

Programme Update 2007



International Federation
of Red Cross and Red Crescent Societies

Southern Africa Regional HIV and AIDS Programme

Appeal No. MAA63003

Programme Update No. 1

This report covers the period of 01/11/2006 to 30/06/2007.

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



Through the regional HIV and AIDS programme, up to 460,000 orphans and vulnerable children (OVC) will be provided with a holistic package of educational, nutritional and psycho-social support. In the above photo, Zambia Red Cross Society provides educational material support to some OVC.

In brief

Programme Summary: Following the Federation Operational Zone for Southern Africa's launch of a new, innovative and dynamic five-year regional HIV and AIDS programme (2006-2010) in November 2006, the ten Southern Africa National Societies¹ have been focusing on consolidating programming and building capacities in preparation for scaling up. The regional HIV and AIDS programme aims to quadruple the target population by the year 2010. A total of 50 million people will be reached with prevention messages and peer education activities, 250,000 people will benefit from an expanded prevention, care, treatment and support programme and 460,000 orphans and vulnerable children (OVC) will be provided with a holistic package of educational, nutritional and psycho-social support.

The Operational Zone for Southern Africa took the lead in operationalizing the Federation's HIV and AIDS Global Alliance and is on the way to becoming a Centre of Excellence in HIV and AIDS programming. An innovative integrated regional approach has been adopted, working closely with partner organizations to avoid duplication, ensuring all needs are covered, whilst capitalizing on regional knowledge and expertise. The initiatives include the development of a prevention of mother-to-child transmission (PMTCT) campaign in partnership with the United Nations Children's Fund (UNICEF), taking the lead in rolling out a comprehensive training package on prevention, care, treatment and support for community-based volunteers, scaling up advocacy work in conjunction with the World Health Organization (WHO)/African Regional Office (AFRO) and the Southern AIDS Information and Dissemination Network (SAFAIDS), and with the United Nation's Integrated Regional Information Network (IRIN), whilst also developing a planning, monitoring, evaluation and reporting (PMER) system.

¹ Angola, Botswana, Lesotho, Malawi, Mozambique, Namibia, South Africa, Swaziland, Zambia and Zimbabwe.

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During the reporting period, the Southern Africa National Societies scaled-up support to OVC following an injection of EUR 5 million donated by the Royal Netherlands Embassy (RNE). The donation complemented support for the ongoing holistic OVC development work, funded primarily through the Swedish Red Cross and other Partner National Societies (PNS). The RNE funding also supported the expansion of prevention, care, treatment and support, and refining of the PMTCT Strategy.

Needs: The budget for the 2006/2007 period of the 5-year programme is CHF 81,734,086 (USD 69,798,536 or EUR 49,237,401). To date, only CHF 10,434,150 (USD 8,910,461 or EUR 6,285,633) of the total amount appealed has been received. [<Click here to go directly to the attached financial report>](#)

Whilst the injection of an additional EUR 5 million ensured continuous implementation of projects in the first quarter of 2007 (January to March), in the second quarter the HIV and AIDS programme suffered huge funding deficit, resulting in many projects almost coming to a halt. This scenario directly and negatively impacted on the lives of vulnerable people because food packs for clients were not distributed, OVC's school fees were not paid, home-based care (HBC) volunteers were not given their allowance, and essential medical kits for clients were not refilled, making their already challenging situation even harder.

Negotiations with the former HIV and AIDS Consortium partners, the Royal Netherlands Embassy (RNE)² and the Swedish International Development Agency (SIDA) have been taking place and CHF 5 million in soft pledges agreed for the HIV and AIDS programme for 2007. If this donation materializes, the funding levels will be sufficient for the remaining period of the year. The Operational Zone for Southern Africa has developed marketing tools aimed at fundraising for the programmes; the tools are accessible on the Federation's website.

No. of people we help: A total of 120 HBC projects are now established throughout the region, supporting just under 60,000 clients and nearly 155,000 OVC through 7,538 care facilitators. Nearly 2 million people were reached with prevention messages and some 30 million people through advocacy activities. However, a much higher level of funding will be required in order to scale-up activities in 2008.

