

# Programme Update 2007



International Federation  
of Red Cross and Red Crescent Societies

## Timor-Leste

Appeal no: MAATP001

Programme Update No. 04

This report covers 1/7/07 to 30/11/07 of the 2006-07 appeal.

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.



**Trusted and present:** CVTL staff and volunteers have a special place in Timor-Leste society, which enables them to work in difficult areas often beyond the reach of other humanitarian organizations.

## In brief

**Programme Summary:** The second half of 2007 has been a period of consolidation for Cruz Vermelha de Timor-Leste (CVTL). A series of disasters, including storms, floods and civil violence blighted the country in 2006 and early 2007. This diverted CVTL's focus and sapped much of its resources, which are limited given that the national society has only been recognized for two years. The security situation remained volatile but was mostly characterized by an uneasy calm. The UN reported an average of 50 security incidents a week. National parliamentary and presidential elections passed off relatively incident-free. There was evidence, however, of longstanding political rivalries/factions and it is clear that ongoing national reconciliation/dialogue initiatives face major challenges.

As a result, CVTL has reclaimed only some of the lost progress against the 2006-07 programme, which remained largely unchanged from the original except for an additional focus on avian influenza preparedness. The delay in meeting some programme timelines has influenced plans for 2008-09. These aim to consolidate momentum and enable the national society to cement its special role in Timor-Leste society and its place in people's affections.

**Social, political & economic overview:** Poverty remains the fundamental hindrance to progress in Timor-Leste. About 20 per cent of the population lives on less than USD 1 per day. Various other indicators show the stark challenges facing the nation: high unemployment, particularly among youth; low educational attainment in terms of literacy (about 50 per cent), high school diplomas (15 per cent), and university degrees (2 per cent). Rural-urban migration has seen the population of Dili double between 1999 and 2004. In addition to the hazard vulnerability described above, an estimated 100,000 people (10 per cent of the total population) remain displaced following the unrest of May 2006. Of these, an estimated 25,000 are homeless with thousands of houses destroyed, damaged or occupied.

**Needs:** Total 2006-2007 budget CHF 2,839,843 (USD 2.5 million or EUR 1.7 million) out of which 94 per cent is covered. Outstanding needs are CHF 173,510 (USD 151,140 or EUR 104,100).

**Click here to go directly to the attached financial report.**<sup>1</sup>

**No. of people we help:** 44,680 (comprised the following: 6,500 in disaster management, 20,000 in health, and 18,180 in organizational development).

**Partners:** Current supporters of the Federation appeal are the New Zealand, Australian, German, Norwegian and Japanese Red Cross as well as the Avian Influenza Global Fund. Partner national societies who are engaged in support apart from this appeal programme include Australian, Austrian, Japanese, Norwegian and Spanish Red Cross. ICRC continues its work in Timor-Leste. In terms of external partners, WHO, National Disaster Management Office, Ministry of Health, Ministry of Agriculture, Seeds for Life, and University of Timor-Leste are among the other organizations working with CVTL.

## Disaster management

**Global Agenda Goal 1:** Reduced deaths, injuries and impact from disasters.

**Programme objective:** Strengthen the disaster management capacity of CVTL to respond effectively to natural and man-made disasters, and enhance the capacities of high-risk communities to mitigate the impact of these disasters on their life and property.

### Overview

CVTL focused on four main areas of disaster management (DM) in 2007: community-based disaster preparedness in 12 districts; community-based risk reduction in four districts, since July 2007; livelihood support in two communities in the Ainaro district; and shelter support to communities affected by flooding and land slides in five districts since July 2007. The programme has had mixed success for the following three reasons:

- (i) The national society has devoted significant energy to developing a country-wide network of functional branches in all 13 districts. Disaster management is a core focus for branches but the scale of the development needed in work and the relative newness of DM staff has meant slow, albeit steady, progress.
- (ii) The response to the appeal 2006-07 has been significantly lower than expected. An additional issue for 2008 is that the major contributors - namely New Zealand and Norwegian Red Cross - have financial years that run June to June whereas CVTL's runs from January to January. This will result in some inconsistency between plans and funding.
- (iii) The post-parliamentary election insecurity slowed activities. In three eastern districts where the conflict was most serious, the movement of people from outside was restricted for about two months. Indeed, during September and October, the UN and NGOs had restricted movement whereas CVTL staff were permitted into the area.

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<sup>1</sup> Financial reporting timeframe: January 2007 through October 2007. Financial closure for November 2007 is currently in progress.

**Achievements:**

Overall, the DM programme helped up to 2,336 people during the second half of 2007, including 1,134 women and 1,202 men.

**Expected result 1 (disaster response capacity):** CVTL national headquarters and branches have adequate operational capacity to respond to disasters, and save human life and property.

In the wake of flooding and landslides in July, which destroyed 201 houses in five districts – Suai, Same, Ermera, Viqueque and Manatutu – CVTL, with CHF 145,211 (USD 128,716 or EUR 87,845) assistance from the Federation’s disaster response emergency fund (DREF), is helping the affected community to rebuild their homes.

CVTL and Federation response capacity has now been strengthened after one officer from each attended the 7<sup>th</sup> regional disaster response team training (RDRT) in Bali. This now brings to five the number trained in RDRT from both organizations; which is a boost for future response within Timor-Leste as well as strengthening CVTL’s capability of assisting other national societies in time of need.

The ongoing armed conflict in the eastern districts of Lautem, Viqueque and Bacau, led to several wells being contaminated with the remains of burnt-out houses. CVTL cleaned up 12 wells. Similarly, a water supply system was fixed and sanitation facilities improved in the Ermera district where internally displaced people (IDP) are presently living.

**Note:** As there was a limited response to the annual appeal (CHF 87,832<sup>2</sup> received against CHF 360,000<sup>3</sup> appealed for), two programmes – namely, community-based disaster preparedness and livelihood support - were supported through available funds. As such, most activities under preparedness for response remain pending.

**Expected Result 2 (community preparedness):** People in ten vulnerable communities know and practice measures to mitigate the impact of disasters.

