating at the meeting of health and care working group of the RC-NET<sup>3</sup> in Nairobi</li> </ul>	<ul style="list-style-type: none"> <li>§ Developing several tools and guidelines including HIV/AIDS monitoring and evaluation plan; Federation guidelines for care of carers and terms of reference for review and update of nutrition for PLWHA booklet</li> <li>§ Participation and support at several workshops including HIV/AIDS in emergency settings workshop, a regional OVC workshop, the regional workshop of the Youth Alliance initiative, and presentation on integrating sexual and reproductive health concerns of PLWHA into reproductive services at International Planned Parenthood Federation meeting</li> <li>§ Supporting Federation partnership with NAP+</li> <li>§ Support to the launch of story telling competition for world AIDS Day</li> <li>§ representation in Pan African conference</li> <li>§ Fundraising Gala with Prince Charles of Wales</li> <li>§ Participation at the meeting of health and care working group of the RC-NET in Nairobi</li> </ul>	<ul style="list-style-type: none"> <li>§ Development of PHAST guide for national societies</li> <li>§ Establishing working partnerships with NETWAS and WESCORD</li> <li>§ Membership to the International Network to Promote Household Water Treatment and Safe Storage</li> <li>§ Participation at the WHO symposium for safe water</li> <li>§ Participation at the meeting of health and care working group of the RC-NET in Nairobi</li> </ul>

### Impact

The impact of the support by the regional delegation's health and care unit should be viewed as part of a wider assessment of the ARCHI strategy 2010.

### Constraints

Human resources and organizational capacity constituted the major challenges during 2004. There was high turnover of technical staff in many national societies which was compounded by a lack of sufficiently skilled people to undertake effective follow up of projects.

### **Expected result 2: Closer coordination and collaboration has been established among national societies through support to the health and care working group of the RC-NET.**

Two RC-NET health and care working group meetings were held during 2004. These meetings have been instrumental in defining strategic areas of focus: the malaria workshop held in September attended by representatives from 11 national societies was one of the action points stipulated during the meeting. The health and care working group meetings have also contributed to promoting the sharing of experiences, ideas and resource materials.

<sup>3</sup> RC-NET – Red Cross Red Crescent Network for East Africa

## East Africa regional programmes; Annual Appeal no. 01.10/2004; Annual Report

### Impact

Several national societies have applied experiences learnt from other countries:

- The Red Cross of Eritrea, Rwandan Red Cross and Uganda Red Cross benefited from the Kenya Red Cross experience in projects related to first aid, commercial first aid and home-based care.
- Tanzania Red Cross visited Uganda Red Cross to learn from the blood donor recruitment programme.
- Mauritius Red Cross and Kenya Red Cross visited Djibouti to support a volunteers training course in first aid.

Resource materials and best practice briefs have been developed by national societies and adapted for use in different countries. Examples here included Somali Red Crescent adapting the Kenya Red Cross First Aid Manual and Kenya Red Cross adapting the baseline survey checklist of the Djibouti Red Crescent for an integrated health seed project. The publication of the lessons learnt from the home based care project of the Tigray branch of Ethiopian Red Cross guided the national societies of Kenya and Somalia in producing the respective documents.

### Constraints

Owing to limited resources, the RC-NET health and care working group meetings were held over very short periods which were not sufficient to adequately address all issues on the agenda. These meetings will in the future be combined with regional workshops on other topics to allow enough time for discussion.

### **Expected result 3: resources (financial, material and human) have been mobilized for health and care core costs and scaling up of national societies' health and care programmes**

A Health/HIV/AIDS programme officer, an HIV/AIDS manager and a Health and Care Coordinator were recruited during 2004; this has improved the level of technical support to national societies' health and care programmes. The unit also support the national societies of Djibouti, Eritrea and Ethiopia in the development of job profiles, selection and recruitment of new staff.

Active fundraising by the regional health and care advisor earned the department funds to undertake various missions. Cost recovery mechanisms were also implemented to supplement the income of the department. The HCSU also played an active role in linking national societies directly to donors as well as securing funds channelled through the Federation.

Examples of projects initiated during 2004 with funding from donors through the Federation include:

- § Three integrated health and care projects: Red Crescent of Djibouti, Kenya Red Cross and Tanzania Red Cross ;
- § Youth peer education projects: Red Cross of Eritrea and Tanzania Red Cross;
- § Kenya Red Cross workplace programme, Maternal Neonatal Tetanus vaccination, and HIV/AIDS project;
- § Measles campaigns: Ethiopian Red Cross, Malagasy Red Cross and Sudanese Red Crescent
- § A workshop on orphans and vulnerable children: Kenya Red Cross, Somali Red Crescent, Netherlands Red Cross and Norwegian Red Cross;
- § A regional malaria workshop.

With support of the regional health and care unit, the Red Cross of Eritrea, Ethiopian Red Cross, Kenya Red Cross and partner national societies (PNS) commenced the process of drafting proposals for application to the European Union under the African Caribbean and Pacific (ACP) water and sanitation facility.

Examples of projects in which the regional health and care unit has had an input in linking donors with national societies include:

- § The Global Fund to fight AIDS, Tuberculosis and Malaria (GFATM): Kenya Red Cross, Somali Red Crescent and Comoros Red Crescent;
- § World Bank funds for Mother and Child Health in Somalia;
- § Funds from UNICEF, WHO and the Rwandan Ministry of Health in which the Rwandan Red Cross is implementing a programme for orphans and vulnerable children, focusing on malaria, EPI and communicable disease control;
- § Uganda refugee operation (funds from the Netherlands Red Cross);

## **East Africa regional programmes; Annual Appeal no. 01.10/2004; Annual Report**

- § The Together we Can initiative in Tanzania funded by American Red Cross;
- § National societies' participation in the Roll Back malaria constituency meetings and the EPI meeting;
- § The Country Coordination Committee of the Uganda Youth Empowerment Alliance (UYEA), of which Uganda Red Cross functions as national secretariat, was awarded a USD 20,000 grant from the International Youth Foundation to undertake joint youth peer education activities. The regional health and care unit provided input and close monitoring of each of the UYEA activities.

### **Constraints**

Only 67% of the appeal budget was covered.

### **Expected result 4: WatSan is an integral part of health and care in all national societies in the region.**

The Red Crescent of Djibouti, Red Cross of Eritrea, Ethiopian Red Cross, Kenya Red Cross, Somali Red Crescent and Uganda Red Cross Societies have integrated water and sanitation into some of the health and care projects. Further, water and sanitation and health staff in Kenya, Ethiopia and Uganda report to the same programme coordinator.

National societies have been encouraged to take up a more active approach to developmental WatSan while still maintaining their emergency WatSan response. As a result, the water supply system for over 90,000 refugees in Lugufu in Tanzania has shifted from an expensive river based harvesting to a groundwater system. Support continued towards the achievement of a rainwater system in the South West Refugee Operation in Uganda.

### **Impact**

National societies are progressively looking at water borne diseases within a general health context. Baseline studies with high incidence of diarrhoeal disease have been a base to start water and sanitation interventions in Ethiopia, Djibouti, Kenya, and Tanzania. The national societies are also beginning to look at their respective WatSan programming in the whole context of the Millennium Development Goals. This spirit has been reflected in the Global WatSan initiative developed by the Federation Secretariat's Public Health Unit.

The beneficiaries in the three integrated health seed projects in Kenya, Tanzania and Djibouti are receiving a holistic package of services (immunizations, bed-nets, clean water, HIV awareness, etc.). Health and WatSan are combined in Kampala East Community Health project while an HIV/AIDS project is to be introduced in the same project area in 2005. The HAMSET strategy (HIV/AIDS, malaria, STI and TB) is the entry for all programmes in Eritrea.

### **Constraints**

There are many reasons why Water and Sanitation is not integrated into health and care programmes in the region. The most common is that many national societies find it easier to manage and fundraise for vertical programmes. The ARCHI 2010 concept has also not been fully integrated leading to isolated projects at branch level. Lack of skilled human resources is another constraint for several national societies.

### **Expected result 5: Strategic partnerships to address the challenges in public health and technical input for national societies have been developed and promoted.**

Several partnerships and networks formed in the previous years continued to benefit national societies in the region. Among these include the national association for people living with HIV/AIDS (NAP+), the Somali Aid Coordination Body (SACB), and partnerships with WHO, UNICEF and several ministries of health for the expanded programme on immunization (EPI). The Roll Back Malaria initiative in Kenya, Tanzania and Rwanda, as well as the Eastern Africa Regional chapter (EARN). Other are the partnership with UNHCR for working with refugees, UNAIDS concerning HIV/AIDS, and the Interagency Standing Committee on HIV/AIDS in emergencies.

Geneva Secretariat has established a partnership with the Safe Water Alliance which will further position the movement to play an even greater role in promoting household options for safe water. This is a technological approach which will in no doubt save the lives of the most vulnerable communities who live in areas with no full developed Water supplies.

## East Africa regional programmes; Annual Appeal no. 01.10/2004; Annual Report

The collaborative efforts with the Network for Water and Sanitation (NETWAS) in Kenya regionally yielded fruit towards the end of 2004 when the Federation team co-facilitated a regional disaster workshop on Water, and Environmental Sanitation organized by NETWAS. The seminar was attended by representatives from Ethiopia, Sudan, Rwanda, Uganda and Kenya and brought people working in both development and emergency situations. The practical session held at the Machakos branch of Kenya Red Cross was facilitated using WatSan stocks from the regional delegation in Nairobi. The regional WatSan team also attends WatSan forums in Nairobi organized by KISIMA (water Kenya) and WESCOORD (Kenya) for water and sanitation issues.