Table 1: Summary of support as of June 2007

National Society	HBC projects	HBC clients	Care facilitators	OVC	Support groups	Prevention	Advocacy
Angola	1	84	75	600	-	25,752	83,775
Botswana	-	-	98	2,700	1	40,000	21,800
Lesotho	9	2,787	369	12,000	13	10,947	7,000
Malawi	15	4,500	556	15,000	17	256,642	268,430
Mozambique	21	7,100	550	7,686	20	1,087,522	250,252
Namibia	7	4,620	2443	50,176	135	115,000	70,000
South Africa	20	11,875	1,315	7,200	75	91,944	487,788
Swaziland	12	1327	220	3,183	9	51,414	239,892
Zambia	8	4,447	391	3,190	75	107,075	208,160
Zimbabwe	27	22,985	1,521	52,816	300	105,036	240,000
Total	120	59,725	7,538	154,551	645	1,891,332	1,877,097*

*The United Nation's Integrated Regional Information Network (IRIN) and the Federation engaged in a joint advocacy campaign which is estimated to have reached 28 million people around the world.

Our Partners: The regional HIV and AIDS programmes is implemented in collaboration and/or partnership with community-based, national, government-based and international organizations, UN agencies, developmental agencies, Partner National Societies (PNS) and the International Committee of the Red Cross (ICRC).

² [Click here for a copy of the Final Report](#) submitted for the Royal Netherlands Embassy-supported OVC project, covering the period September 2006 to March 2007.

Progress towards objectives

Outcome 1: Preventing further infection

As outlined in table one above, nearly 2 million people were reached with prevention activities in the last six months. The activities include peer education, production and distribution of information, education and communication (IEC) materials, and establishment of youth centres. Under the RNE-funded OVC projects, the following was achieved:

- 60 youth centres were established, rehabilitated and fully equipped;
- Approximately 60,091 youth were reached through sexual and reproductive health education activities and life skills run from the youth centres;
- 14,363 additional youth and OVC were provided with life skills and sexual and reproductive health information through newly trained youth peer educators;
- Approximately 400,162 youth/adults were reached through community sensitization, sporting events, OVC campaigns and house-to-house visits;
- 415,000 HIV and AIDS related IEC brochures and pamphlets, 7,750 T-shirts/caps and 32,950 calendars/posters were produced and distributed.

Prevention Strategy and Youth Resource Pack: The Regional Prevention Strategy was refined by prevention and youth specialists. The strategy was presented at the Youth Consultative workshop – held in March 2007 – for National Societies on life skills, peer education, sexual and reproductive health, sexually transmitted infections (STIs) and HIV and AIDS. As a result, a Youth Resource Pack, which addresses issues affecting young people, is being developed with the aim of encouraging behaviour change at individual and community levels.

PMTCT and voluntary counselling and testing (VCT): In conjunction with UNICEF, a comprehensive PMTCT multi-media communication campaign was developed, building on the Sara Communication Concept of UNICEF. The campaign will comprise of 13 radio episodes, two 15-minute TV programmes, two one-minute animated TV spots, two types of posters, 35,000 comic books and readers. The campaign was discussed and further conceptualized with the National Societies in June 2007 during the Southern Africa Regional AIDS Network (SARAN) coordination meeting. In July 2007, UNICEF will further develop the campaign during three community level participatory workshops. The RNE funded 40 per cent of this work while UNICEF's Eastern and Southern Africa office funded 20 per cent. The Federation is appealing to the international community to fund the remaining 40 per cent, which will need to be paid in the first quarter of 2008.

Whilst campaign materials were being developed for PMTCT, several National Societies were already focusing on providing services. For example, the Lesotho Red Cross Society distributed IEC materials on PMTCT and VCT to over 3,000 people over the reporting period, while the Baphalali Swaziland Red Cross Society referred 266 people for voluntary counselling and testing (VCT).

Outcome 2: Expanding care, treatment and support

The region has 7,538 care facilitators deployed in 120 active HBC project sites, caring for some 60,000 clients. There are over 645 self support groups for people living with HIV (PLHIV) and OVC across the region. Volunteers provided basic nursing care, material, emotional, psycho-social and educational support through the HBC projects. A total of 345 care facilitators were trained in refresher or basic HBC, with 656 HBC kits replenished with essential medical items and drugs in ten project sites.