**i) Community-based disaster preparedness:** As stated above, CVTL has been developing a network of 12 functional branches which have disaster management as a core programme. Staff and volunteers have been facilitating disaster preparedness in their districts through discussions with volunteers, board members, and village/sub-village leaders. They have used hazard mapping to develop a community action plan. CVTL will continue to support communities in implementation. CVTL and the Federation organized three regional training sessions for five volunteers and staff from each of nine branches to support the ongoing progress of this remarkable initiative.

**ii) Community-based risk reduction:** CVTL together with the Federation and Norwegian Red Cross have developed a community-based risk reduction programme in four districts for five years (2007-2011) with USD 200,000<sup>4</sup> funding each year. The programme started in July 2007. Its objectives are to improve the resilience of communities where health and livelihoods are threatened by natural disasters, disease, climate and environmental degradation; and enhance the capacity of CVTL to support this strengthening of resilience.

In addition the following developments occurred:

- District branches - board members, staff and volunteers - received an orientation session on community-based risk reduction.
- CVTL recruited a programme co-coordinator and five officers in national headquarters and districts. Recruitment of another officer is underway. The programme has also been providing some support to relevant national society core staff (e.g. logistics and finance).

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<sup>2</sup> USD 77,855 or EUR 53,134

<sup>3</sup> USD 319,107 or EUR 217,782

<sup>4</sup> CHF 225,826 or EUR 136,493

<sup>5</sup> Centre for applied research and policy studies, HIV/AIDS in Timor-Leste: A National Baseline Survey of Young People aged 15-24 years. UNICEF. 2007

- Norwegian Red Cross has been supporting the Federation and CVTL through the secondment of a fully-funded disaster management delegate.
- CVTL has refurbished its national headquarters to provide better office space for the disaster management department. Similarly, a plan is underway to renovate branch buildings in four districts and also to provide adequate storage for relief items. Five computers, three motorbikes and a car, all important to the functionality of the project, have been purchased.
- In view of the volatile nature of Timor-Leste, especially in the capital Dili, radio equipment has been installed at the CVTL head office. This includes ten hand-held radio units, a base station and a repeater station, and an upgraded radio communication room. This heightened ability to prepare for and respond to emergencies has undoubtedly strengthened CVTL. Staff have been trained on the use of radio sets during emergencies. In the coming years, the system will be expanded to cover other districts when secure rooms and funding are available.
- CVTL disaster management staff attended an international training on ‘basic disaster management and emergency response,’ organized by the Federation. In a country vulnerable to unpredictable disasters, such as Timor-Leste, strengthening awareness of fundamental principles and approaches in DM will serve CVTL and its partner communities well. The health, disaster management and organizational management coordinators attended a vulnerability and capacity assessment (VCA) training in Lao PDR in November, funded through the regional delegation in Bangkok. This will help them contribute to the development of a CVTL programme planning team focused on participatory processes.
- All 13 CVTL branches now have buildings. The national society and the Federation worked together to acquire branch buildings and land titles from the government, marking a major step forward in progress. However, because of particular circumstances in Timor-Leste, the land titles in these cases as with many others remain unclear.

**Expected result 3 (environmental protection):** People in ten communities are aware of the risks posed by environmental degradation and have initiated community reforestation projects.

Due to lack of funds, however, activities on environmental protection are pending.

**Expected result 4 (sustainable livelihoods):** Increased livelihood and economic security for the poorest households in two districts most affected by chronic food insecurity.

Since January 2006, CVTL has worked in the Hatu-Builico area on a livelihood and income security programme, which has benefited more than 750 people. Ten groups, including a women’s group, were organized in two sub-villages namely, Maula-Hulo and Manumera. CVTL provided agricultural inputs, such as training, study trips, seeds and demonstration gardens to show how agricultural production can be diversified, compost used and protection provided from pests.

A water system in a community of 32 households (Maula-Hulo RT II) was rehabilitated, enabling people to have a safe drinking source, irrigate vegetable gardens, and have clean water for other everyday household chores.

In Ainaro, the CVTL team discussed with the chapter and different stakeholders how to expand livelihood activities in Belihito Lama. However, the community did not accept a water system project as a priority. As such, another area is being explored to expand the initiative.

CVTL is now more aware of the strengths and limitations of other organizations in livelihood and agricultural work after the national society project manager attended a Seed of Life agriculture research workshop in Dili for two days. Information and experiences were shared among local and international NGOs. CVTL was also represented at World Food Day events on 16 October 2007.

CVTL is also aware that knowledge and expertise are most effectively held in the community and as such, ensured that farmers themselves had the chance to attend discussions on the use of green fertilizers.

## Challenges

The pace of progress for developing branch capacity in terms of the community-based disaster management was steady but slow. As such, service delivery fell short of plans. The programme will continue to reinvigorate the process in 2008. Nine districts do not have DM staff in the field, which makes implementation more challenging. When funding becomes available, appointments will be made to have DM staff in these districts. The emergency response to floods and land slides in six districts also placed additional strain on the national society's DM capacity.

## Health and Care

**Global Agenda Goal 2:** Reduced deaths, illness and impact from disease and public health emergencies.

**Programme Objective:** CVTL provides health services and education that meet the needs of the most vulnerable communities in Timor-Leste.

**Expected Result 1 (water and sanitation):** Availability of safe water and adequate sanitation facilities in remote areas is improved.

The Red Cross (which first operated through ICRC and now through CVTL, with many former ICRC staff continuing this work) has over 15 years of expertise in water and sanitation construction in Timor-Leste. The programme is supported by the Federation as well as bilateral donors.

In 2007, the New Zealand Red Cross funded, via the Federation, water and sanitation projects in two districts: the installation of a new water system in Oecusse, and the rehabilitation of one well and gravity system in Manufahi.

In Oecusse, Naimeko village, the new gravity-fed water system, encompassing 4,066 metres of pipe line is complete, including the construction of four spring catchments, four sediment tanks, four distribution tanks and four tap stands. The system benefits **161 families** with a total population of 672 villagers who will have access to safe and clean water within 100 metres. Only one well remains to be completed, delayed due to the water pump breaking down. A traditional latrine has been built as an example for the community using locally available material. Twenty-five community-based first aid (CBFA) village volunteers have received a five-day basic health and hygiene training, and deliver door-to-door education to households. The Community Action Plan is 80 per cent complete. The water and sanitation team (including the national team leader, technical assistant and two local trainee volunteers) live within the community for approximately ten months and work with the villagers to construct the system, building the capacity of the local volunteer technicians.