### Impact

The partnerships with associations for PLWHA are working well in Kenya, Uganda, Eritrea, Rwanda, Ethiopia, and Sudan. The malaria partnerships with KENAAM (Kenya), TANAAM (Tanzania) and EARN (regional) are bearing fruit in terms of proposals and possibilities for funding. The SACB (Somalia) meetings also have been beneficial in the design of strategies and fundraising. Through partnerships and collaborative arrangements, the RC has been able to profile its work and image among key payers and stakeholders in the Health and Care sector.

### **Expected result 6: HIV/AIDS and reproductive health related issues are integrated in national societies' programmes such as Disaster Management, Organization Development and Information, Communication and promotion of humanitarian values.**

A UNAIDS/OCHA regional technical consultation on HIV/AIDS and Humanitarian Response in Sub-Saharan Africa was held in Johannesburg, South Africa. The meeting aimed principally at reviewing current good practices of integrating HIV/AIDS into humanitarian responses and at providing action oriented recommendations to accelerate the implementation of HIV/AIDS interventions in emergencies. Key outcomes of the meeting focused on improving information sharing, empowering humanitarian actors through capacity building, and resource mobilization by creating a forum with donors to share understandings and approaches to ensure harmonization and complementary nature of policies on eligibility for funding on HIV/AIDS interventions in emergencies.

The regional disaster management programme and Ethiopian Red Cross, Kenya Red Cross, Sudanese Red Crescent, Tanzania Red Cross and Uganda Red Cross Societies have made good efforts to mainstream HIV/AIDS into emergency responses.

Contacts were established with the UNDP and the UN disaster management training programme who are offering to support a core group of national societies' health and disaster practitioners to put theory into practice in 2005.

**Impact:** HIV/AIDS has been mainstreamed in the agenda and meeting of the RC-NET, DM, working group. HIV/AIDS has also been put on the agenda of the information and communication forum to develop understanding of communication officers on how they can provide support to the dissemination of HIV information (World AIDS campaign, campaign against stigma and discrimination and marketing of national society HIV/AIDS programmes)

### **Expected result 7: Continued support given to the Regional Disaster Response team initiative**

The regional health and care unit is involved in planning and facilitation of RDRT<sup>4</sup> training, development of terms of reference for emergency assessments and deployment of staff (selection, briefings and debriefings, technical support in the field, end evaluations). In Uganda, Ethiopia and Somalia the regional health and care unit has increasingly been involved in supporting the national society response teams.

### Impact

Water and sanitation drought relief responses successfully completed in Sudan, Ethiopia and Eritrea during 2004 provided water, sanitation and hygiene promotion messages to over 120,000 people: 55,000 in Sudan, 35,000 in Ethiopia and 30,000 in Eritrea. The regional capacity in WatSan has seen the national society staff respond to disasters while the WatSan coordinator of Rwandan Red Cross was deployed for a short mission to Haiti.

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<sup>4</sup> RDRT – regional disaster response team(s)

**Constraints**

The regional health and care team needs to be involved more at the planning stage, providing input to emergency preparedness plans, field assessments, monitoring of progress of alerts and interventions.

**Expected result 8: National societies in the region have implemented the health HIV/AIDS workplace policies that include access to treatment for staff and volunteers.**

Six national societies have a HIV/AIDS workplace policy: Red Cross of Eritrea, Ethiopian Red Cross, Kenya Red Cross, Rwandan Red Cross, Tanzania Red Cross and Uganda Red Cross. Training on workplace programmes for anglophone countries has been done, and the Rwandan Red Cross has committed to facilitate a similar training in francophone countries.

The workplace programmes vary per country, but in general consist of HIV awareness; a non discrimination policy in recruitment and human resources management; peer education; referral to medical and psychosocial services; condom promotion and distribution. In each of the countries there is a team involving management, governance and technicians. Some national societies receive external funding to implement their workplace programmes; the Kenya Red Cross has started a programme for commercial workplace programmes offering their skills and services to the private sector.

The Kenya Red Cross and Ethiopian Red Cross have well-functioning peer groups in their offices, while Kenya Red Cross facilitates access to treatment for its volunteers.

**Constraints**

Very few countries have applied for the Masambo funds to provide their employees with antiretroviral treatment. Access to treatment for staff and volunteers has not been made a priority in most national societies.

**Expected result 9: Health and Care components (nutrition, CBFA, WatSan, and HIV/AIDS) are integrated into food security.**

The health and care team has increasingly become more involved in food security issues and was also invited in planning and assessment exercises for Eritrea. WatSan assessments also look at food security and sustainable livelihoods in the holistic integrated health and care projects (water for livestock).

Nutrition guidelines are being developed for PLWHA and for PLWHA who are on anti-retroviral (ARV) therapy. Food baskets are included in the home based care projects and supplementary feeding (moducare) is given to PLWHA in the Kenya home based care programme. Kitchen gardening projects have started in Kenya, Rwanda and Uganda to increase food security for the affected households.

**Constraints**

Water provision (volume) is often taken into account during drought response operations. However, often food security programmes do not look at health and disease indicators (malnutrition, HIV, diarrhoeal disease). Family planning when looking at long term food security is not taken into consideration at all.

Several national societies exploit malnutrition data in various ways, but these are seldom used directly in the design of food relief programmes.

## **Disaster Management**

**Goal: To support the capacities of national societies in terms of human resources, materials, systems, procedures, information and partnerships at regional, sub-regional, country and local levels to predict and prevent disasters, to mitigate their impact and to respond and cope with their consequences.**

**Objective: To strengthen and support appropriate national society capacities in order to provide quality response services to vulnerable communities against common disasters facing the region (food security, political disturbances and population movement, cyclones and seasonal floods; lack of Disaster Policy Plan/Vulnerability and Capacity Assessment).**

**Expected Result 1: Federation and national society capacities to establish food security programmes at national, sub-regional and regional levels have been improved for Ethiopia, Tanzania, Uganda, Kenya, Rwanda, Sudan and Eritrea by the year 2007**

The objective of strengthening food security capacities within the target national societies was fully met. This included strengthening the capacities of national societies through the annual regional disaster response team training (RDRT) while the food security working group was refocused during its annual planning meeting in September.

Food security capacities were also strengthened for Ethiopian Red Cross, Kenya Red Cross and Rwandan Red Cross, leading to food security development projects. Support to Red Cross of Eritrea and Kenya Red Cross particularly resulted into integrated food security emergency programmes. A food security assessment was conducted in Tanzania, but the situation did not warrant an international appeal.

A sub regional food security strategy was developed with the national societies from the Horn of Africa. This resulted in a sub regional food security programme in 2005.

**Expected Result 2: The readiness for political disturbances and population movements has been improved (in Tanzania, Rwanda, Uganda and eventually Burundi by 2007) through developing contingency plans at national, sub-regional and regional levels.**

This activity has been partly achieved. During 2004, only one national society, Uganda Red Cross, requested assistance for contingency planning. However, Rwandan Red Cross was also assisted to replenish disaster preparedness (DP) stocks through DREF after responding to an influx of Congolese refugees and Burundian nationals into the country. Rwandan Red Cross adapted the population movement contingency plan developed in Uganda to respond to the refugee influx.

The regional disaster management department participated during the production of interagency scenario plans for the Horn and East Africa. The regional working group for population movement/contingency plans unfortunately did not take place during 2004.

**Expected Result 3: The preparedness for seasonal floods and cyclones at national, sub-regional and regional levels has been strengthened in Sudan, Kenya and Seychelles by 2007.**

This objective was surpassed during 2004 in which several national societies benefited from assistance by the regional delegation. This included the Sudanese Red Crescent in establishing a national working group on floods and in planning a second phase for the ProVention Consortium flood risk reduction project. The Malagasy Red Cross benefited from support when it undertook a learning review of the national society's response to Cyclone Gafilo and in developing a national disaster preparedness plan.

The Kenya Red Cross was supported with technical advice in their preparation for the floods in April and May and in accessing DREF funds for DP stocks. There was increased involvement with the PIROI during an annual planning event and later at a sub regional training event for the Indian Ocean national societies.

The regional delegation facilitated and attended two meetings in support of the Lake Victoria Project funded through the Swedish Red Cross; field activities had however not commenced by the close of 2004.

## **East Africa regional programmes; Annual Appeal no. 01.10/2004; Annual Report**

The Regional Working Group for Floods and Cyclones met during their annual planning meeting to review progress at which time the working group also re-defined its terms of reference.

### **Expected Result 4: Vulnerability and capacity assessment (VCA) analysis for disaster preparedness plans in Rwanda, Sudan, Ethiopia, Tanzania, Eritrea and Seychelles have been undertaken; lobbying has been done with the governments and UNDP to establish disaster preparedness policy plans at country levels in Seychelles, Rwanda, Tanzania and Ethiopia.**

The development of VCA and disaster preparedness plans and policies has been partly achieved. Several national societies were supported with VCA related activities during 2004 and include: Rwandan Red Cross to conduct community VCA and Somali Red Crescent to undertake a VCA training exercise for four branches; additionally, key staff from the Red Cross of Eritrea, Ethiopian Red Cross, Kenya Red Cross, Rwandan Red Cross and the Federation regional delegation participated in the VCA training of trainers course held in Spain.