Generic training package on HIV prevention, care, treatment and support for community-based volunteers and HBC training manuals: A high profile launch of the training package on HIV prevention, care, treatment and support for community-based volunteers as well as on HBC training manuals was held in October 2006 in Harare. The launch was held in conjunction with the Zimbabwean Ministry of Health, SAFAIDS, and WHO/AFRO. Following the launch, a training of trainers (ToT) workshop was held in June 2007, hosted by the Zambian Red Cross Society, and was attended by two representatives from each National Society. The workshop was facilitated by a multi-disciplinary team comprising of facilitators from the Federation Secretariat, the Operation Zone for Southern Africa, WHO/AFRO, and the Kenya and Zimbabwe Red Cross societies.

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The training package was also translated into Portuguese, not only for Angola and Mozambique, but for other Portuguese speaking countries. National Societies are planning to roll-out the package, and facilitate its harmonization, adaptation and adoption at the national level in order to make it relevant to various cultural contexts. It will also be translated into appropriate languages at the country level in collaboration with respective Ministries of Health, WHO country offices and civil society partners.

In June 2007, WHO/AFRO conducted a ToT workshop on the training package in Lesotho for key Ministry of Health staff from ten countries in Africa. Lesotho Red Cross Society key staff members were invited and the Federation assisted with facilitation. Additionally during the third South African AIDS Conference held in June, a skills building workshop was conducted on the training package. It was attended by participants from the ten Southern Africa National Societies.

In February 2007, a review of the HBC training manual started, with WHO/AFRO examining the current gaps and the roles of care facilitators in order to strengthen HBC activities in the region. Once finalized, the manual will be used as an additional module to the HIV prevention, care, treatment and support training package for community-based volunteers.

OVC: Funding support through the RNE, Swedish Red Cross, Swedish International Development Agency (SIDA), Children of the World and PNSs increased substantially from the end of 2006. Currently, nine National Societies have OVC officers; six district OVC officers have also been employed. The OVC officers have all undergone a thorough orientation at regional OVC Working Group meetings. The training, which was conducted with support of the Regional Psychosocial Support Initiative (REPSSI), also covered psychosocial support utilizing the 'hero work' approach.

Many OVC in the areas are cared for by their elderly grandparents, and NS's are now including support for the guardians. The Lesotho Red Cross Society and Zambia Red Cross Society are piloting "grannies clubs" before rolling them out to other countries in the region. Support for guardians includes psychosocial and material support, peer education on prevention and HIV and AIDS. Six National Societies have OVC support groups or kids clubs. In addition to psychological support, OVC and household members received a variety of material (see Tables 2 and 3 below) and education support, including school fees for 6,522 children, of which the majority was funded by the RNE donation.

Table 2: Distribution of relief materials for OVC between January to June 2007

Countries	Food Packs		Non food beneficiaries and distribution relief data			
	Food pack beneficiaries	Food packs distributed	NFI beneficiaries	Blankets	Mattresses/ bed-sheets	ITNs
Angola	-	-	600	2,139	600/600	1,800
Botswana	522	529	2,700	4,800	533	300
Malawi	4,320	4,320	7,650	7,650	-	5,000
Mozambique	1,283	2,567	4,800	4,800	-	2,000
South Africa	4,947	4,947	4,947	9,568	-	-
Swaziland	1,844	1,844	2,294	3,500	2,100/200	-
Zambia	2,190	4,840	2,190	7,700	460	3,000
Zimbabwe	843	109,590*	-	-	-	-
Total	15,949	128,637	26,245	40,657	3,693/800	12,100

*Zimbabwe: 843 children are being fed in four supplementary feeding centres five days a week for an average of 26 days a month.