The entire process requires community participation from the planning (i.e. the community action plan), to construction, to future maintenance. A water maintenance group has been established and continues to collect small financial donations from the villagers.

In Manufahi, the rehabilitation of an emergency water system established prior to Timor-Leste's independence, has been completed. The project includes rehabilitation or construction of four wells in Betano village, revamping a gravity-fed system with three spring catchments in Oremema village. An example family latrine has been constructed and a public community bathhouse completed. Up to **152 families**, totalling 670 people, have benefited. Leftover funds helped construct an additional well in the Selihasa sub-village, rehabilitate a distribution tank and tap stand, and construct two example latrines in Tutuluro.

Attempts to recruit a water and sanitation delegate since August 2007 have not, to date, resulted in finding a suitable candidate for the position. The position is still under advertisement and is expected to be filled by early next year. The candidate's role is to evaluate the technical and cost effectiveness of current water systems, develop assessment criteria for village selection and assist in the choosing of next year's sites. Also, as funding becomes available, the candidate will work with headquarters and branch management on building rejuvenation.

**Expected Result 2 (community-based first aid):** Maternal and child conditions as well as basic knowledge of community-based first aid (CBFA) and hygiene are improved.

The major aim of CBFA is to have village volunteers provide basic health education and preventative knowledge to the people within their own community. Each village volunteer is responsible for ten families, going from door-to-door or conducting focus groups discussions. Village volunteers are present in all 12 districts. This project has been carried out with financial assistance of the **New Zealand Red Cross** and **Norwegian Red Cross**.

The recruitment of a national headquarters CBFA coordinator has prompted significant progress; however, there are still planned activities that will not be completed this year.

Five village volunteer training sessions, lasting five days each, have been undertaken for 212 participants in the districts of Ainaro, Manufahi, Viqueque, Same and Suai. CBFA health education has been conducted in districts with 1,318 people being reached. Estimates of door-to-door activities vary considerably depending on volunteer capabilities and staff motivation. Data has been collected on 199 household visits in four districts reaching approximately 995 people. It is estimated that the new 138 volunteers will be able to support ten families of approximately five people each, totalling **1,380 families** or 6,900 individuals. This does not include other districts with village volunteers.

In 2007 it was intended to have CBFA trainers for both facilitation and the training of trainers in all 13 districts. In previous years, nine districts received facilitator training. In the second half of this year, regional training was held in the four remaining districts; Covalima, Manatuto, Dili and Lautem.

CVTL branch volunteers disseminated CBFA and hygiene information to 2,009 school children (primary school through to junior high school) in 13 districts, highlighting the strengthening of links being formed with school teachers and children.

Five hundred CBFA interactive flipcharts, on five topics encompassing personal, environmental, water and food hygiene have been distributed to all 13 districts, co-funded by the **Federation** and **Japanese Red Cross**. The flipcharts have not yet been adapted into a series of brochures as this has proven difficult. However, it was planned that the brochures on dengue fever, tuberculosis and diarrhoea would be reprinted in November.

There is, however, a limitation on other CBFA resource material: not all branches have a CBFA manual and there is a lack of information, education and communications (IEC) material on mother-child health issues or specific diseases such as malaria, leprosy, and tuberculosis. Through the close working relationship with the ministry of health, however, 30 flipcharts on tuberculosis have been distributed to all 13 branches. It is hoped next year that more of such material will be produced.

A regular health-related programme on national radio was postponed because of delays in recruiting a CBFA programme manager. Next year, plans are to produce tapes for distribution in 13 districts. However, in Liquica, Oecusse and Ermera, weekly health information is already disseminated to the community via local radio by CVTL project coordinators.

Community baseline surveys were to be undertaken in the Viqueque, Ainaro, Manufahi, and Covalima districts in November 2007. A database will be developed and analyzed towards the end of the year

A study tour to the **Cambodian Red Cross (CRC)** by four CVTL health staff and the Federation health delegate is planned for the first week of December with the aim of revitalizing the community-based village volunteer network in Timor-Leste. Many village volunteers are trained but follow-up is rare. By the end of the year, there will be CBFA facilitators and peer trainers in all districts. Now is the time to turn attention to service delivery, developing a support, monitoring and evaluation system at the district level for village volunteers. It is hoped that a system will be developed through field visits and meetings, and an action learning approach with CRC staff and volunteers.

**Expected Result 3 (first aid):** Increased empowerment of selected communities in the treatment and prevention of common diseases and injuries.

CVTL has a well-functioning first aid programme. Over the past years, training has been carried out in all districts with support from the **New Zealand** and **Norwegian Red Cross**.

A two-week regional first aid training session was conducted in Baucau and Dili. Several participants were selected for the November training of trainers (ToT) session conducted by **Palang Merah Indonesia** (PMI) and funded by **Japanese Red Cross**. There are now at least two of these trainers in 12 districts. Next year, three will be sent to PMI for 'master training'.

A total of 13 three-day training sessions were held for 275 volunteers in ten districts. Volunteers presented basic first aid information in 13 schools, reaching some 815 students and 1,571 community members.

Commercial first aid training has been undertaken with 80 participants from NGOs and UN agencies attending in one- to three-day training sessions at a cost of USD25 (CHF 28 or EUR 17) each per day. This income finances CVTL's other activities. Plans to establish a legal base and a Memorandum of Understanding (MoU) with the government on formal recognition of CVTL as the lead agency in first aid training were overly ambitious at this point in time. However, this will be an important task for next year along with the development of a specific commercial first aid training curriculum and a brochure to advertise this service.

The identification of accident-prone areas was discontinued after a June budget review. Following discussion with CVTL, it was not clear what action would be taken once the accident sites are identified. CVTL could provide first aid to adjacent communities but effectively, the real aim would have best been accident prevention in the first place. In the coming year, advocacy and media campaigns on road safety will be stepped up.