Through support by the regional disaster management department, Seychelles Red Cross participated at their national DP policy development exercise while Malagasy Red Cross developed their DP policy and preparedness and response plans. Uganda Red Cross was also supported to increase awareness on national policies and plans among the population.

The Working Group for DP Policy/VCA was reformed with a new team leader and terms of reference.

### **Expected Result 5: Improved knowledge sharing, capacity building and skills transfer has been achieved for all 14 national societies by 2007.**

An evaluation of the Disaster Risk Reduction Programme supported by DFID conducted during 2004 enabled the Rwandan Red Cross, Sudanese Red Crescent, and regional delegation staff to draw lessons from the experiences of implementing disaster risk reduction programmes.

The annual planning and information sharing meeting held during 2004 provided staff and representatives of 13 national societies with an opportunity to share and learn from each other's experiences.

The third RDRT training held in Rwanda and attended by 26 participants from nine national societies also accorded further avenues for building skills and capacities and experience sharing. The Kenya Red Cross and Sudanese Red Crescent were also supported in training their national disaster response teams.

As part of information sharing and learning, case studies on the Madagascar cyclone and NDRT training and deployment in Darfur were developed for the World Conference on Disaster Reduction in Kobe. These were also circulated to national societies in the region.

### **Expected Result 6: Integration of disaster preparedness and response with other regional programmes (health and care, organizational development and promotion of humanitarian values units) has been done by 2007.**

As part of efforts towards integration, the regional disaster management department attended meetings on strategic planning for food security and HIV/AIDS. A pledge for closer integration was drafted with the programme department as the culmination of several planning meetings held with the programmes department during 2004 (regional health and care support unit, information, organizational development and reporting departments). The Horn of Africa food security programme and other food security initiatives have been jointly planned with the health and care support unit.

## **East Africa regional programmes; Annual Appeal no. 01.10/2004; Annual Report**

A Regional Disaster Task Force was established at the regional delegation and comprises technicians from all the departments which meet to coordinate support to emergencies in the region. The task force coordinated five major emergencies during 2004 (hyperlink refers to Emergency Appeal document):

- Kenya floods, Appeal no. 12/2003 – [http://www.ifrc.org/cgi/pdf\\_appeals.pl?03/1203.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?03/1203.pdf)
- Sudan floods, Appeal no. 19/2003 - [http://www.ifrc.org/cgi/pdf\\_appeals.pl?03/1903Sudan.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?03/1903Sudan.pdf)
- Kenya drought, Appeal no. 18/2004 - [http://www.ifrc.org/cgi/pdf\\_appeals.pl?04/1804.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?04/1804.pdf)
- Eritrea drought, Appeals no. 04/2004 - [http://www.ifrc.org/cgi/pdf\\_appeals.pl?04/0404.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?04/0404.pdf) - and 05EA002 - [http://www.ifrc.org/cgi/pdf\\_appeals.pl?05/05EA002.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?05/05EA002.pdf)
- Madagascar cyclone, Appeal no. 08/2004 - [http://www.ifrc.org/cgi/pdf\\_appeals.pl?04/0804a.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?04/0804a.pdf)

As well, the task force supported several minor emergencies:

- Uganda influx of refugees from Rwanda and Burundi
- Uganda IDPs
- Tanzania food insecurity

The RDRT has adopted an integrated approach to training, and encompasses sessions from other sectors, inter alia health and HIV/AIDS, information, logistics, and reporting).

### **Expected Result 7: Networking has been improved with external key organizations e.g. government, UN agencies and NGOs.**

Continued good relations were maintained with UN OCHA, other UN agencies and donor organizations through the contingency planning events. The regional delegation participated actively at the Inter Agency Working Group for Disaster Preparedness that is developing positively. New relationships have been established with UN-ISDR, UNDP (Disaster Reduction) and UNEP to promote disaster risk reduction. The relationship with UNEP has not progressed in East Africa except to facilitate refugee projects in West Africa.

New contacts established during 2004 include ECHO regional office concerning the possibility for thematic funding for natural disaster preparedness and Africa online, an internet service provider to discuss internet connectivity in the region.

Participation in global partnerships progressed with visits from the Fritz Institute and Sphere Project. Cooperation with ProVention Consortium is developing very positively for Sudan.

### **Expected Result 8: Coordination, training and technical support has been improved to increase national society capacities in logistics to enhance self-reliance in procurement, warehousing, fleet management, and logistics relief.**

Efforts to increase national society logistics capacities have included support to Uganda Red Cross in fleet management, Malagasy Red Cross for relief logistics, Red Cross Society of Eritrea for international food procurement, and Kenya Red Cross for the WFP-supported drought relief operation. A regional logistics strategic plan was drafted during 2004 for fundraising purposes.

National societies were supported in the procurement of relief goods and other material for the five disaster operations mentioned above, and in support of the response to the 26 December tsunami and its effect on Comoros, Madagascar, Mauritius, Seychelles, Somalia, Kenya and Tanzania.

### **Expected Result 9: Information technology and telecommunication co-ordination, training and technical support has been undertaken to enhance national societies' self-reliance in information technology and telecommunication (annual event).**

Ethiopian Red Cross was assisted to improve their internet connectivity, email system and computer network system. The Red Cross of Eritrea benefited from support in developing a computer training programme, the radio network for its ambulances service and a branch communications system. Kenya Red Cross was assisted in installing a branch email system and HF radio system. Rwandan Red Cross received support to establish a

## **East Africa regional programmes; Annual Appeal no. 01.10/2004; Annual Report**

partnership with ICRC for setting up a radio network. All this technical support entailed missions by the regional telecommunications manager to these national societies and on the job training for national societies' staff.

In addition to the technical support, the Kenya Red Cross, Somali Red Crescent and Tanzania Red Cross were assisted in the procurement of radio and computer equipment.

### **Impact**

The evaluation of the DFID Risk Reduction Partnership as part of the East Africa Regional DP/R programme highly commended the work of the five working groups as having "overall impressive deployment rates and good results" The evaluation further cited the working groups as having reached and involved some 190 national society staff, terming the partnership as an innovative example for how regional delegations and programmes can more efficiently contribute to national society capacity building and how national society staff can be involved in programme management.

Food security capacity building has led to three development projects and two emergency programmes. The rapid assessment and appeal in Madagascar led to additional finance that was utilised for a DP planning process building on lessons learnt exercise.

The VCA and contingency planning exercise conducted in Somalia proved very helpful in the wake of the 26 December tsunami disaster in Somalia as the national society was among the first humanitarian agencies to provide assistance to the affected communities. The same branch staff involved in the VCA exercise were deployed for assessments and were able to provide detailed information on the situation on the ground. Similarly, the extent of damage in Kenya and Seychelles were rapidly assessed and communities mobilized, thanks to national society RDRT trained staff deployed to the tsunami affected regions.

The response to the conflict situation in Darfur was also enhanced by deployment of trained members of the Sudan Red Crescent Society's national disaster response team.

The procurement of food items was improved after a lesson learnt exercises in Eritrea from the previous appeal. More national societies logistics units are now able to take lead in logistics aspects in relief operations as was demonstrated by Kenya Red Cross procuring DP stocks during the 2004 floods operation.

The logistics review in Uganda resulted in a request for a change in the national society's vehicle fleet. A presentation on fleet management to finance directors of the Kenya Red Cross, Rwandan Red Cross and Uganda Red Cross resulted in a request for similar support in Rwanda.

National society capacity in IT and telecom is improving with demands for more assistance being received and national societies offering to pay for consultancy input. Kenya Red Cross has a fairly good email system and a permanent internet connection while communication in the flood prone areas has been made possible through the use of HF radios as part of disaster preparedness measures.

National societies have outworked the regional DP Strategy 2010 in terms of their renewed commitment to the working groups. The sub regional approach is now on track for all three sub regions: The strategic planning for food security in the Horn of Africa has resulted in a new food security programme that is mostly funded already for 2005. Planning for increased disaster preparedness for the Indian Ocean islands is now likely to be funded from new resources from the tsunami appeal. Programming for the East-Africa sub region will move forward thanks to funding under the Lake Victoria Project.

### **Constraints**

Much work went into developing a proposal with British Red Cross and the Federation for DFID disaster reduction funding; unfortunately the donor chose two other regions due to their comparative humanitarian needs. An application to the capacity building fund for regional IT/telecom was also unsuccessful.

## **East Africa regional programmes; Annual Appeal no. 01.10/2004; Annual Report**

In spite of these setbacks, financial support from DFID, and national societies of Britain, Sweden and Netherlands with staff cost recovery from emergency appeals has enabled most of the planned activities to be carried out.

The position of disaster response officer remained vacant largely due to difficulty in getting a bilingual candidate (Anglophone/francophone). Lack of qualified IT/telecom personnel in the national societies is continuing to weaken support for systems.

### **Organizational Development**

**Goal: Red Cross and Red Crescent societies maintain a high profile in responding to the needs of the most vulnerable**

**Objective: National societies have the necessary structures and systems in place to respond to clearly identified community needs**

**Expected result 1: National society statutes are revised and applied in conformity with Federation guidelines, in Sudan and Somalia by 2007.**

All national societies with statutes older than 10 years at end of 2004 have initiated the process of their revision. However, the process in Djibouti for which the regional OD delegate was focal person seems to have stalled. This is being followed up by the new head of the Horn of Africa sub-regional office as the new focal point for the national society.