Table 3: Distribution of educational support and materials for OVC between January and June 2007

Country	No OVC (for relief items)	School Pack Distributed	Uniform distribution/ Track Suits	Shoe distribution	School fee/ registration fee
Angola	600	549	600	-	971
Botswana	522	522	-	322	-
Lesotho	180	162	180	180	162

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Malawi	450	450	900	900	450
Mozambique	1,454	1,243	211	0	120
Namibia	512	-	512	512	-
South Africa	2,500	2,500	2,473 & 2,338 (tracksuits)	-	930
Swaziland	251	-	251	251	889
Zimbabwe	2,000	1,000	1,064 (underwear)	-	2,000
Zambia	1,000	1,000	1,000	1,000	1,000
Total	9,469	7,426	7,191/2,338	3,165	6,522

Outcome 3: Reducing stigma and discrimination

The Southern Africa Zone is currently refining the Advocacy, Stigma and Discrimination Strategy. In order to increase coverage of target groups, the Zone is also revisiting its partnership with the Network of African People Living with HIV and AIDS (NAP+) and entered into a new partnership with IRIN in 2006, working on a joint advocacy campaign. The outputs with IRIN were as follows:

- 36 feature text reports were written and circulated to a network of audience worldwide;
- 12 radio features, with distribution to regional and national radio stations for free broadcasting ongoing, inclusive of a programme for Portuguese speaking countries (Angola and Mozambique);
- 5,000 copies of 144-page OVC photo-essay book "*AIDS and Childhood in Southern Africa*";
- Four CDs produced on various HIV and AIDS programme activities.

The radio features and text reports are estimated to have reached 28 million people around the world. The Photo-Essay book, which portrays stories of OVC in the region, was launched in Durban and Johannesburg in June 2007, with other joint launches planned for Geneva and New York later in the year. It is not only an effective advocacy tool, addressing stigma and discrimination in an imaginative way, but also a powerful instrument for resource mobilization, not only for National Societies across Africa, but at the global level.

The National Societies have simultaneously increased their work on reducing stigma and discrimination through sensitization and use of IEC materials at national, provincial, district and community levels. A total of 484,614 IEC materials were developed over the period: 4,900 T-shirts; 1,900 caps; 13,700 calendars; 19,252 posters; 111,000 brochures; 304,000 pamphlets; 29,864 umbrellas/banners/stickers. IEC materials also included leaflets on Malaria and tuberculosis prevention and control.

NS Good Practices documents: In order to share knowledge, advocate on behalf of vulnerable people and to promote the quality of work on HIV and AIDS programming, good practices were identified in the region and produced as follows:

- **Malawi** – Involvement of chiefs in HBC in Mchinji HBC project;
- **Namibia** – HIV testing and counselling for the community by the community counselling projects. Increasing quality and uptake of HIV and AIDS health services;
- **South Africa** – Reducing the 'human cost' of caring. Caring for the carers providing community home-based care;
- **Zimbabwe** – 'We won't give up until we get to the top' support groups for PLHIV and OVC – community-based HIV and AIDS programme.

The Good Practice booklets were launched at the SARAN meeting held in June 2007 and disseminated during the third South African AIDS Conference held in Durban. The National Societies of Angola, Mozambique and Zambia have plans to develop three more Good Practices in the second half of 2007 or early in 2008.

Outcome 4: Strengthening Red Cross national and regional capacities

In complementing the Red Cross Global HIV and AIDS Alliance, the planning, monitoring, evaluation and reporting (PMER) function is being strengthened. Indicators for all the HIV and AIDS outcome and objectives have been developed with input from Ministries of Health, National AIDS Councils, the Joint

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United Nations Programme on HIV and AIDS (UNAIDS) and other sector agencies. Baseline survey tools have been developed and field-tested in Malawi and Zimbabwe through assistance of a monitoring and evaluation consultant. The HIV and AIDS operation plans include funding support for the PMER function at National Society level and the recruitment process has started through the development of a generic job description. The Malawi Red Cross Society has already recruited a national PMER officer and the Irish Red Cross has seconded a PMER delegate to work with the National Society in Malawi.