World First Aid Day celebrations were held in 12 districts on 8 September with the exception of Viqueque because of its uncertain security situation. Celebrations involved a parade, first aid simulation exercises, and the distribution of first aid leaflets and Red Cross dissemination brochures. The annual two-day camp for testing trainers and first aid provider skills was scheduled for December.

Instituting a system of restocking and checking of first aid kits has proven challenging. The responsibility of checking first aid kits has been allocated to branch staff but this does not happen at present. It is hoped that tying this responsibility with the restocking system (and with collaboration from Japanese Red Cross) will encourage accountability for equipment. A case form has been distributed to the branches so that a record of people treated and the equipment used is kept. ICRC provided a stretcher for each branch and restocked essential items prior to the parliamentary elections.

CVTL volunteers also provided first aid services at several public events, notably establishing posts near electoral polling booths in all 13 districts during the parliamentary elections. In all, **151 people** received first aid.

**Expected Result 4 (HIV/AIDS):** There is increased awareness and knowledge on sexually transmitted infections (STI) and HIV/AIDS among CVTL volunteers, targeted high-risk groups and the general public.

CVTL is one of the most active organizations in implementing HIV/AIDS projects in Timor-Leste, directly responding to the lack of education on STI and HIV/AIDS issues. A peer education and life skill training approach is utilized. Through this process, participants disseminate information to their peer groups and also address issues around stigmatization, with support from the **New Zealand** and **Norwegian Red Cross**.

A three-day youth peer education training has been conducted in Oeccusse, Viqueque, Manufahi and Ainaro with 25 participants at each.

The national peer education with invited master trainers from **PMI** was postponed from July to November due to

the parliamentary election and uncertain security situation. It was anticipated that participants from all 13 districts would take part.

CVTL HIV/AIDS volunteers disseminated information to **1,400 junior high school students** and **1,085 community members** in 13 districts.

Two youth centres were established at CVTL branch headquarters. In September, 100 youths were recruited in Oeccusse (42 women and 58 men) while 19 youths (12 women and seven men) were recruited in Aileu. Activities included dissemination on HIV and development of individual life skills. It was planned to include members of the youth centre in preparation and participation of World AIDS Day.

UNFPA funding for targeting high risk groups (i.e. women sex workers and their clients) in the Covalima, Bobonaro, Oeccusse and Dili districts was due to finish at the end of November. CVTL, with technical assistance from the Federation, has secured funding for a global funding proposal focusing on clients of women sex workers, particularly commercial drivers, utilizing a peer education and outreach approach. The project is due to begin 1 December 2007 and will be ongoing in the four districts of Covalima, Bobonaro, Oeccusse and Dili.

CVTL continues to work bilaterally with the **Australian Red Cross** project in Lautem. This includes socializing sessions to the branch board, volunteers and important stakeholders of the community. This project has a larger perspective also looking at advocacy for people living with HIV/AIDS. Potential clients of women sex workers are also emphasized. The risk groups are encouraged to seek free voluntary counselling and testing through a referral card distributed by CVTL.

UNICEF and the ministry of health launched a three-month campaign *Fini ne'be diak ba nasaun* (Good seed for the nation). It reached 40,000 young people through a coordinated nationwide prevention education campaign training 80 'master trainers' to conduct HIV workshops with over 1,500 campaign volunteers. These volunteers would in turn pass on the information to 40,000 youths in their communities<sup>5</sup>. A total of 600 CVTL volunteers participated, with some as master trainers.

The international theme for World AIDS day is "Stop AIDS: Keep the promise" in which the sub-theme of leadership has been adapted to the Timor-Leste context to accommodate the population's limited knowledge of HIV. Therefore, a revised World AIDS theme is "Hapara HIV/AIDS. *Tempu atu koalia buka hatene kona ba HIV/AIDS*, (Stop HIV/AIDS. Time to talk, time to know about HIV/AIDS) has been adopted. World AIDS Day events will include a parade with local leaders participating, a senior high school poster competition and T-shirts. World AIDS Day events will be funded jointly by the **Australian Red Cross** and the **Federation**.

The national HIV manager attended the Asian Red Cross and Red Crescent Network (ART) meeting in Bangkok with the theme of **harm reduction**. A presentation of CVTL HIV work in Timor-Leste was well received by the other national societies.

**Expected Result 5 (avian influenza):** Increased knowledge of avian influenza in the target populations, and improved pandemic preparedness of CVTL.

The avian influenza project has two interlinked components: a contribution to government efforts to reduce exposure risks of communities; and a minimum level of preparedness of CVTL as an organization to the threat of a human pandemic.

A June workshop attended by national CVTL health staff and volunteers with presentations from the ministry of health, ministry of agriculture, forests and fisheries (MAFF) and WHO was an excellent platform to launch the project. This workshop's aim was to provide relevant technical avian influenza information and an opportunity for national and district staff to participate in the development of CVTL strategy. The information gathered was used in a November taskforce meeting where membership and the role of the group were identified. A template was developed to classify CVTL activities to be continued or suspended as well as to identify new activities to be started by CVTL during a pandemic. Further taskforce meetings will refine the process and assist in writing the

preparedness plan. Participants were from national headquarters (all departments; communications, logistics, finance, administration, security, disaster management, health, and organizational development) as well as representatives from branch staff, ICRC and the Federation.

Four regional two-day training workshops were conducted in September with each having 25 participant volunteers represented from all districts. CBFA facilitators, DM, first aid representatives and new volunteers were chosen, aiming for equal representation between men and women. Volunteers have since reached 3,256 community members and 4,400 students in delivering avian influenza prevention messages through information dissemination, drama performances and brochure distribution. As many as 40,000 FAO brochures have been reprinted and distributed to 13 districts. The decision to use these brochures was made to ensure consistent messages were delivered across agencies working in avian influenza. Although some districts have been actively working with MAFF, this remains ad hoc due to some districts not conducting vaccination programmes for Newcastle's disease (which has similar symptoms to avian influenza) and in other districts, certain links not being explored between MAFF and CVTL. Monitoring of activities has been conducted by the avian influenza programme manager and in December, an evaluation of community knowledge will be made.

