

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

ANGOLA

30 April 2005

In Brief

Appeal No.: 01.11/2004 – http://www.ifrc.org/cgi/pdf_appeals.pl?annual04/011104.pdf

Appeal target: CHF 2,766,153 (USD 2,077,471 or EUR 1,780,594)

Appeal coverage: 18.6% ([Click here to access the final financial report](#))

Appeal 2005: Angola no. 05AA008 – http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/05AA008.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

Angola is recovering from a devastating civil war that began shortly before the nation achieved independence from Portugal in 1975. Angola's civil war ravaged all sectors of the country's economy, destroyed much of its infrastructure, and displaced an estimated four million people. Despite the new agreement, as the year 2004 began, the crucial disarmament and demobilization provisions of the agreement had not yet been fully implemented. National reconciliation and consolidation of peace are now moving the country towards stability and development. The country is currently faced with a huge challenge of reviving its socio-economic structures. With the dilapidated state of its infrastructure, it will certainly take a long period for the country to recover economically. The situation is still precarious for an estimated 1.2 million people living in remote areas and more than two million are in dire need of assistance. The food and health situation of large sections of Angolan population is catastrophic, less than 50% has access to basic health services; only 38% have access to clean drinking water.

The Angola Red Cross¹ strengthens relationship and coordination with Red Cross and Red Crescent partners in Angola through meetings and project visits. The national society established collaboration with other partners - the Angola Ministry of Health (MINSa), WHO, UNICEF, UNHCR, and Rotary International - focusing on health and care, HIV and AIDS, water and sanitation and other community-based activities.

¹ Angola Red Cross – <http://www.ifrc.org/where/country/check.asp?countryid=18>

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The community-based health programme made significant progress in Kwanza Sul, Kwanza Norte and Benguela through establishing strategic partnerships with national and international agencies. The project assisted approximately 230,997 families and trained 171 community health facilitators. The HIV and AIDS project activities reached 174,300 beneficiaries through HIV and AIDS prevention and anti stigma and discrimination campaigns.

Angola Red Cross community-based mine awareness and education programme had more than 40 volunteers that conducted mine awareness and education activities in 2004. At the end of the year the national society trained 15 provincial disaster management coordinator and two members of the ecological Angola group in disaster preparedness and response.

Health and care

Goal: Sustainable improvement in the general health conditions of vulnerable communities, through the provision of combined community-based health care, safe water/sanitation/hygiene education and HIV and AIDS activities whilst, at the same time, building upon and expanding Angola Red Cross society capacity and volunteer system in the entire country.

Objective: Provision of basic health care by Angola Red Cross, including community-based health activities, HIV and AIDS, water and sanitation programme in targeted communities, is improved and thus contributes to the mitigation of priority health problems.

Health and Care: Community-Based Health and Care

Progress/Achievements

The health awareness in the targeted vulnerable communities in ten provinces and communities surrounding the Angola Red Cross health post is increased.

The community-based health and care programme, which aims to improve the health of mothers and children through effective and sustainable volunteers' interventions, was implemented in all the provinces with Angola Red Cross health post. The health posts provide basic assistance to a small community through mainly health education. Approximately 1,373,564 people benefited from the community-based health and care programme through improved service delivery at health post, supply of essential drugs for common diseases, and access to health education. Of these,

- 120,467 benefited from First Aid and treatment of the common diseases,
- 261,356 reached with health education,
- 168,131 through home visits, water and sanitation activities,
- 776,539 benefited from vaccination routine and campaign programme,
- 20,539 children under five years benefited from child care treatments,
- 8,532 women received prenatal assistance care, and
- 18,000 people benefited from malaria prevention activities.

A total of 6,000 pamphlets covering health topics such as malaria and ITN use were distributed, with USAID support; they contributed to improvement of public awareness of health issues.