The Operational Zone for Southern Africa – through its HIV and AIDS technical programme, organizational development and finance development – has combined efforts in strengthening the capacities of National Societies in preparation for scaling-up in 2008. Capacity building activities were heavily supported by the injection of RNE funding and the following has been achieved:

- Capital items for National Society branch development procured, including 11 vehicles, 585 bicycles, 19 motorbikes and 68 computers;
- Navision Accounting software installed and National Societies trained on its use in order to enhance accounting and reporting system;
- 60 National Society youth centres refurbished/established and equipped at HIV and AIDS project sites and 34 youth clubs supplied with 100 soccer balls, 50 netballs and 100 volley balls in Lesotho;
- Volunteer management review supported and HIV and AIDS National Society capacity assessment conducted at regional level;
- OVC basic introductory training module developed and piloted in Zambia and South Africa;
- A training package for community-based volunteers printed in English, circulated to all National Societies and regional partners and translated into Portuguese, through the Federation, WHO and SAFAIDS collaboration;
- HIV and AIDS marketing tools developed, including brochures, a multi-media video, and power-point presentation.

In preparation for scaling up, the Zone HIV and AIDS department has been strengthened through recruitment of technical staff. All National Societies have recruited OVC officers, while three have prevention officers.

Constraints

The funding gap experienced in the second quarter of 2007 affected the implementation of HIV and AIDS projects at the Zone and national levels. SIDA/RNE made soft pledges amounting to CHF 5 million for 2007, but these funds might not be disbursed until the last quarter of 2007, with another gap emerging. However, discussions were taking place with these two partners on longer-term funding to 2010, which should avoid the fluctuating funding levels in the future.

Due to the relocation of the Operation Zone for Southern Africa from Zimbabwe to South Africa, a gap in human resources will be created as new local staff will be recruited in South Africa. To cover the gap, some regional staff members have had their contracts extended from end of September to the end of December.

Working in partnership

The regional HIV and AIDS programme is part of the Red Cross Global HIV and AIDS Alliance. The Alliance encourages all National Societies to enter into a single comprehensive and collaborative framework to mobilize capacities and resources to provide harmonized and effective support for the scaling up of HIV and AIDS activities, within the framework of the Federation's Global Agenda. The Global Alliance and its partners abide by the 'Seven Ones' namely: one set of working principles; one National HIV and AIDS plan; one set of objectives and strategies; one shared understanding of division of labour; one funding framework; one performance tracking system; and, one accountability and reporting system.

In line with the HIV and AIDS Global Alliance, each National Society developed detailed annual operational plans, based on identifying and tracking activities, donations and funding gaps, which included bilateral partnerships. PNS funding provided for the HIV and AIDS programme has enabled activities to continue in the second quarter of 2007, albeit at a lower level than anticipated. Donors – including the British, Finnish, Icelandic, Irish, Norwegian and Swedish Red Cross societies and 13 other PNS – are working bilaterally with the National Societies in the region.

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Following the signing of Memorandum of Understanding between the British Red Cross and the South African Red Cross Society in June 2007, a new partnership emerged in Kwazulu Natal, with a EUR 5 million donation provided from the De Haan Foundation, for a five year period, in support of the HIV and AIDS programme. Provincial staff members have already been scaled-up and a baseline survey is being conducted over the next quarter, using the recently established PMER tools.

Outlined below are other new or former major partnerships which ensure that resources and expertise are maximized to the full:

- Ministry of Health and National AIDS control programmes in all ten countries;
- IRIN, particularly on advocacy for OVC, stigma and discrimination, and PMTCT;
- UNICEF, particularly with the development of a multimedia communication campaign on PMTCT;
- WHO/AFRO and SAFAIDS, particularly with HIV prevention, care, treatment and support – a training package for community-based volunteers;
- Perinatal HIV Research Unit, University of Witwatersrand, Chris Baragwanath Hospital in partnership with UNICEF, particularly on PMTCT and paediatric AIDS treatment;
- The Regional Inter-Agency Task Team (RIATT), spearheaded by UNICEF/EASARO;
- The Continental Network of PLHIV, particularly the National Association of PLHIV in the region, with the Federation Operational Zone for Southern Africa participating in the International Treatment Preparedness Coalition (ITPC) on treatment literacy;
- UNAIDS Inter-country team for Eastern and Southern Africa, particularly in PMTCT;
- REPSSI, particularly in psychosocial support to OVC.