**Expected result 2: Integrity issues are being addressed in Burundi, Sudan, Somalia and Tanzania by 2007.**

A decree by the Madagascar government annulling the elections in held at the national society's General Assembly in October resulted in the blocking of all Movement support to the Malagasy Red Cross. This essentially means that a considerable amount of time and resources invested in developing the human resources of the national society will go to waste if the situation is not resolved.. While efforts are being made to resolve the situation, it is a matter of concern that the Movement is unable to support a national society in the largest and most vulnerable country in the Indian Ocean sub-region. For further details, please see the annual report of the Indian Ocean appeal.

**Expected result 3: Human resource policies are in place in Ethiopia and Somalia by 2005, and in Burundi, Tanzania and Sudan by 2007.**

Some progress was made in establishing Volunteer Management Systems. This however still remains a challenge for many national societies due to limited human resource capacity.

**Expected result 4: ICRC and the Federation have adopted a coordinated approach in their support to national societies, in Ethiopia by 2005, and in Somalia, Sudan and Tanzania by 2007.**

The regional organizational development delegate coordinated capacity building support to the Somali Red Crescent closely with the ICRC cooperation delegate. Some joint workshops were carried out focusing on branch development, headquarters-branch relations, dissemination and finance development. The Movement approach to the national society's capacity building was appreciated.

**Expected result 5: National societies are participating actively in national policy making in Burundi, Ethiopia, Sudan and Tanzania by 2007.**

No related activities have been implemented during 2004 (ref. Constraints below).

**Expected result 6: Decentralization processes are established in national societies in Burundi, Ethiopia and Sudan by 2007.**

The new criteria for application to the Federation's Capacity Building Fund (CBF) have increased opportunities for national societies in the region. Through support of the regional OD delegate, ten proposals were submitted to CBF; three were successful:

- Sudanese Red Crescent - branch development in southern Sudan,

## East Africa regional programmes; Annual Appeal no. 01.10/2004; Annual Report

- Rwandan Red Cross - strengthening the decentralization process, and
- East Africa sub-regional office - developing the highest standards of governance.

A proposal from Seychelles Red Cross was approved in principle but sent back for some minor revision.

### **Expected result 7: National societies have entered into an increased number of local partnerships in Burundi, Ethiopia, Sudan, Somalia and Tanzania by 2007.**

A number of national societies succeeded in consolidating their Strategic Plans down to local level; these have been successfully used by branches as the main guideline for planning. Although reporting on activities improved, there are still some gaps in measuring impact.

The Ethiopian Red Cross began a review of its Strategic Plan in late 2004; the Cooperation Assistance Strategy (CAS) document is expected to be ready for discussion and agreement at the national society's partnership meeting to be held in the last quarter of 2005. The Somali Red Crescent is now moving towards the design of a CAS.

### **Constraints**

The regional OD delegate continued to act as focal point for francophone Djibouti Red Crescent and the four national societies in the Indian Ocean during 2004: Comoros Red Crescent, Malagasy Red Cross, Mauritius Red Cross and Seychelles Red Cross. The regional OD delegate completed the handover of the support to the Red Crescent of Djibouti to the head of the newly-established Horn of Africa sub-regional office in December 2004. In the meantime, the decision to open the Indian Ocean sub-regional office in the first half of 2005 and plans for that sub-region after the Tsunami disaster will provide the starting point for the design of a sub-regional agreement strategy. Please refer to the Annual Report for the 2004 Annual Appeal for Indian Ocean sub-regional programmes – [http://www.ifrc.org/cgi/pdf\\_appeals.pl?annual04/010904ar.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?annual04/010904ar.pdf)

Language difference is a major barrier to the development of inter-regional exchange and peer support and is having a negative impact on francophone countries in particular. The shortage of bilingual personnel in both national societies and the regional delegation is a major stumbling block in this respect.

One of the biggest challenges within national societies themselves remains the coordination and monitoring of branch activities. Distance, transport costs and the lack of skilled human resources are the main reasons for this. The best solution to this is to strengthen branch development and decentralization processes; these issues have been given priority in the regional OD program for 2005.

## **Humanitarian values**

**Goal: Red Cross Red Crescent Principles and Humanitarian Values are known and respected throughout the region; discrimination against vulnerable groups is reduced.**

**Objective: The regional information unit developed the potential of the Communications Forum to respond to humanitarian emergencies; increased the capacity of its national societies to promote Red Cross Red Crescent Principles and Humanitarian Values in the East African region; increased tolerance, and reduced vulnerability through anti-stigma and anti-discrimination campaigns.**

**Expected result 1: The development and capacity building of national society information units to meet minimum technical, professional and human resources standards, as approved by RC-NET has been completed.**

The regional information delegate together with counterparts from the Kenya Red Cross and ICRC organized the 3<sup>rd</sup> Regional Communications Forum in April based on the conclusions of the 2003 Regional Communications Forum Task Force. Half of the event took place at the ICRC premises while the second part was hosted at the regional delegation. This was a demonstration of the excellent relationship with the ICRC counterparts that was developed during the last two years. A customized Job Description for national society information officers based

## **East Africa regional programmes; Annual Appeal no. 01.10/2004; Annual Report**

on the samples sent by counterparts was discussed, amended and unanimously adopted during the meeting by participants.

For the first time ever, the event was attended by counterparts from European national societies i.e. British Red Cross, Norwegian Red Cross and Swedish Red Cross as a means of better using Federation's resources in the development of national society information units. A Secretariat Media Service counterpart also attended. Representatives from other organizations included the UN-Integrated Regional Information Network (IRIN) and UNHCR who facilitated sessions on their roles and mandates, their humanitarian priorities and their means and resources. IRIN was represented by its Editor in Chief, the Editors for East Africa and Great Lakes regions and the Humanitarian Advocacy analyst. The Reuters chief photographer for Central and East Africa also graced the occasion and facilitated a session on digital photography after which national societies' information officers participated in an editing process out of which photographs were selected and posted live on the Reuters web site (the full report of the Regional Communications Forum is available at the regional delegation).

A partnership between the Ethiopian Red Cross and the Norwegian Red Cross was facilitated during 2004; through this partnership, the Ethiopian Red Cross information officer participated at the Federation's global information delegates meeting at which he made a presentation of the evolving partnership model.

For the second consecutive year the regional information delegate facilitated information and human values sessions during the RDRT training in Rwanda.

Together with the Comoros Red Crescent information officer and the ICRC Pretoria cooperation delegate, the regional information delegate facilitated media and communications sessions during a regional disaster response training workshop for the Indian Ocean islands national societies organized by the Indian Ocean Regional Disaster Response Platform (PIROI) in La Reunion in November.

### **Impact**

The Regional Communications Forum has become a major regional event on national societies' agenda. It is also perceived as a strategic lever which enables the RC-NET to take decisions to strengthen and harmonise communications and promotion of humanitarian values across the region. The customised job description developed during the meeting outlines areas where information officers should perform but has an annex which specifies what basic means should be made available by their respective leadership in order for them to perform effectively.

The developing partnership between Ethiopian Red Cross and the Norwegian Red Cross was used as a case study during the meeting. All participants appreciated the coordinating and facilitating role of the regional information unit as a way to offer continuity to such partnerships. Consequently the British Red Cross decided to establish a similar relationship with the Uganda Red Cross. The idea was also appreciated by European colleagues since it provides an opportunity for gathering more advocacy elements.

The relationship between IRIN and the regional information delegate at regional level is excellent. There are already positive contacts between IRIN correspondents and Red Cross press officers in Ethiopia, Kenya and Uganda. Occasional contacts also take place in other countries as well. The Communications Forum provided an opportunity to share the regional contacts between the two organizations and encourage Red Cross and Red Crescent information officers to create stronger links with IRIN correspondents in their respective countries.

Reuters has stated their intention to develop a regional network of stringers in the field of digital photography. Since this project is only starting, it was important for the Red Cross and Red Crescent to establish a close relationship at this early stage.

Contributions from within the region continued with articles signed by national society information officers being posted on the Federation web site. The regional information delegate acts as manager, advisor and editor.

### **Constraints**

Although there is an improvement in both performance and capacity of some of the information units at national societies' headquarters level, national societies do not have a territorial information network. This makes it very difficult for counterparts to timely cover an event, gather images and insights and share them with the regional information unit in a timely manner. The Kenya Red Cross, with Federation support, took the lead in creating, training and equipping such a structure. This exercise will serve as a case study during the next Regional Communications Forum.

Staff-on-loan-type assignments of national society information officers to the regional information unit were postponed to 2005 due to insufficient coverage of the unit's budget.

The difficulties in communicating rapidly and efficiently during the tsunami emergency were rightly identified by the Somali Red Crescent and Seychelles Red Cross, two national societies in East Africa region most affected by the 26 December disaster.

There is a weak representation of the information element at the RDRT; only one information officer from Comoros Red Crescent attended the training in Rwanda in 2004. It has been agreed that more information officers will be invited to attend such training in the future. A step towards this saw the RDRT training in La Reunion placing particular focus on information and communications activities during emergencies and crisis situations. A dynamic case study was prepared and conducted by Movement communicators. This first experience within the PIROI structure was much appreciated and participants requested for the inclusion of similar sessions in future at both sub regional and national levels.

### **Expected result 2: Cooperation between national society information units on bilateral, sub regional and regional level has been formalised.**

The Regional Communications Forum has contributed to strengthening regional collaboration between national society information units. This is facilitated by the completion, according to the objectives set by the Task Force, of a customized job description for national society information officers. Visits by press officers from the British Red Cross, Norwegian Red Cross and Swedish Red Cross to Ethiopia, Kenya and Uganda contributed to consolidating the image and perception of the information units within a national society.