The rehabilitation of health post in Gabela, Assango and Conde in Kwanza Sul province was finished. Through this cooperation agreement between Save the Children/US, Management Sciences for Health and Angola Red Cross, the quality of the services delivery have improved and the health post are fully functional with basic equipment and technical support.

With funds received from American Red Cross, Danish Red Cross, Norwegian Red Cross, Swedish Red Cross, and Exxon Mobil through the Federation, an integrated health programme was implemented in Kwanza Sul

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province. Also funded were the malaria prevention activities in Benguela and Kwanza Norte. In three provinces, 171 community volunteers were trained on ARCHI health activities.

200 traditional midwives have received refresher training and have received First Aid kits supplies in ten provinces.

A total of 200 traditional midwives were identified and trained in collaboration with MINSA and local municipality in Kwanza Sul, Benguela and Kwanza Norte province. Consequently, 75 traditional midwives from Kwanza Norte and Kwanza Sul province were trained and received birth kits to assist with deliveries during the first six month of 2004. Another 125 traditional midwives from Benguela provinces were trained during the second period of 2004. Angola Red Cross with support of MINSA is responsible for monitoring and supervising the work of the trained traditional midwives through the health post.

100 volunteers and 300 caregivers and mothers are trained on proper feeding of children.

A total of 100 volunteers and 300 mothers were trained in supplementary feeding supported by the ministry of health in Kwanza Norte, Kwanza Sul, Benguela, Huambo and Bie. In each province, 20 volunteers and 60 mothers from the community have been mobilized to support child care activities at the health post.

50,000 households in targeted communities in ten provinces received information about general health education and common disease control activities.

Angola Red Cross deployed more than 186 volunteers that conducted 31,106 households visit in ten provinces. The volunteers counselled approximately 156,606 beneficiaries on health education, control of communicable diseases and provision of community first aid. Throughout the year, 159 communities received information on access to safe water, malaria and HIV and AIDS prevention, and approximately 15,998 condoms were distributed.

Angola Red Cross is an active member of the Interagency Coordination Committee (ICC) and related coordination bodies.

Angola Red Cross participated in all the ICC for national vaccination programme activities. The national society is a partner in social mobilization during routine and campaign vaccination activities. Through the health post and social mobilization activities, Angola Red Cross 186 staff and volunteers contributed to the vaccination of more than 776,539 children under five years.

50,000 families in ten provinces reached with community malaria prevention activities.

Malaria prevention activities in Kwanza Norte, Kwanza Sul and Benguela provinces provided 17,500 insecticide treated nets (ITN) procured with the Exxon Mobile funds. A total of 100 volunteers were trained in Kwanza Sul, Kwanza Norte and Benguela in malaria social mobilization and prevention activities. A total of 14,182 children under five years and 3,558 pregnant women benefited from the malaria prevention activities. In 2004 the national society mobilised 159 communities on malaria intervention activities in collaboration with local authority, church and community representative and traditional healers. The social mobilisation included conducting community sensitisation activities on malaria prevention, basic sanitation, malaria prevention and the correct use of ITN.

Impact

The interventions are conducted on the community-based approach in which the communities defined the needs. In case of Kwanza Sul health project, communities have increased the knowledge on communicable diseases control and are active participants, taking ownership of the project. The activities carried out by volunteers during home visits and the health education sessions were positively received by communities. The Angola Red Cross community-based health activities have enhanced visibility of the Red Cross at community level and have been able to re-establish contact with a wider local population.

Constraints

Due to a deficit during 2003 from the delegation running costs which created delays in transfer of funds, programme implementation was derailed. The progress in transferring of cash was derailed because of various revision of the budget. The implementation of planned activities in other provinces was hindered by shortfall in funding. Monitoring visits and communication with all provinces was affected by accessibility and transport. The areas are inaccessible due to that most roads are not clear from landmines.