CVTL has been accepted as a member of the national avian influenza taskforce and is the only organization outside the government that has been included. However, since the parliamentary election and change in the government, the taskforce has not met. The NGO forum attended by international NGOs in Timor-Leste and CVTL has disbanded as a result of last year's unrest and not reconvened this year. It is unlikely to do so in the near future with many international NGOs turning their attention to other priorities. Protection equipment has not yet been purchased but is planned for the end of the year.

The avian influenza project is funded by the **German Red Cross** through the Global Fund. An extension of six months will be requested so that activities can continue for the first half of 2008.

### **Challenges**

The biggest challenge that the health programme faced was programme implementation, reporting and monitoring while lacking key health staff during the first half of 2007. Though three new programme managers and health coordinators have been appointed, it is necessary to allow enough time for their own capacity building, and to bring the programme back on track. There is a need to build programme-specific technical knowledge as well as planning, reporting, and monitoring and evaluation skills. A study tour to Cambodia will, in part, address this issue. With these tools and skill-building activities, the health and care programme hopes to see renewed and greater programme-related activity in 2008.

Other constraints include programme implementation being hampered because CVTL and Federation financial systems still require better coordination in the funds transfer process. A solution to the problem is being sought through the employment of short-term financial consultants. In addition, the cash advance system has been a difficult process as the Federation requires that cash advances be reported on before new funds are released. At present, a consultant is working with CVTL to look into this as well as to upgrade its financial system, efforts of which are funded bilaterally by Australian Red Cross.

The delay in recruiting a water and sanitation delegate has affected the evaluation of this year's water and sanitation projects in Oecusse and Manufahi as well as a lack of technical support in the selection process for next year's water and sanitation project sites. This has resulted in the health delegate being responsible for eight projects in total, including four in water and sanitation.

## Capacity and development

**Global Agenda Goal 3:** Increased local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.

**Programme objective:** CVTL becomes an effective and efficient volunteer-based grass-root organization

delivering targeted services to the country's vulnerable communities.

The Australian, New Zealand, Norwegian and Japanese Red Cross have supported the organizational development (OD) programme's focus on branch development. This intervention has provided resources to strengthen management capacity at both branch and national office level during the second half of 2007.

**Expected Result 1 (management development):** A competent management team is built with necessary skills to handle the resources of the society efficiently and deliver effectively on its mission.

### **Achievements**

Relationships, cooperation and collaboration between health staff and branch coordinators at branch level have improved. Initially, staff in some branches were working with little communication between them. Cooperation has now improved through regular contact with the organizational development (OD) team and other national society staff through branch visits and branch coordinators meetings in Dili. This has also helped in identifying problems in their early stages, and in turn, enabled management staff across different programmes to work together to resolve problems and clarify roles.

Branch coordinators and other branch staff have demonstrated an improved understanding of and confidence in their roles as a result of their growing experience, discussions with each other as well as the OD team and other national society staff in branch coordinator meetings.

Branch structures are beginning to emerge as an effective means of delivering programmes. This is the result of the structure itself actually functioning and an increased understanding of national society management of the potential of branches. This evolving dynamic should enable branch work to be better coordinated, which is consistent with CVTL policy to improve integration, collaboration and cooperation across and between programmes. This in turn will result in better access for beneficiaries to Red Cross activities and a better steering of these initiatives to the most vulnerable.

The allocation of small amounts of money to achieve clearly defined objectives (e.g. branch maintenance, volunteer incentives, and transport to communities) has strengthened branch staff's financial management skills and the ability to prioritize and plan, skills fundamental to good project management.

Job descriptions have been developed for all branch staff, and the regular monitoring and support visits to branches by OD staff have been used to explain and clarify understanding when needed. The visits were also used to clarify thinking over the coordination role respective branches play as well as to discuss issues relating to the effectiveness in implementing activities across several programme areas.

Better feedback systems from branch volunteers, members and staff to governance has meant progress towards a more member- and community-led governance that, as a result, plans and implements more responsive and relevant activities. This dynamic then assumes a virtuous quality with branches learning and improving by doing.

Branches are being supported in a more consolidated and effective way as a result of better communication between national programme coordinators (including health, DM, OD, dissemination and tracing). This is particularly important as many national society management staff are new to Red Cross work and there are already enough challenges without additional self-generated ones.

One of the key support services, fleet management, is now running more effectively in support of CVTL work as a whole rather than being 'turf-loyal' to particular programmes. Previously, drivers often considered that they were aligned to the programme from which their salaries were paid. Now, all cars and drivers are under one national society umbrella with vehicles and drivers being used more efficiently in support of national society priorities.

Fuel management has also been improved. Before, there were issues around drivers not filling logbooks and questions about the cost of fuel and amount used. Now all fuel is filled at national headquarters before a trip (so the price is known) and logbooks are kept properly so that km/litre can be checked and costs charged to the

appropriate programme.

There is an ongoing process to develop consistent policy across all programmes in areas such as remuneration for staff and volunteer selection, training and management.

There has been much discussion around developing an organigramme to clarify roles at branch level, between branches and national society management, and among the national society management team. There is a high degree of consensus, and this is due to be finalized before the end of the year. The process has already contributed to better understanding as to what each person's roles and responsibilities are.

**Expected Result 2 (volunteer management):** There is a stable and expanded volunteer base in the branches.

*Note for expected results 2 and 3: Branch development and volunteer management have continued to be the major focal point of OD activities. Much of this development in the last six months has focused on strengthening the management function at branch level as well as linkages between branch and NS management; achievements in this area are detailed above.*

Branches were spending large amounts to transport 40 or 50 volunteers to a single activity in a month. A new system has been introduced and is now established along with an improved understanding of results-focused planning among branch staff and volunteers. The system has now been running effectively for over six months whereby up to 15 volunteers go out, and branch activities take place in the community at least once a week. This has multiple benefits including cheaper costs per/visit (being transport and food for 15 instead of 50), more effective use of time and volunteers (whereby all volunteers are actively involved, rather than 'along for the ride') and results in more visits, to more communities, reaching more people. Finally this system accommodates differing availability of volunteers (e.g. some are students and can only participate on weekends).

As noted above, the issues arising as a result of the increased level of volunteer activity, as well as expanding the CVTL programme base, are now able to inform the development of appropriate guidelines and policies at national level. This will develop the capacity of the national society most to achieve its strategic objectives through its volunteers and meet the needs of the most vulnerable.