Planned coaching missions by the regional information delegate took place in Rwanda and Kenya to coincide with specific events i.e. the 10<sup>th</sup> anniversary of the Rwandan genocide and the NDRT training, respectively. This contributed to a focused approach during the missions.

### **Constraints**

There is still no clear framework for national society cross-border cooperation in the domain of information/promotion of humanitarian values; exchanges take place rather on an *ad-hoc* basis. The next Regional Communications Forum will address this issue and offer a road map for improvement.

Limited time and funding coverage, and the requested support of the information delegate to the Pan African Conference and to other events, made it impossible for the regional information delegate to accomplish planned/requested missions to Eritrea, Madagascar and Sudan. However, the mission to Madagascar was compensated by the participation of the Malagasy counterpart at the RDRT training in La Reunion.

### **Expected result 3: Red Cross Red Crescent responses to emergencies have been professionally promoted and received appropriate coverage at national, regional and international levels.**

Adequate management and coaching by the regional information delegate resulted in quality support to the regional disaster management unit from national societies' information officer during a number of disasters during the period. This included the flash floods in Djibouti, the flood in Kenya and cyclone Gafilo in Madagascar. The Tanzania Red Cross information officer adequately supported the food security assessment in Tanzania.

## **East Africa regional programmes; Annual Appeal no. 01.10/2004; Annual Report**

Requested support was equally provided for the drought in Kenya, the food security operations in Ethiopia and Eritrea, and the IDP operation in Ugandan.

### **Impact**

Each emergency situation encountered during 2004 provided training as well as learning opportunities for the information counterparts. This corresponds to the development approach set by the regional information unit which emphasises the benefits of 'learning on the task'. A real team spirit attitude has been built among the information officers in the region. The link with the Media Service counterpart is excellent and was further strengthened during the recent global information communicators meeting in Geneva.

### **Constraints**

Although each emergency was well covered, there are still communications issues to be addressed within a number of national societies. The absence of territorial information resources is a serious obstacle in the process of gathering and transmitting information rapidly. Information officers are not always included in the national societies' emergency response task forces, and in many cases field missions include all specialities but information and reporting; this has further limited their capacity of accessing even basic information.

These obstacles – and ways to overcome them - have been widely debated during the recent Regional Communications Forum; recommendations were presented to the RC-NET during the regional partnership meeting.

### **Expected result 4: Red Cross Red Crescent campaigns, events and regional programmes have been given consistent visibility through an integrated, well-structured approach.**

A total of 18 articles and press releases as well as a photo gallery were posted on the Federation web site during the period. Additionally, a number of regional press releases and media briefs were issued and documents and images posted on Reuters AlertNet web site. Many of the productions of the regional information unit were quoted by IRIN and excerpts used by UN Relief web and other regional news web sites (in Ethiopia, Eritrea, Rwanda and South Africa). An article for the Red Cross Red Crescent Magazine introducing the Lake Victoria Initiative and focusing on health issues was finalised following a series of field trips to the region.

The 10<sup>th</sup> anniversary of the Rwanda genocide was the main event in the region during 2004. At the request of the national society, the regional information delegate accomplished two missions to assist the Rwandan Red Cross counterparts with the preparation and coverage of the event. The accent was put on the changes and challenges that face the national society ten years after the tragic event. Several regional correspondents among which the head of the German news agency DPA and Reuters' chief photographer visited and covered the national society's programmes.

World Red Cross Red Crescent day was celebrated throughout the region. According to a pledge made during the Regional Communications Forum, the regional delegation's press release included a statement of solidarity in the wake of the 10<sup>th</sup> Anniversary of the genocide. Eleven counterparts shared relevant information, making East Africa the region with the best representation on the Federation's special web page covering the 8 May events.

The World Red Cross Red Crescent day events also focused on health issues, particularly on the Federation's work with national societies in favour of PLWHA. The close cooperation with the regional health and care support unit contributed to increasing the visibility of PLWHA through highlights of Ambassador of hope missions to Sudan and Eritrea. The health and care support unit was also supported to produce several best practices brochures.

The regional information delegate was among those that represented the region at the 6th Red Cross Red Crescent Pan-African Conference (PAC) in Algiers. The regional information delegate was also part of a delegation comprising the Somali Red Crescent and Kenya Red Cross that represented the Federation during the Mine Summit in Nairobi. The delegate provided coordination and support to the delegation in close liaison with the external relations unit in Geneva at both occasions.

## **East Africa regional programmes; Annual Appeal no. 01.10/2004; Annual Report**

The regional delegation presented an editorial in the publication accompanying the global aid and trade which was held in Nairobi in August. The stand reserved to the Federation was ceded to Kenya Red Cross, who displayed a series of promotional documents and first aid kits.

### **Impact**

The good relationship with the Rwandan counterparts was further improved during the two missions by the regional information delegate. A series of articles highlighting the achievements of the Rwandan Red Cross and the needs of orphans and widows were produced and posted on the Federation's web site. Images from a photo gallery produced during these missions were widely used by PNS i.e. Netherlands Red Cross, Norwegian Red Cross, Spanish Red Cross and Swedish Red Cross.

For the first time ever the successful work of the Kenya Red Cross and the Federation in a Muslim community was documented as a best practice document. Articles and a video documentary completed a kit that is hoped will contribute to breaking some of the barriers, stigma and taboos surrounding the HIV/AIDS issue. A best practice document describing the health activities of the Somali Red Crescent was also produced.

An article was produced for the Red Cross Red Crescent Magazine following two field trips by the regional information delegate under the Lake Victoria Initiative; this will ensure global visibility for this ten-year programme supported by the Swedish Red Cross. The field trips conducted together with colleagues from Kenya Red Cross, Tanzania Red Cross, Uganda Red Cross, and the Swedish Red Cross desk officer for East Africa also provided an opportunity to fine-tune the concepts of the programme.

The Federation's image and its regional and continental activities were successfully promoted during the reporting period. A series of articles were produced in connection with the Pan African conference and interviews facilitated for national society representatives with an accent on BBC's African languages service. The Federation presence at the Nairobi Summit for a Mine Free World was also marked through an article that was published on the Federation's web site as well as on Reuters Alert Net.

### **Constraints**

Due to time constraints it was impossible to accomplish joint health-information missions as planned. These missions were expected to serve as an integrated approach and to strengthen the relationship between the two departments.

The Regional Delegation has extremely limited funds for visibility materials such as brochures, leaflets, posters or video documents. The decentralisation process brought forward notions like 'regional marketing' and 'aggressive regional external relations' in view of establishing partnerships with the corporate sector. The absence of a clear marketing policy and adequate budgeting is a serious obstacle in the effort to promote national societies and the Federation in the region.

### **Expected 5: The cooperation with the ICRC in the field of dissemination and promotion of humanitarian values has increased.**

Following the PNS press officers meeting organized by ICRC in Nairobi in November 2003, the recent Regional Communications Forum further consolidated the relationship with ICRC in the region. The Forum had extensive sessions covering dissemination of international humanitarian law and promotion of humanitarian values by the various components of the Movement. In the field, contacts established with ICRC cooperation counterparts in Rwanda and Ethiopia remained cordial.

The RDRT training for Indian Ocean islands national societies organized by the PIROI provided an excellent opportunity to strengthen the cooperation with ICRC (Pretoria) in the field of dissemination and promotion of humanitarian values. Regular meetings as well as formal and informal meetings took place between the ICRC Nairobi and Somalia cooperation delegates and the Federation information delegate.

### **Impact**

## **East Africa regional programmes; Annual Appeal no. 01.10/2004; Annual Report**

The good relationship between ICRC and Federation delegates had a positive impact on the network of counterparts in the region. For example, the issue of information officers sponsored by ICRC was openly discussed during the Regional Communications Forum. The conclusion was that information officers are part of their respective national society structures and as such directly reporting to their Secretaries General. Consequently, open and professional relations with both ICRC and the Federation should provide the necessary information needed by counterparts within the Movement.

The regional information delegate regularly facilitates a session on Federation challenges and priorities during ICRC induction courses. This is also an excellent opportunity to promote a Movement attitude among the new recruits of the ICRC, as well as to sensitize them on subjects such as information and human values.

### **Constraints**

In almost each of the 14 countries served by the Federation regional delegation in Nairobi, there are at least three ICRC information, communications and cooperation counterparts compared to only one Federation information delegate. Their mandates encompass most of the tasks one single regional Federation delegate should accomplish. This makes it practically impossible for the delegate to establish a minimum relationship with the ICRC delegates across the region.

The ICRC and the Federation have a different geographic division of the continent. Whilst the Federation's regional delegation in Nairobi covers 14 countries in East Africa, the Horn of Africa and the Indian Ocean islands, the ICRC delegation in Nairobi covers only three countries (Djibouti, Kenya and Tanzania) while the Indian Ocean islands are covered by ICRC delegation in Pretoria. The other countries have their own country delegation. The difficulty in working together is obvious.