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In malaria prevention programme some communities expressed difficulties and some dissatisfaction because the project had no provision for distribution of ITN for volunteers, children over five years, non pregnant women and men. The volunteers experienced difficulties in carrying out their duties due to lack of plastic sheets and rubber boots for use during house to house visits for community education activities and mosquito nets distribution during the rainy season.

Health and Care: HIV/AIDS

Progress/Achievements

Angola Red Cross continued to work in already established HIV and AIDS prevention projects in 12 provinces – seven provinces supported by the Federation (Cabinda, Cuando Cubango, Kwanza Sul, Kwanza Norte, Moxico, Uige and Zaire) and five by the French and Spanish Red Cross Societies (Luanda, Bengo, Benguela, Bié and Huambo). The project has 231 peer educators in total an increase of 131 peer educators trained in 2004. The number of coaches has also increased to 42 making supervision of peer educators much more effective. The operation included the distribution of 257,723 male condoms and the circulation of IEC (information, education and communication) materials (421,100 leaflets, 2,500 posters, five video cassettes, and 20 wooden penis models). The monitoring system of the prevention programme is very effective and this is being replicated in other countries such as Mozambique. The main priority for Angola Red Cross HIV/AIDS programme in 2004 was to scale up the activity level in order to keep abreast with the gradual increase in the rate of infection.

The national society has reached a total of 173,300 people living with HIV and AIDS (PLHIV)² with prevention messages in Kwanza Norte, Cabinda, Moxico, Uige and Zaire province. There is a reported increased use of condoms in the areas where peer educators are active. Commercial sex workers in one of the projects have reported that they are using condoms every time they have sex. The National society has distributed 3,257,723 condoms in schools, communities, to uniformed staff and to commercial sex workers. In total, 421,100 leaflets produce by MINSA, 2,500 posters, and five videocassettes were distributed. Information, education and communication (IEC) material were also distributed at ten sentinel condoms distribution post for free distributed and orientation in correct used of them.

A project was established in Moxico province to educate returnees from Democratic Republic of Congo, Zambia and Namibia on HIV and AIDS. The project has been strengthened in collaboration with GOAL and the local WHO office. A memorandum of understanding has been signed between the Angola network for PLHIV (Luta Pela Vida) and the national society. The partnership between the two organizations will go a long way in addressing stigma and discrimination in the communities.

The national society is preparing to launch the first home-based care (HBC) project in 2005. The project will take place in the province of Cabinda, which has the highest HIV and AIDS prevalence in the country. Angola Red Cross is also currently implementing prevention projects in Cabinda. The national society will work together with the network of PLHIV, Mozambique Red Cross Society and the regional delegation to establish the project.

During the World Red Cross Day and World AIDS Day/2004 awareness activities such as marches, cultural and social activities were organized in all the five provinces under the anti-stigma campaign related to HIV and AIDS. In Luanda City, Angola Red Cross exhibited Red Cross initiatives through drama activities and distributed IEC.

Impact

In the areas where the scaling up of activities is being carried out there is an active involvement of the local government authority, community leaders and women associations. The PLHIV association in collaboration with the Angola Red Cross HIV and AIDS programme have identified 200 PLHIV and 200 orphans and other vulnerable children (OVC) to form the first HBC and OVC programme in 2005. A memorandum of understanding was signed between the national society and WFP at the field level for support the HBC and OVC programme in the provinces Angola Red Cross has the HIV and AIDS activities. The anti-stigma and

² PLHIV, also referred to as PLWHA.

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discrimination activities contributed to a better acceptance of PLHIV among the volunteers and there is a greater involvement and willingness of working and involvement in HIV and AIDS activities.

Constraints

Reporting is still a challenge as there are difficulties in communication with communication system hence there is slow response in terms of sending narrative and financial reports to the headquarters from the branches. The HIV and AIDS department still require more financial resources to enhance financial and narrative reporting. There is inadequate transport facility in headquarter for regular visits to the province, lack of plane transportation and no possibility to go by road in most of the provinces for security reasons. There is a need to strengthen human resources capacity in order to effectively implement the planned HIV and AIDS project especially that the national society is going to establish HBC and OVC projects.