Looking Ahead

Great developments have been made over the last six months in terms of strategic planning, effective and timely implementation of HIV and AIDS operational plans at country and regional levels despite shortage of resources. Extensive and essential tools have been produced, giving the Federation credibility in setting up large scale programmes and in mobilizing global and regional partners. The marketing tools are accessible to local, regional and international partners. The Federation Operational Zone for Southern Africa appeals to its donors to continue with the partnerships in order to achieve the desired impact.

For further information please contact:

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International Federation of Red Cross and Red Crescent Societies

MAA63003 - INTEGRATED REG. HIV & AIDS PROGRAMME

Interim Financial Report

Selected Parameters	
Reporting Timeframe	2006/9-2007/6
Budget Timeframe	2006/9-2007/12
Appeal	MAA63003
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
A. Budget	81,672,161				61,925	81,734,086
B. Opening Balance	0				0	0
Income						
<u>Cash contributions (received)</u>						
Canadian Red Cross	45,262					45,262
DFID Partnership	15,261					15,261
Finnish Red Cross	155,918					155,918
Icelandic Red Cross	96,536					96,536
Netherlands Government	7,552,500					7,552,500
New Zealand Red Cross	1,169					1,169
Norwegian Red Cross	174,600					174,600
On Line donations	851					851
Other					1,209	1,209
C1. Cash contributions	8,042,097				1,209	8,043,306
<u>Outstanding pledges (Revalued)</u>						
British Red Cross	98,800					98,800
Netherlands Government	414,253					414,253
Swedish Red Cross	911,277					911,277
C2. Outstanding pledges (Revalued)	1,424,331					1,424,331
<u>Reallocations (within appeal or from/to another appeal)</u>						
Netherlands Government	0					0
Swedish Red Cross	905,134					905,134
C3. Reallocations (within appeal or	905,134					905,134
<u>Inkind Personnel</u>						
New Zealand Red Cross	36,580					36,580
Other					24,800	24,800
C5. Inkind Personnel	36,580				24,800	61,380
C. Total Income = SUM(C1..C6)	10,408,141				26,009	10,434,150
D. Total Funding = B + C	10,408,141				26,009	10,434,150

II. Balance of Funds

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
B. Opening Balance	0				0	0
C. Income	10,408,141				26,009	10,434,150
E. Expenditure	-9,219,093				-46,233	-9,265,326
F. Closing Balance = (B + C + E)	1,189,048				-20,224	1,168,824

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III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation		
A		B					A - B	
BUDGET (C)		81,672,161				61,925	81,734,086	
Supplies								
Shelter - Relief	135,244	16,492					16,492	118,752
Construction - Housing		3,897					3,897	-3,897
Construction - Facilities/Infrastruc		29,184					29,184	-29,184
Construction Materials	939,398	170,594					170,594	768,804
Clothing & textiles	6,202,229	922,416					922,416	5,279,813
Food	8,437,896	542,804					542,804	7,895,092
Seeds,Plants		504					504	-504
Water & Sanitation	846,604	1,048					1,048	845,556
Medical & First Aid	4,994,965	263,976					263,976	4,730,989
Teaching Materials	7,105,209	399,937					399,937	6,705,272
Utensils & Tools	426,463	12,299					12,299	414,164
Other Supplies & Services	3,103,393	23,757					23,757	3,079,636
Total Supplies	32,191,400	2,386,907					2,386,907	29,804,494
Land, vehicles & equipment								
Land & Buildings	202,440	12,816					12,816	189,624
Vehicles	2,319,804	453,973					453,973	1,865,831
Computers & Telecom	541,641	553,520					553,520	-11,879
Office/Household Furniture & Equipm.	430,144	188,603					188,603	241,541
Others Machinery & Equipment		40,740					40,740	-40,740
Total Land, vehicles & equipment	3,494,029	1,249,651					1,249,651	2,244,378
Transport & Storage								
Storage	794,575	95,285					95,285	699,290
Distribution & Monitoring		209,593					209,593	-209,593
Transport & Vehicle Costs	1,989,203	247,518					247,518	1,741,685
Total Transport & Storage	2,783,778	552,395					552,395	2,231,382
Personnel Expenditures								
International Staff Payroll Benefits	1,235,500	334,273				38,300	372,573	862,927
Regionally Deployed Staff		630					630	-630
National Staff	505,000	119,811					119,811	385,189
National Society Staff	15,507,402	993,189					993,189	14,514,213
Consultants	862,965	249,654					249,654	613,311
Total Personnel Expenditures	18,110,867	1,697,558				38,300	1,735,858	16,375,010
Workshops & Training								
Workshops & Training	11,722,559	415,794					415,794	11,306,765
Total Workshops & Training	11,722,559	415,794					415,794	11,306,765
General Expenditure								
Travel	1,209,525	345,113				2,987	348,100	861,425
Information & Public Relation	3,507,675	874,445					874,445	2,633,229
Office Costs	1,398,025	197,400				1,100	198,500	1,199,525
Communications	486,110	67,983				946	68,929	417,181
Professional Fees	187,820	51,739					51,739	136,081
Financial Charges	186,415	125,518					125,518	60,898
Other General Expenses	1,143,167	241,161					241,161	902,006
Total General Expenditure	8,118,737	1,903,359				5,033	1,908,392	6,210,345
Program Support								
Program Support	5,312,716	599,086				2,900	601,987	4,710,729
Total Program Support	5,312,716	599,086				2,900	601,987	4,710,729
Operational Provisions								
Operational Provisions		414,343					414,343	-414,343
Total Operational Provisions		414,343					414,343	-414,343