## **Coordination, Cooperation and Strategic Partnership**

**Goal: To establish an effective co-ordination and co-operation role for the regional delegation and the implementation of strategic partnerships in the region.**

**Objective: The regional delegation's responsibility for co-ordination, co-operation and strategic partnerships both at regional and sub-regional level is acknowledged and supported by all national societies in the region.**

### **Progress:**

**Expected result 1: Experienced delegates responsible for implementing the objectives in the three sub-regions are in place.**

Since the Federation Strategy for Change was introduced, consultations over its implementation in the East Africa region were carried out with stakeholders, especially the RC-NET. One of the concepts adopted was the establishment of sub-regional offices in the region, beginning with the East Africa sub-regional office in 2002. After a review of the concept carried out after the first year of the establishment of the East Africa sub-regional office was endorsed by the RC-NET, the national societies in the Horn of African and the Indian Ocean islands sub-regions expressed their interest in adapting the concept. Following wide consultations with these national societies and the Movement partners, the sub-regional office for the Horn of Africa in Addis Ababa was opened in November 2004, whereas the sub-regional office for the Indian Ocean islands is envisaged to be opened in Mauritius early 2005.

However, a dynamic reality with societies developing own capacities rapidly has for the East Africa sub region meant that the group initially in October questioned the need for a sub-regional office located in Kampala, which stopped the recruitment process leaving a serious management vacuum with disturbing impact on service delivery in the region. An interim solution was found and the group is still (March 2005) discussing alternative ways of a support mechanism which best possible will be able to meet the needs of the East Africa sub region and the particular societies, whilst the Horn of Africa and Indian Ocean have settled for the sub regional concept to meet the need in the respective sub regions.

## **East Africa regional programmes; Annual Appeal no. 01.10/2004; Annual Report**

The trend in the region must be described as diverse and ongoing consultations and dialogue are the way forward.

Several key changes in the regional team took place during 2004 as almost all delegates in management positions, from Sudan in the north to Tanzania in the south, from Uganda in the west to Eritrea and Somalia in the east, as well as the two most senior regional delegates, the HoRD and the transition manager ended their contracts and had to be replaced. This affected the effectiveness of the Federation's support to the partner national societies in the region.

### **Expected result 2: The Co-operation Agreement Strategy (CAS) documents for all national societies are in place and regularly updated.**

The updating of the CAS documents from Kenya, Rwanda and Uganda have been undertaken during the reporting period during the respective partnership meetings of the national societies; the finalization of the updated CAS documents are among the issues delayed by the absence of a Head of sub regional office during the last half of the reporting period, and is among the priorities for 2005.

Four other national societies – Red Cross of Eritrea, Ethiopian Red Cross, Somali Red Crescent and Sudanese Red Crescent - initiated the CAS process in 2004 with support from Federation; their CAS documents are expected to be completed during 2005. The support from the regional delegation will more and more emphasize the CAS process as a new culture of cooperation between Movement partners. This was also reflected in the new model for the quarterly team management meeting introduced and applied during the last quarter of 2004.

### **Expected result 3: All international and inter-regional co-operation have been properly documented and standard co-operation, service and other agreements are in common use.**

New collaborative partnerships have been established with WHO/EPI (immunization and malaria control in disadvantaged communities), with Coca-Cola Foundation-Africa (employment of NAP+ members and provision of ARVs), and with the East African Roll back malaria Network (EARN).

The regional delegation has completed service agreements with the Norwegian, the Netherlands, the American and the German Red Cross Societies that are hosted within the regional delegation premises in Nairobi.

The regional delegation has produced case studies on the Madagascar cyclone operation, the Kassala floods in Sudan, and the national disaster response team training and deployment in Darfur, Sudan to be exhibited at the World Conference on Disaster Reduction in Kobe, Japan, in January 2005.

### **Expected result 4: The RC-NET task force meets regularly and discusses the policies and priorities of the regional delegation.**

New committee members to the RC-NET Committee were appointed in June 2004. The RC-NET Committee is composed of the representatives of the national societies of Kenya, Mauritius, Rwanda and Somalia, with Rwanda as the current chair. It will be the task of the RC-NET committee, assisted by the regional delegation, to monitor progress in relation to the RC NET strategic plan 2005-09.

The implementation of the change-strategy at regional level with an organizational set-up based upon a sub regional concept is progressing and is adapted to the particular context and request from national societies for assistance. The sub regional concept was adopted by the RC-NET previous committee but as realities change the RC-NET has resumed the discussion of the best possible organizational structure to ensure a support mechanism which best possible will be able to meet the needs of the sub region and the particular societies. The trend in the region must be described as diverse and ongoing consultations and dialogue are the way forward to create consensus in the region and between the different sub regions on the strategic direction for support to the partner societies in the region.

### **Constraints**

The many changes in the regional team combined with the management vacuum in the sub-regional office for East-Africa in Kampala have affected the work in the regional delegation and delayed management procedures, particularly with regard to support to the Burundi Red Cross, Kenya Red Cross, Rwandan Red Cross, Tanzania

## **East Africa regional programmes; Annual Appeal no. 01.10/2004; Annual Report**

Red Cross and Uganda Red Cross. The impact on the human resources in the regional delegation is visible, and the senior management has worked tirelessly to ensure that adequate human resources are in place for effective services to the membership in the region.

### **Effective representation and advocacy**

**Goal: Effective advocacy, communications and external relations at regional level.**

**Objective: To increase the visibility and influence of the Red Cross Red Crescent's humanitarian agenda at the regional level and to profile Federation in targeted international organizations, with special focus on disaster preparedness/risk reduction, HIV/AIDS, respect for RC/RC principles/humanitarian values and reducing stigma and discrimination.**

#### **Progress**

**Expected result 1: Relevant international organizations and agencies are regularly informed of the work, positions and responsibilities of the Federation and national societies in the region.**

The regional delegation has had several technical meetings particularly at the regional level during the last half of 2004 and occasionally also at country level with UN agencies (WHO, UNDP, OCHA, UNICEF, UNFPA, UNEP, and UNAIDS), the European Union representatives (ECHO and the European Commission), the World Bank, and with international NGOs active in the humanitarian field.

An external relations officer recruited in May to work under the guidance of the regional information delegate to develop a strategy for the regional delegation's external relations work, had unfortunately to be discontinued in May due to funding limitations. Meanwhile, the delegation's bi-weekly newsletter is distributed to a wide range of organizations in the region and abroad.

**Expected result 2: The regional delegation issues position papers on regional subjects in liaison with relevant department in Geneva and Africa.**

A number of position papers were prepared by the regional delegation for the partnership meeting in June, but no activities were possible during the second half of 2004 due to the human resources constraints described above. However, reference is made to preceding sections for the regional delegation's active networking with UN agencies, EU representatives, World Bank and other organizations in the humanitarian field in the region.

#### **Constraints**

Lack of adequate human resources in the regional team has been a limiting factor for further development of external relations.

### **International Disaster Response**

**Objective: To build and maintain capacity at the regional delegation and national societies' levels to provide effective early warning, disaster assessment and disaster response and coordination at regional and international level with the Secretariat in Geneva.**

#### **Progress**

The regional delegation's disaster monitoring mechanisms closely kept abreast with cyclones Darius, Elita, Gafilo, with severe tropical storms "Bento" and "Juba", and with volcano "Karthala" and Le Piton de la Fournaise in the Indian Ocean. The same was done for floods in Kenya, the influx of Congolese refugees into Burundi and Burundi refugees arriving into Rwanda and droughts in Kenya, Tanzania and Eritrea. The floods in Djibouti were totally unexpected and the drought in Kenya had a greater than expected impact. Reasonable use was made of DMIS and good coverage with information bulletins and news stories on most occasions. Minimum reporting standards were achieved and in many cases exceeded regarding operations updates for each emergency appeal. Final reports were posted around the required deadline.

## **East Africa regional programmes; Annual Appeal no. 01.10/2004; Annual Report**

At the 26<sup>th</sup> December 2004 Tsunami struck the coastline of East Africa and the Regional Delegation team was in contact with all national societies in the region offering support and assistance to those countries in its region hardest hit, and the regional delegation was from the early phase of the operation coordinating the substantial interest and support from other African national societies and non-Movement partners.

Efficient and effective disaster assessments were conducted for cyclone Gafilo, the floods in Djibouti, and the refugee situation in Burundi. A drought assessment was organized in reasonably good time following a request from the Red Cross Society of Eritrea, but took longer to organize in Tanzania and Sudan Darfur.

Regional and international disaster response resources were appropriately used: The disaster management department made joint deployments of FACT and RDRT personnel for cyclone Gafilo in Madagascar, Tanzania drought, Burundi refugee crisis and capacity assessment in Darfur; such personnel were also put on standby for the floods in Djibouti. RDRT trained personnel were deployed at national level for the Tsunami in Somalia, Seychelles and Kenya; ERU deployment has not been required, but was offered.

The allocation of DREF was better utilized and more timely for response to minor emergencies than has been the case in prior periods. These included:

- Madagascar cyclone (CHF 50,000),
- Tanzania drought (CHF 15,000),
- Djibouti floods (CHF 30,000),
- Kenya floods (CHF 50,000),
- Sudan Darfur capacity assessment and management (CHF 100,000), and
- Rwanda refugee influx (CHF 50,000).

Considerable logistical support was given for food procurement for the Eritrea drought and non-food items procurement for the Burundi refugees in Rwanda.

Good coordination was maintained with national societies affected by humanitarian crises during 2004. Close interaction for funding was maintained with PNS for Kenya drought and Northern Uganda Relief operation. Operational relationships were enhanced through interaction with ECHO, UNOCHA, UNICEF and World Vision concerning humanitarian situations in Madagascar, Tanzania, Djibouti and Kenya.