Health and Care: Water and Sanitation

Progress/Achievements

The Angola Red Cross capacity in the provision of sustainable water and sanitation services is increased

Angola Red Cross in collaboration with Save the Children and Management Sciences for Health Support, implemented water and sanitation activities and hygiene promotion in the Kwanza Sul integrated health and care programme. Through this strategic agreement, Angola Red Cross installed three water pumps in vulnerable community surrounding the health post to benefit more than 3,200 people.

100 volunteers in three provinces are trained and mobilized in PHAST³ activities.

At least 40 volunteers were trained on hygiene promotion and all of them received introduction in community water and sanitation activities, submersible pump operation and PHAST methodology. After the training the volunteer conducted 11,533 household visits to promote use of safe water and latrines, and hygiene promotion.

Impact

During the households visits the beneficiaries acknowledged the importance of the programme in improving their living conditions by contributing to behavioural changes in respect to use of latrines and safe water. This has assisted in the control of communicable diseases.

Constraints

The water and sanitation programme was hindered by lack of financial resources, which made it difficult to implement and follow up the activities.

Disaster Management

Goal: The Angola Red Cross community-based mine awareness and education programme is strengthened through the development of integrated disaster mitigation, preparedness and response strategies, structure, systems, plan and activities according to the role defined for it by the government.

Objective: A sustainable improvement in the capacity of Angola Red Cross community-based mine awareness and education programme in seven provinces and the strengthening of the national society's capacity in order to respond to any disaster.

Progress/Achievements

The disaster management programme focused on mine awareness campaigns for municipalities of Bie and Benguela provinces. In these provinces, 40 volunteers conducted landmines awareness campaigns at community level and 29,898 vulnerable people in 400 communities in the eight municipalities were reached. Community sensitisation was done through drama, songs, poetry, role plays and dissemination of IEC material supported by

³ PHAST – Participatory hygiene and sanitation transformation

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the ICRC. During the sessions the volunteers received information about 20 unexploded ordinances (UXO) in the area from the local population, which transmitted to the local authorities and organizations for de-mining action. As part of capacity building of the national society, 15 provincial disaster coordinators and two members of Angola ecological group received customised basic disaster management training in December 2004.

Impact

The mine awareness programme has strengthened the community response capacity, hence minimising the incidences of mine accidents to the vulnerable communities and their children. The basic disaster management training has increased strengthened the capacity in disaster risk reduction at the national society.

Constraints

Lack of funding for disaster management interventions has prevented the national society to significantly build capacity in this core area.

Organizational Development

Goal: The Angola Red Cross meets the characteristics of a well-functioning national society and is recognised and respected as a key national actor in the humanitarian sector in Angola, first and foremost by the Angolan people themselves and by the government of Angola, but also by other, national and international humanitarian agencies.

Objective: The governance and management capacities to the Angola Red Cross at both headquarters and provincial branch levels strengthened, so as to meet the new emerging development needs and to actively support the government efforts in reconstructing the post-war in Angola.

Progress/Achievement

The Angola Red Cross has established an appropriate and affordable organization and structure

The Federation assisted the national society to conduct an organizational development assessment in May 2004, to allow for implementation of a change process. The mission focused on the organizational development process and the implementation of the 2002-2004 plan of action. From the assessment it was recommended;

- To conduct provincial assemblies;
- To hold a general assembly;
- Restructuring of the finance department and produce finance report for 2000-2003;
- To conduct an external audit of the financial and narrative report of 2000-2003 to be presented at the general assembly.