**Expected Result 3 (branch development):** Branches are strengthened with committed leadership and an ability to engage with the communities and their vulnerabilities.

### **Achievements**

As noted above, branch coordinators have gained experience and, as a result of ongoing regular support, mentoring and monitoring, they are growing more effective in their coordination role. These include preparing clear and specific reports on activities, coordinating activities to meet the objectives of multiple programmes with limited and shared resources, and identifying areas where further support or clarification is needed from head office.

Planning by branch teams is improved; where, for example, previously a branch team might decide in the morning where they wanted to visit and go there in the afternoon, with little planning, and no community preparation. Now they plan at least a week ahead. An initial visit is made to contact community leaders, followed by a formal letter requesting a visit. About three days before the due visit, follow-up contact is made to confirm the appointment. If the community declines, then the branch team chooses a different place to go. This has contributed to improved coordination of activities across programmes as well as more obviously useful community visits.

With ownership of most branch buildings secured (see below Expected Result 4), branches have formed sub-committees to prioritize needs, to budget and begin to plan for renovation and rehabilitation of branches. This process will continue over the coming months and contribute significantly to the capacity of branches to carry out activities at district level.

Branches, through volunteer mobilization, have carried out dissemination activities in all districts and begun

membership drives. It is a credit to the commitment and energy of volunteers and branch staff and to the strong guidance received from head office that many districts have already attracted hundreds of members, though the actual financial expenditure on the membership drive has necessarily been much less than the previous one.

The first planning for branch assemblies since the formation of CVTL is underway in all districts.

**Expected Result 4 (resource mobilization and management):** There is an expanded, diversified and well-managed financial resource base with improved contributions from locally-generated income.

### **Achievements**

Capacity at branch level has improved for spending money appropriately on mandated activities and, in some branches, for fundraising. A simple journal system has been implemented for branches to record all financial activity, and monitoring visits have confirmed this is being used.

Financial management has improved. Before, there were problems of money being used for purposes other than those designated (e.g. using volunteer incentive money for transport) as a result of a lack of clarity regarding appropriate spending and a lack of systems for tracking and reporting on the use of funds. The improvement is attributable both to improved monitoring systems (including regular headquarters visits to branches, income and expenditure journals and monthly reporting requirements) as well as increased understanding and confidence of branch staff.

Furthermore, as confidence increases, there is ongoing innovation in the use of volunteer incentives and community appreciation funds in some branches. This will be a continuing area of work. Branch staff and volunteers are becoming more practiced at thinking of innovative and effective ways of applying funds for these objectives.

Several branches have initiated fundraising activities such as renting out rooms and facilities and one branch has a rice plantation tended by volunteers.

Branch offices have built relationships with locally active NGOs. In some cases, these NGOs have offered funding to branches that has led to the ongoing development of guidelines and procedures. These guidelines and procedures are built around criteria to ensure that relationships with funding organizations are consistent with Red Cross Red Crescent principles and CVTL strategic objectives.

In the last six months as the trained volunteer base in branches increases, NGOs are approaching CVTL branches to use Red Cross-trained volunteers for their own activities and/or to work together toward common objectives following negotiation with the branch and head office. This is further evidence of CVTL's growing contribution to the civil society sector more generally, as well as a sign that other organizations recognize the quality of Red Cross training. This strengthens the Red Cross profile in the community. Such collaboration also increases branch capacity as CVTL volunteers receive additional training from these NGOs. To ensure consistency with principles and CVTL strategic objectives, these collaborative activities are checked with the national office first.

A significant achievement in the last six months - and the result of a persistent effort on the part of the CVTL OD coordinator - is that titles for 12 of 14 buildings claimed by CVTL have been secured with the remaining buildings to acquire titles being the Dili branch and the head office properties in Dili. With this major hurdle cleared, it is now possible for CVTL to renovate and rehabilitate branch offices. Funding for this is secured through the support of Norwegian and Australian Red Cross.

**Expected Result 5 (communication system):** A well-functioning communication unit that has established links with the media and developed an ability to promote the strategic priorities of the society.

### **Achievements**

All branch coordinators now provide monthly narrative and financial reports, a further improvement on the early months of the branch office establishment when only receipts were submitted. The programme has worked with branch coordinators to improve report quality, such as ensuring specific information is provided on the nature of

activities, number and type of beneficiaries, the means of assessing understanding of key messages, and so forth.

Cameras have been provided for branches to record activities and attach with reports. To date, five branches have had photos developed.

Regular meetings of all branch presidents continue to be held every two months, with a rotating chair and minutes recorded. This has improved communication between branch presidents, national society staff and governance, as well as among branch presidents in terms of sharing common experiences, including challenges and solutions.

There is growing confidence and capacity for staff at all levels to effectively communicate concerns and needs through the establishment of simple, workable systems such as branch visits, regular meetings, and basic clear reporting requirements. This has also invited more head office responsiveness to branch communications such as the sourcing of volunteer incentives and transport costs. A culture of trust and cooperation is being developed that is underpinning ongoing improvements in internal communication. This will be an area for continued focus.

Secured ownership of branch buildings has made further investment in facilities possible, and this will include the establishment of radio communications in all branches. Australian Red Cross has pledged support for such facilities as well as the training of volunteer radio operators.

### **In summary**

Improved communication and cooperation between staff and volunteers at branch level is strengthening programme implementation. As a result, more beneficiaries and communities are being involved in an increasing number of activities.

As relations and links with communities improve, further grassroots feedback to branches should emerge. This in turn will enable the national society to ensure – and adapt if necessary – activities to serve the most vulnerable.

Overall, concerns remain about the effectiveness of some branch coordinators. CVTL will need to monitor this. In addition, the relative newness of many staff means that programme teams are often on a steep learning curve.

For 2008-09, the focus will be on strengthening the quality of activities. This will be backed by developing a consistent approach to monitoring and evaluation throughout CVTL programmes.