Organization learning was maximized from disaster response operations; notable learning reviews included the drought relief operation in Ethiopia and the Madagascar cyclone response. Case studies were written on the Madagascar cyclone and national disaster response team training and deployment in Darfur for presentation at the World Conference on Disaster Reduction in Kobe in January 2005.

### **Impact**

The region effectively responded to four major emergencies in 2004 which greatly contributed to improving the wellbeing of the affected communities. These included:

- the drought in Eritrea which targeted 50,000 beneficiaries with general food distribution and water and sanitation and health services,
- cyclone Gafilo in Madagascar which benefited 25,000 people, and
- the on-going Kenya drought operation that is assisting up to 308,000 beneficiaries with general food distribution, supplementary feeding, seeds and tools, HIV and AIDS, water and sanitation, advocacy and capacity building.

On 26 December 2004, the tsunami struck; seven out of the fourteen countries in the region were affected. Somalia and Seychelles were worst affected, which immediately resulted in relief response later transformed into recovery and rehabilitation with focus on disaster preparedness and risk reduction for the East Africa region.

## **East Africa regional programmes; Annual Appeal no. 01.10/2004; Annual Report**

The capacities of national societies for disaster assessment and management were strengthened in Burundi, Djibouti, Kenya, Madagascar, Rwanda, Sudan and Tanzania. RDRT deployment of national society personnel further increased their capacities.

### **Constraints**

The absence of a disaster response officer in the regional delegation seriously impeded effective disaster response and necessitated this role to be executed by the disaster management coordinator and the regional DP officer to the detriment of other responsibilities. The lack of francophone RDRT and FACT personnel and limited leadership capabilities in RDRT trained personnel were also limiting factors. The absence of a Geneva-based operations coordinator for a third of the year impacted upon the regional team.

### **Governance support**

**Goal: To support members of the constitutional forums to contribute effectively to the Governance of the Federation and the Movement as a whole.**

**Objective: To improve the communication with members of the Board and Commissions specifically on issues concerning the region.**

### **Progress**

**Expected result 1: The head of the regional delegation regularly contacts board and commission members and keeps them informed on key issues in the region.**

The head of regional delegation maintained regular communications with the representatives in the Governing Board from the region.

With the establishment of the NEPARC<sup>5</sup>, the regional delegation has been involved in dialogue with the new network during some of the meetings that have taken place in Nairobi, which included several of the prominent governance representatives from the region.

**Expected result 2: Board and commission members are invited for regional partnership meetings and informed of the outcomes of RC-NET meetings.**

Preparations began in January for the bi-annual Eastern Africa Partnership meeting held in June in Nairobi. The agenda for this meeting was set by the RC-NET in consultation with the national societies in the region including the board and commission members. The Vice-President of the Governing board for Africa fully participated in the meeting. He was also an active contributor during the Chad/Sudan partnership meeting in Geneva in the middle of October.

**Expected result 3: The regional delegation facilitates preparatory meetings for the board and commission members in advance of statutory meetings.**

The agenda for the regional partnership meeting included discussions on decisions taken at the General Assembly of the Federation, the progress of different working groups and committees set up by the Federation, and the preparation of the Pan-African Conference in Algiers in September.

The head of regional delegation ensures effective distribution of relevant communication to governance in the region and facilitates the participation of members of the governance in Board functions.

**Expected result 4: The regional delegation supports board and commission members to represent the Federation in international forums or at international events.**

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<sup>5</sup> NEPARC – New Partnership of African National Red Cross and Red Crescent Societies

## **East Africa regional programmes; Annual Appeal no. 01.10/2004; Annual Report**

The regional delegation assisted the President of the Somali Red Crescent Society in his capacity as the leader of the Federation delegation at the Mine Summit held in Nairobi in November.

### **Impact**

The regional delegation contributed to increased communication with governance members and to participation of board members at regional meetings, and facilitated work undertaken by national society representatives in their capacity as members of the Board.

### **Constraints**

The nomination of the new head of regional delegation took longer than initially anticipated leading to less interaction with governance members than usual.

## **Delegation management (General Services)**

**Goal: The regional delegation's structure and processes are improved to support the implementation of the foregoing objectives.**

**Objective: To maintain an effective and service-oriented infrastructure in order to facilitate the staff of the Federation to work effectively, to maintain an effective structure of communications with sub-regional offices and the national societies in the region, to recruit and employ highly skilled national and international staff, to create staff-on-loan positions in the region and to render services to partner national societies wanting to have a presence in the region.**

**Expected result 1: The office of the regional delegation is equipped and able to implement its objectives.**

The senior management team of the regional delegation focused on updating appropriate regional procedures, guidelines and strategies to better manage the regional delegation in line with the change process and its implications for the field. The organizational structures and the implementation of the Change strategy documents have been completed, and several internal policies and procedures have been reviewed and updated, among them a revision of the delegation's security regulations. The monthly management reporting cycle has been introduced, and staff meetings held monthly.

Following an internal review of financial and administrative procedures, an international recruitment of a finance and administration delegate for a defined period to assist in re-organizing administrative and financial services was completed, and a delegate is expected in place start 2005.

**Expected result 2: The overhead costs remain below 10% and are recovered through different sources of income.**

The 2004 annual appeal budget includes for the first time a specific programme budget for administration expenditures allowing an on-going monitoring of overheads versus program expenditures. The recharge structure is to be reviewed during first quarter 2005 to allow an increased transparency and equity in programme contribution towards core expenditures of the region. The process will be further requested following the 10% decrease in available core cost budget allocation for the field.

**Expected result 3: High quality national and international members of staff have been recruited; mechanisms to maintain standards of performance are in place.**

The recruitment of key positions following a high turnover of regional delegates (head of regional delegation, head of East-Africa sub-region, head of Horn of Africa sub-region, head of Sudan delegation, head of Somali delegation, Federation representative in Eritrea, regional programme coordinator and regional health and care coordinator) was planned to have been completed by the end of August. However, unexpected developments delayed the processes into November by which a new head of the Horn of Africa sub-region was appointed. The position of head of East-Africa sub-region, advertised in August, still remains unfilled but a temporary placement has been done until a permanent recruitment is made. The recruitment for the position as head of Indian Ocean sub-regional office was due to financial constraints delayed to early 2005.

**Expected result 4: Partner national societies are rendered support services at a competitive level.**

Services on a cost recovery basis to both partner and operating national societies are increasing. Service agreements have been signed with the majority of partners present at regional level. However, a review of the costing structure is foreseen for 2005, as full cost recovery for services provided is not absolute and the price structure will have to be re-visited,

**Impact**

The regional delegation's organizational structure has been adjusted to better meet expectations from partners, staff and stakeholders at large. Budgetary constraints have led the delegation towards a review of financial and administrative procedures to increase cost effectiveness and to reduce the level of re-charging to programme budgets. The level of international and national staffing is under constant monitoring as a reflection of the ever changing environment.

**Constraints**

The decreased allocation of the core budget for Secretariat field level is difficult to manage at a time where more responsibilities and authority are transferred from the Secretariat headquarters to the field level.

**Hyperlinks to the Federation web page for each country.**

<b>National Society</b>	<b>Country page hyperlink</b>
Burundi Red Cross	<a href="http://www.ifrc.org/where/country/check.asp?countryid=39">http://www.ifrc.org/where/country/check.asp?countryid=39</a>
Red Crescent of Djibouti	<a href="http://www.ifrc.org/where/country/check.asp?countryid=57">http://www.ifrc.org/where/country/check.asp?countryid=57</a>
Red Cross Society of Eritrea	<a href="http://www.ifrc.org/where/country/check.asp?countryid=188">http://www.ifrc.org/where/country/check.asp?countryid=188</a>
Ethiopian Red Cross Society	<a href="http://www.ifrc.org/where/country/check.asp?countryid=65">http://www.ifrc.org/where/country/check.asp?countryid=65</a>
Somali Red Crescent	<a href="http://www.ifrc.org/where/country/check.asp?countryid=157">http://www.ifrc.org/where/country/check.asp?countryid=157</a>
Sudanese Red Crescent	<a href="http://www.ifrc.org/where/country/check.asp?countryid=161">http://www.ifrc.org/where/country/check.asp?countryid=161</a>
Tanzania Red Cross National Society	<a href="http://www.ifrc.org/where/country/check.asp?countryid=189">http://www.ifrc.org/where/country/check.asp?countryid=189</a>
East Africa sub-region	
- Kenya Red Cross Society	<a href="http://www.ifrc.org/where/country/check.asp?countryid=93">http://www.ifrc.org/where/country/check.asp?countryid=93</a>
- Rwandan Red Cross	<a href="http://www.ifrc.org/where/country/check.asp?countryid=143">http://www.ifrc.org/where/country/check.asp?countryid=143</a>
- Uganda Red Cross Society	<a href="http://www.ifrc.org/where/country/check.asp?countryid=176">http://www.ifrc.org/where/country/check.asp?countryid=176</a>
Indian Ocean sub-region	
- Comoros Red Crescent	<a href="http://www.ifrc.org/where/country/check.asp?countryid=186">http://www.ifrc.org/where/country/check.asp?countryid=186</a>
- Malagasy Red Cross Society	<a href="http://www.ifrc.org/where/country/check.asp?countryid=109">http://www.ifrc.org/where/country/check.asp?countryid=109</a>
- Mauritius Red Cross Society	<a href="http://www.ifrc.org/where/country/check.asp?countryid=115">http://www.ifrc.org/where/country/check.asp?countryid=115</a>
- Seychelles Red Cross Society	<a href="http://www.ifrc.org/where/country/check.asp?countryid=151">http://www.ifrc.org/where/country/check.asp?countryid=151</a>

## East Africa regional programmes; Annual Appeal no. 01.10/2004; Annual Report

### Notes specific to financial transactions

- CHF 121,000 of income was reallocated from various health and care projects within the 2003 annual appeal to a single health project within the 2004 annual appeal.
- CHF 43,000 of income was reallocated from the following global programmes:
  - polio/measles: CHF 10,000 (American Red Cross)
  - malaria: CHF 33,000 (private sector donor).
- CHF 3,821 income was realized under health and care from a PHAST training consultancy.
- CHF 1,968 income was realized under health and care from the sale of stock and from bid fees.
- CHF 2,533 income was realized under disaster management as administrative fees for procurement.
- CHF 5,477 income was realized under coordination from the sale of assets.
- CHF 193,000 closing balance under health and care is partly explained by the fourth-quarter receipt of CHF 235,000 of income.
- CHF 64,000 closing balance under disaster management is partly explained by the fourth-quarter receipt of CHF 90,000 of income.
- CHF 101,000 closing balance under organizational development is partly explained by the charging of expenditures directly to affected country project budgets.
- CHF 114,000 overall closing balance under this Appeal is partly explained by reduced expenditure rates.