The last five months of 2004 were important for the Angola Red Cross where the national executive council (NEC) took strides in changing the structure and operations of the national society. A total of 18 provincial assemblies were held between June and December 2004 and new provincial board members elected. The election process was overseen by the election provincial commission, which was made up of representatives from the Federation in Angola, ICRC, and president of Luanda province branch and member of the NEC. It was carried out according to the procedures laid out in the Angola Red Cross statutes and regulations. In addition, significant progress was made in some provinces with development of the new human resources policy, provision of new vehicle and weekly meeting with volunteers. The national society received USD50,000 worth of donations in kind from a private plane company and the Angola National army's air forces to cover all the logistics and transportation for the electoral commission to move to the provinces and conduct the elections.

Relations between the president of Angola Red Cross and the Federation improved a lot during the last half of 2004. The new finance director was appointed in October; the finance department started preparations to close the 2000-2004 financial years. The next external audit will be in 2005.

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Impact

The result of the review mission of May 2004 has enabled the national society to start its reorganisation and change process which has seen it having elected board members in all the 18 provinces. The elected governance will be responsible for drafting new strategic plan and identifying priority programmes for their branches. The national society also received funding from Swedish Red Cross, Norwegian Red Cross, and the Federation's Capacity Building Fund (CBF).

Constraints

There was some difficulties in implementing the provincial assemblies process due to lack of communication between headquarter and branches. Some of the new elected governance did not yet receive an orientation on humanitarian issues and organization and most of them are coming from outside the Red Cross Movement.

Coordination

Through the Federation, the Danish and Norwegian Red Cross Societies supported community health and care programme activities in the Kwanza Sul province. Exxon Mobil Oil through the American Red Cross contributing towards the malaria prevention programme. Other local organizations such as Save the Children and Management Sciences of Health, UNICEF, WHO and USAID supported Angola Red Cross health posts in improving health and care delivery service.

The national society continues to enjoy good relationships with the USAID and UNICEF, which supply condoms and IEC materials such as posters and leaflets for prevention activities. Angola Red Cross is well recognized by government and other partners as an active player in addressing the impact of HIV and AIDS mainly because of the implementation of the health and care activities. The national society also participates actively in the Country Coordinating Mechanism (CCM), which is responsible for Global Funds at national level. Angola Red Cross is working together with Angola Network of AIDS Service Organization (ANASO).

The head of Angola delegation finished his mission early in 2004 and since March the health delegate represented the Federation in Angola and maintained contact with the regional delegation in Harare. There was a regular tripartite coordination meeting between Angola Red Cross, ICRC and Federation to provided feedback and advice to the national society on the change process. The ICRC and Federation provided complementary support to the national society during provincial assemblies. The regional delegation supported the country delegation with support in programme management, technical support and coordination.

Southern Africa Partnership for Red Cross Societies (SAPRCS) forum remained the central regional coordinating body where learning and knowledge sharing take place. The Angola Red Cross participated twice at the forum in 2004.

Impact

Through the support from the regional delegation to revive the national society, Angola Red Cross has gained a huge potential of partnerships.

Constraint

Following the regional delegation support visits, it is highly recommended that the national society strengthens human resources capacity. In the past integrity, general management weaknesses and coordination issues have affected the reputation of the national society thereby eroding trust and confidence from partners. However, great strides towards reviving the national society were taken in 2004 which were marked by the successful provincial assemblies and election of members.

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

Selected Parameters	
Year/Period	2004/1-2004/12
Appeal	M04AA011
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)	1'310'163	100'112		943'487	412'390	2'766'153
Opening Balance (B)	182'913	0		33'792	-80'752	135'953
Income						
Cash contributions						
American Red Cross	127'242					127'242
Capacity Building Fund				25'000		25'000
Danish Red Cross	67'637					67'637
Norwegian Red Cross	37'470	10'145		22'042		69'657
Swedish Red Cross	38'025			54'698	12'675	105'398
Cash contributions (C1)	270'374	10'145		101'740	12'675	394'934
Reallocations (within appeal or from/to another appeal)						
American Red Cross	0			0		0
Danish Red Cross	0					0
Great Britain - Private Donors					10'740	10'740
Irish Government	50'000					50'000
Netherlands Government	64'917					64'917
Norwegian Red Cross				0		0
On Line donations					58'461	58'461
PRM	0					0
Unilever	24'958					24'958
United States - Private Donors					21'430	21'430
Reallocations (C2)	139'875			0	90'631	230'506
Inkind Personnel						
Danish Red Cross	17'980					17'980
Inkind Personnel (C4)	17'980					17'980
Other Income						
Deficit Write-off					100'505	100'505
Miscellaneous Income	5'417			3'229	1'273	9'919
Other Income (C5)	5'417			3'229	101'778	110'425
Total Income (C) = SUM(C1..C5)	433'646	10'145		104'969	205'085	753'845
Total Funding (B + C)	616'559	10'145		138'761	124'332	889'798