## Working in partnership

Committed Movement partnerships continue to provide effective Red Cross Red Crescent support to CVTL; this fulcrum remained strong during the second half of the year. Fortnightly coordination meetings focused on matters of first aid, humanitarian law, relief distribution, and water supplies to displaced populations. As well as CVTL, the Federation and ICRC, other Movement partners joined when they had a programme interest. In particular, there has been regular contact with the Austrian, Australian, German, New Zealand, Japanese and Norwegian Red Cross on programme development and funding.

Outside of the Movement, CVTL has been working with UNFPA (in collaboration with Australian Red Cross) for the funding of HIV/AIDS programmes in Dili and Lautem. A contract will be signed with the Global Fund in December 2007 to carry out HIV/AIDS programmes in four districts. Other health partners include ministry of health and Alola Foundation. The disaster management team has linked up with the ministry of agriculture and forestry, Seeds of Life and the East Timor University on food security programmes as well as the National Disaster Management Office of Timor-Leste.

## Implementation and coordination

CVTL's Strategic Plan remained the national society's principal reference. CVTL programme managers, guided by the Secretary General, led implementation under this plan. Scaling up during the second half of the year was more tangible than in the first half as the national society was not required to deal with as many emergencies. The

Federation's support, via its country delegation with some specific assistance from the regional delegation, maintained a high level of mentoring during the reporting period.

The CVTL programme coordinators have grown considerably in their roles, despite having less than a year's experience in their current positions. This bodes well for the future considering the head of delegation maintained specific support to CVTL senior management with an expectation that a 'step back' will occur at some point in the future. Throughout this process, CVTL showed that it needs space to make small mistakes as part of the growing process and ultimately, must be in control of its own destiny. Stakeholders have been kept well-informed through formal updates, regular visits and informal briefings.

## Contributing to longer-term impact

The CVTL programme contributed to the International Federation's Global Agenda principally in terms of goals 1, 2, and 3. For example, DM focused on strengthening livelihoods and economic security to support safer and more resilient communities. Likewise, ongoing community-based first aid, HIV/AIDS, and water and sanitation interventions demonstrated the unique community reach of CVTL to make a difference in a way beyond a regular clinic/hospital system. Finally, mobilizing volunteers to reach out to and work with communities is making a difference where it counts: at the community level.

The above programmes also support positive changes emerging in Timor-Leste society in relation to gender. A defining characteristic of each programme is the involvement of men *and* women volunteers in the delivery of services. The voice of women volunteers is increasingly heard during many decision-making processes. Implicit in all the programmes is an awareness of the serious wounds and divisions in Timor-Leste society. Initiatives are alive to this and endeavour to contribute – as the Red Cross should – to the healing of differences.

The challenge of meeting the Millennium Development Goals by 2015 are huge in general and daunting in Timor-Leste in particular but it can be said that by strengthening its service delivery and organizational wherewithal at the community level, CVTL is beginning to play its full part.

## Looking Ahead

The planning process during 2007 was a significant milestone for CVTL. The engagement and 'ownership' of the process – and consequent production of programme plans – was at a higher level than seen before in this emerging national society. CVTL coordinators demonstrated more independence and confidence during the decision-making process; something that bodes well for 2008-2009. Indeed, the next two years will see the Federation support team be less hands-on than before; guiding a little more from behind, pointing out gaps, and providing informed advice. The main issue at stake is whether the excellent progress in branch development will show signs that branches are indeed capable of sustainable delivery of responsive and relevant services to their communities. In terms of security, the situation was more stable in the second half of 2007 and there are signs that this could continue. However, circumstances within Timor-Leste mean that this relative calm is by no means entrenched. Any further emergencies – natural or otherwise – would have a serious impact on the national society.

### **For further information please contact:**

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To support or find out more about the Federation's programmes or operations,  
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[Budget below, click here to return to the title page](#)

International Federation of Red Cross and Red Crescent Societies

MAATP001 - East Timor

Interim Financial Report

Selected Parameters	
Reporting Timeframe	2006/1-2007/10
Budget Timeframe	2006/1-2007/12
Appeal	MAATP001
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
<b>A. Budget</b>	<b>1,304,411</b>	<b>791,716</b>		<b>693,417</b>	<b>50,299</b>	<b>2,839,843</b>
<b>B. Opening Balance</b>	<b>306,071</b>	<b>181,453</b>		<b>202,632</b>	<b>55,325</b>	<b>745,480</b>
<b>Income</b>						
<u>Cash contributions (received)</u>						
Australian Red Cross	145,685	28,854		102,570		277,109
Austrian Red Cross					5,901	5,901
British Red Cross	0			0	0	0
Capacity Building Fund				55,000		55,000
DFID Partnership	45,401			34,924		80,325
Finnish Red Cross	44,821					44,821
ICRC				0		0
Japanese Red Cross				20,069		20,069
Korea Republic Red Cross	100,000					100,000
New Zealand Red Cross	127,917			109,248	73,637	310,803
Norwegian Red Cross	62,387	201,328		89,125	14,324	367,165
<b>C1. Cash contributions</b>	<b>526,211</b>	<b>230,182</b>		<b>410,935</b>	<b>93,862</b>	<b>1,261,191</b>
<u>Outstanding pledges (Revalued)</u>						
Finnish Red Cross	-4,774					-4,774
Korea Republic Red Cross	-100,000					-100,000
New Zealand Red Cross	53,220	53,220		56,991	36,400	199,831
Norwegian Red Cross		100,741				100,741
<b>C2. Outstanding pledges (Revalued)</b>	<b>-51,554</b>	<b>153,961</b>		<b>56,991</b>	<b>36,400</b>	<b>195,798</b>
<u>Reallocations (within appeal or from/to another appeal)</u>						
Australian Red Cross		0		0		0
Capacity Building Fund				0		0
Finnish Red Cross		251				251
German Red Cross		2,404				2,404
Hong Kong Red Cross		0				0
Irish Red Cross		602				602
New Zealand Government		74,867				74,867
New Zealand Red Cross	0			0		0
Norwegian Red Cross	0	44			-0	44
Unidentified donor				0		0
<b>C3. Reallocations (within appeal or from/to another appeal)</b>	<b>0</b>	<b>78,167</b>		<b>0</b>	<b>-0</b>	<b>78,167</b>
<u>Inkind Personnel</u>						
Finnish Red Cross	58,667					58,667
New Zealand Red Cross	28,600			95,134	158,383	282,117
Norwegian Red Cross		8,946			34,000	42,946
<b>C5. Inkind Personnel</b>	<b>87,267</b>	<b>8,946</b>		<b>95,134</b>	<b>192,383</b>	<b>383,730</b>
<u>Other Income</u>						
Miscellaneous Income					1,966	1,966
<b>C6. Other Income</b>					<b>1,966</b>	<b>1,966</b>
<b>C. Total Income = SUM(C1..C6)</b>	<b>561,924</b>	<b>471,257</b>		<b>563,061</b>	<b>324,611</b>	<b>1,920,853</b>
<b>D. Total Funding = B + C</b>	<b>867,996</b>	<b>652,709</b>		<b>765,692</b>	<b>379,936</b>	<b>2,666,333</b>