[Final financial report below; click here to return to title page and contact information.](#)

**International Federation of Red Cross and Red Crescent Societies**

01.10/2004 EAST AFRICA REGIONAL PROG

Selected Parameters	
Year/Period	2004/1-2004/12
Appeal	M04AA010
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
Budget (A)	1'198'992	669'751	416'635	298'100	829'261	3'412'740
Opening Balance (B)	172'496	0	7'603	28'632	77'278	286'010
<b>Income</b>						
Cash contributions						
American Red Cross	12'613				7'584	20'197
British Red Cross	54'952	189'370	11'608	60'040	104'470	420'439
Djibouti Red Crescent Society					1'000	1'000
Ethiopian Red Cross Society					1'000	1'000
Finnish Red Cross	736		3'115	736	5'817	10'403
French Government	52'338					52'338
German Red Cross					7'647	7'647
ICRC			3'133			3'133
Irish Red Cross Society				4'836		4'836
Kenyan Red Cross Society					997	997
Madagascar Red Cross Society					592	592
Mauritius Red Cross Society					1'045	1'045
Netherlands Red Cross	32'374	48'560			14'748	95'682
Norwegian Red Cross	103'213			76'288	7'096	186'596
Other					0	0
Rwandan Red Cross					2'000	2'000
Seychelles Red Cross Society					959	959
Sudanese Red Crescent					2'000	2'000
Swedish Government			8'632			8'632
Swedish Red Cross	238'350	74'910	111'731	51'075	10'215	486'281
Uganda Red Cross Society					1'000	1'000
Cash contributions (C1)	494'575	312'841	138'219	192'974	168'170	1'306'778
Reallocations (within appeal or from/to another appeal)						
American Red Cross	10'000					10'000
British Red Cross	1'146					1'146
Danish Red Cross		1'432				1'432
mIRC	33'000					33'000
Swedish Government	29'213					29'213
Unilever	90'535					90'535
Reallocations (C2)	163'894	1'432				165'326
Inkind Personnel						
British Red Cross		74'400				74'400
Finnish Red Cross					37'200	37'200
Irish Red Cross Society				74'400		74'400
Netherlands Red Cross					49'600	49'600
Norwegian Red Cross					32'033	32'033
Swedish Red Cross			74'400			74'400
Inkind Personnel (C4)		74'400	74'400	74'400	118'833	342'033
Other Income						
Miscellaneous Income	5'789	2'533			5'477	13'799
Other Income (C5)	5'789	2'533			5'477	13'799
Total Income (C) = SUM(C1..C5)	664'258	391'206	212'619	267'374	292'481	1'827'937
Total Funding (B + C)	836'754	391'206	220'222	296'006	369'758	2'113'946

Selected Parameters	
Year/Period	2004/1-2004/12
Appeal	M04AA010
Budget	APPEAL

All figures are in Swiss Francs (CHF)

## II. Balance of Funds

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
Opening Balance (B)	172'496	0	7'603	28'632	77'278	286'010
Income (C)	664'258	391'206	212'619	267'374	292'481	1'827'937
Expenditure (D)	-643'696	-327'318	-198'613	-195'040	-255'793	-1'620'460
Closing Balance (B + C + D)	193'058	63'888	21'609	100'967	113'965	493'486

International Federation of Red Cross and Red Crescent Societies

01.10/2004 EAST AFRICA REGIONAL PROG

Selected Parameters	
Year/Period	2004/1-2004/12
Appeal	M04AA010
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	
<b>BUDGET (C)</b>		1'198'992	669'751	416'635	298'100	829'261	3'412'740	
<b>Supplies</b>								
Water & Sanitation	3'000		-396				-396	3'396
Medical & First Aid		15					15	-15
Teaching Materials	5'000							5'000
<b>Total Supplies</b>	<b>8'000</b>	<b>15</b>	<b>-396</b>				<b>-381</b>	<b>8'381</b>
<b>Capital Expenditure</b>								
Computers & Telecom	40'648	1'826				16'090	17'915	22'733
Others Machinery & Equipment		6'181	1'640	2'157	1'964	-15'222	-3'280	3'280
<b>Total Capital Expenditure</b>	<b>40'648</b>	<b>8'006</b>	<b>1'640</b>	<b>2'157</b>	<b>1'964</b>	<b>868</b>	<b>14'635</b>	<b>26'013</b>
<b>Transport &amp; Storage</b>								
Storage	8'000	3'012	1'098	10		47	4'167	3'833
Distribution & Monitoring		158	3'348				3'506	-3'506
Transport & Vehicle Costs	115'512	29'541	12'456	10'433	9'209	14'257	75'896	39'616
<b>Total Transport &amp; Storage</b>	<b>123'512</b>	<b>32'711</b>	<b>16'901</b>	<b>10'443</b>	<b>9'209</b>	<b>14'304</b>	<b>83'569</b>	<b>39'943</b>
<b>Personnel Expenditures</b>								
Delegates Payroll	955'320	82'035			829		82'864	872'456
Delegate Benefits		83'849	73'036	107'428	92'648	112'109	469'070	-469'070
Regionally Deployed Staff	725'015							725'015
National & National Society Staff		149'562	65'901	18'244	58'726	11'641	304'075	-304'075
Consultants	32'375	2'422				4'740	7'162	25'213
<b>Total Personnel Expenditures</b>	<b>1'712'710</b>	<b>317'867</b>	<b>138'937</b>	<b>125'672</b>	<b>152'203</b>	<b>128'491</b>	<b>863'170</b>	<b>849'540</b>
<b>Workshops &amp; Training</b>								
Workshops & Training	543'580	80'589	71'832	2'633	470	65'026	220'550	323'030
<b>Total Workshops &amp; Training</b>	<b>543'580</b>	<b>80'589</b>	<b>71'832</b>	<b>2'633</b>	<b>470</b>	<b>65'026</b>	<b>220'550</b>	<b>323'030</b>
<b>General Expenditure</b>								
Travel	170'799	32'673	9'690	7'676	2'658	9'872	62'570	108'229
Information & Public Relation	199'170	54'041	22'512	17'580	8'807	8'734	111'674	87'496
Office Costs	392'493	5'887	2'238	1'508	1'422	175'636	186'690	205'803
Communications		6'512	10'573	2'368	2'623	78'208	100'285	-100'285
Professional Fees				285		12'812	13'098	-13'098
Financial Charges		3'496	1'816	973	740	11'777	18'803	-18'803
Other General Expenses		42'558	30'613	14'722	12'499	-266'061	-165'668	165'668
<b>Total General Expenditure</b>	<b>762'461</b>	<b>145'168</b>	<b>77'442</b>	<b>45'113</b>	<b>28'749</b>	<b>30'980</b>	<b>327'451</b>	<b>435'010</b>
<b>Federation Contributions &amp; Transfers</b>								
Cash Transfers National Societies		17'500			5'883		23'383	-23'383
<b>Total Federation Contributions &amp; Transfers</b>		<b>17'500</b>			<b>5'883</b>		<b>23'383</b>	<b>-23'383</b>
<b>Program Support</b>								
Program Support	221'828	41'840	20'961	12'596	12'363	16'124	103'885	117'943
<b>Total Program Support</b>	<b>221'828</b>	<b>41'840</b>	<b>20'961</b>	<b>12'596</b>	<b>12'363</b>	<b>16'124</b>	<b>103'885</b>	<b>117'943</b>
<b>Operational Provisions</b>								
Operational Provisions					-15'802		-15'802	15'802
<b>Total Operational Provisions</b>					<b>-15'802</b>		<b>-15'802</b>	<b>15'802</b>
<b>TOTAL EXPENDITURE (D)</b>	<b>3'412'740</b>	<b>643'696</b>	<b>327'318</b>	<b>198'613</b>	<b>195'040</b>	<b>255'793</b>	<b>1'620'460</b>	<b>1'792'279</b>
<b>VARIANCE (C - D)</b>		<b>555'296</b>	<b>342'433</b>	<b>218'022</b>	<b>103'060</b>	<b>573'468</b>	<b>1'792'279</b>	