II. Balance of Funds

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
Opening Balance (B)	182'913	0		33'792	-80'752	135'953
Income (C)	433'646	10'145		104'969	205'085	753'845
Expenditure (D)	-609'021	-11'186		-122'805	-124'332	-867'345
Closing Balance (B + C + D)	7'538	-1'041		15'957	0	22'453

Selected Parameters	
Year/Period	2004/1-2004/12
Appeal	M04AA011
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance A - B
		Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation		
A		B					A - B	
BUDGET (C)		1'310'163	100'112		943'487	412'390	2'766'153	
Supplies								
Construction		21'543					21'543	-21'543
Clothing & textiles	18'000	101'820					101'820	-83'820
Water & Sanitation	31'650							31'650
Medical & First Aid	57'000	9'263					9'263	47'737
Teaching Materials	52'947	15'998					15'998	36'949
Total Supplies	159'597	148'624					148'624	10'973
Capital Expenditure								
Vehicles	45'375							45'375
Computers & Telecom	30'350							30'350
Total Capital Expenditure	75'725							75'725
Transport & Storage								
Storage		3'654					3'654	-3'654
Distribution & Monitoring		5'043					5'043	-5'043
Transport & Vehicle Costs	103'898	26'088	23		6'591	1'140	33'843	70'055
Total Transport & Storage	103'898	34'785	23		6'591	1'140	42'540	61'358
Personnel Expenditures								
Delegates Payroll	781'550	56'415				49'066	105'481	676'069
Delegate Benefits		54'745			7'463	57'902	120'110	-120'110
Regionally Deployed Staff	555'948							555'948
National & National Society Staff		175'666			27'528		203'194	-203'194
Consultants					9'663		9'663	-9'663
Total Personnel Expenditures	1'337'498	286'826			44'654	106'968	438'448	899'050
Workshops & Training								
Workshops & Training	316'900	22'071	7'233		32'502		61'806	255'094
Total Workshops & Training	316'900	22'071	7'233		32'502		61'806	255'094
General Expenditure								
Travel	163'370	12'453	2'846		3'776	8'035	27'110	136'260
Information & Public Relation	170'598	5'543			2'157		7'700	162'898
Office Costs	258'767	17'122	147		3'222		20'491	238'276
Communications		15'587	160		2'250	108	18'105	-18'105
Professional Fees		13'984			10'030		24'014	-24'014
Financial Charges		5'063	51		9'528		14'641	-14'641
Other General Expenses		-26					-26	26
Total General Expenditure	592'735	69'726	3'203		30'962	8'143	112'035	480'700
Program Support								
Program Support	179'800	39'510	727		7'982	8'082	56'301	123'499
Total Program Support	179'800	39'510	727		7'982	8'082	56'301	123'499
Operational Provisions								
Operational Provisions		7'479			113		7'591	-7'591
Total Operational Provisions		7'479			113		7'591	-7'591
								0
Total								0
TOTAL EXPENDITURE (D)	2'766'153	609'021	11'186		122'805	124'332	867'345	1'898'808
VARIANCE (C - D)		701'142	88'926		820'683	288'058	1'898'808	