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**II. Balance of Funds**

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
B. Opening Balance	306,071	181,453		202,632	55,325	745,480
C. Income	561,924	471,257		563,061	324,611	1,920,853
E. Expenditure	-599,961	-222,853		-476,885	-267,340	-1,567,038
F. Closing Balance = (B + C + E)	268,035	429,856		288,807	112,596	1,099,294

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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	
<b>BUDGET (C)</b>		<b>1,304,411</b>	<b>791,716</b>		<b>693,417</b>	<b>50,299</b>	<b>2,839,843</b>	
<b>Supplies</b>								
Construction Materials	178,882	10,837					10,837	168,045
Clothing & textiles						425	425	-425
Food	6,125		938				938	5,187
Seeds,Plants	37,311		2,729		37		2,765	34,546
Water & Sanitation	96,624	38,156	26,400		644		65,199	31,425
Medical & First Aid	738	12	3		3,512	34	3,561	-2,823
Teaching Materials	17,281	5,535					5,535	11,746
Utensils & Tools	27,304							27,304
Other Supplies & Services		25	1		39		65	-65
<b>Total Supplies</b>	<b>364,265</b>	<b>54,565</b>	<b>30,070</b>		<b>4,231</b>	<b>459</b>	<b>89,326</b>	<b>274,939</b>
<b>Land, vehicles &amp; equipment</b>								
Land & Buildings	108,360							108,360
Vehicles	4,816							4,816
Computers & Telecom	20,041	5,178	16,237		2,636	3,488	27,539	-7,498
Office/Household Furniture & Equipm.	15,111	390	111		13,377		13,878	1,233
Medical Equipment	959							959
<b>Total Land, vehicles &amp; equipment</b>	<b>149,287</b>	<b>5,568</b>	<b>16,348</b>		<b>16,013</b>	<b>3,488</b>	<b>41,417</b>	<b>107,870</b>
<b>Transport &amp; Storage</b>								
Storage	2,032	140	502		140	614	1,396	636
Distribution & Monitoring	10,836		2,142			2,199	4,340	6,496
Transport & Vehicle Costs	101,478	32,685	15,216		20,556	25,333	93,789	7,689
<b>Total Transport &amp; Storage</b>	<b>114,346</b>	<b>32,825</b>	<b>17,859</b>		<b>20,696</b>	<b>28,146</b>	<b>99,525</b>	<b>14,820</b>
<b>Personnel</b>								
International Staff Payroll Benefits	544,427	159,616	21,818		212,071	259,995	653,500	-109,073
Delegate Benefits	258,581							258,581
Regionally Deployed Staff	7,464		107				107	7,357
National Staff	48,068	9,245	21,641		10,025	20,458	61,369	-13,300
National Society Staff	224,906	76,965	42,151		43,483	1,138	163,737	61,169
Consultants	14,718	11,027			2,393	438	13,858	860
<b>Total Personnel</b>	<b>1,098,164</b>	<b>256,854</b>	<b>85,717</b>		<b>267,972</b>	<b>282,027</b>	<b>892,570</b>	<b>205,594</b>
<b>Workshops &amp; Training</b>								
Workshops & Training	466,063	92,717	11,721		7,196	5,913	117,547	348,516
<b>Total Workshops &amp; Training</b>	<b>466,063</b>	<b>92,717</b>	<b>11,721</b>		<b>7,196</b>	<b>5,913</b>	<b>117,547</b>	<b>348,516</b>
<b>General Expenditure</b>								
Travel	33,384	30,822	5,846		39,935	-41,445	35,158	-1,774
Information & Public Relation	105,839	380	77		4,684	1,826	6,968	98,871
Office Costs	231,615	28,258	8,113		22,556	36,818	95,745	135,870
Communications	47,567	22,822	11,258		21,276	60,649	116,004	-68,437
Professional Fees					12,397		12,397	-12,397
Financial Charges	253	192	41		464	26,735	27,433	-27,180
Other General Expenses	44,470	21,811	7,709		10,546	812	40,879	3,591
<b>Total General Expenditure</b>	<b>463,128</b>	<b>104,286</b>	<b>33,044</b>		<b>111,858</b>	<b>85,395</b>	<b>334,584</b>	<b>128,544</b>
<b>Programme Support</b>								
Program Support	184,590	38,629	14,448		30,596	16,564	100,236	84,354
<b>Total Programme Support</b>	<b>184,590</b>	<b>38,629</b>	<b>14,448</b>		<b>30,596</b>	<b>16,564</b>	<b>100,236</b>	<b>84,354</b>
<b>Operational Provisions</b>								
Operational Provisions		14,517	13,646		18,323	-154,653	-108,167	108,167
<b>Total Operational Provisions</b>		<b>14,517</b>	<b>13,646</b>		<b>18,323</b>	<b>-154,653</b>	<b>-108,167</b>	<b>108,167</b>
<b>TOTAL EXPENDITURE (D)</b>	<b>2,839,843</b>	<b>599,961</b>	<b>222,853</b>		<b>476,885</b>	<b>267,340</b>	<b>1,567,038</b>	<b>1,272,804</b>

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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
<b>BUDGET (C)</b>		1,304,411	791,716		693,417	50,299	2,839,843	
<b>VARIANCE (C - D)</b>		704,450	568,862		216,532	-217,041	1,272,804	