International Federation of Red Cross and Red Crescent Societies

MAA63003 - INTEGRATED REG. HIV & AIDS PROGRAMME

Interim Financial Report

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III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation		
A							B	A - B
BUDGET (C)		81,672,161				61,925	81,734,086	
TOTAL EXPENDITURE (D)	81,734,086	9,219,093				46,233	9,265,326	72,468,760
VARIANCE (C - D)		72,453,068				15,692	72,468,760	

International Federation of Red Cross and Red Crescent Societies

MAA63003 - INTEGRATED REG. HIV & AIDS PROGRAMME

Selected Parameters	
Reporting Timeframe	2006/9-2007/6
Budget Timeframe	2006/9-2007/12
Appeal	MAA63003
Budget	APPEAL

All figures are in Swiss Francs (CHF)

IV. Project Details

Project	Name	Opening Balance	Income	Expenditure	Closing Balance	Budget	Variance
		A	B	C	A + B + C	D	D - C
Health & Care							
P63006	Southern Africa Regional HIV &	0	0		0		0
P63007	Southern Africa Regional HIV &	0	2,259,917	-1,894,139	365,778	4,909,331	3,015,192
PAO015	Angola HIV & AIDS Project	0	670,973	-630,173	40,799	1,956,031	1,325,858
PBW002	Botswana HIV & AIDS Project	0	737,860	-579,959	157,901	2,865,543	2,285,584
PLS003	Lesotho HIV & AIDS Project	0	50,419	-38,920	11,499	6,123,252	6,084,332
PMW005	Malawi HIV & AIDS Project	0	1,591,562	-1,483,785	107,777	11,976,170	10,492,385
PMZ008	Mozambique HIV & AIDS Project	0	1,177,871	-1,121,045	56,826	14,058,036	12,936,991
PNA009	Namibia HIV & AIDS Project	0	76,612	-32,683	43,928	7,144,336	7,111,652
PSZ004	Swaziland HIV & AIDS Project	0	1,021,874	-1,003,890	17,984	3,972,843	2,968,953
PZA007	South Africa HIV & AIDS Project	0	1,208,414	-999,854	208,559	9,597,479	8,597,625
PZM002	Zambia HIV & AIDS Project	0	1,489,593	-1,368,657	120,936	10,878,010	9,509,353
PZW003	Zimbabwe HIV & AIDS Programme	0	123,048	-65,987	57,061	8,191,131	8,125,144
Sub-Total Health & Care		0	10,408,141	-9,219,093	1,189,048	81,672,161	72,453,068
Coordination & Implement							
G00053	GVA Support: S. Africa Reg. HI	0	26,009	-46,233	-20,224	61,925	15,692
Sub-Total Coordination & Implement		0	26,009	-46,233	-20,224	61,925	15,692
Total	INTEGRATED REG. HIV & AI	0	10,434,150	-9,265,326	1,168,824	81,734,086	72,468,760