

# Programme Update 2007



International Federation  
of Red Cross and Red Crescent Societies

## Tajikistan

Appeal MAATJ001  
Programme Update No. 4

This report covers the period of 01/01/2007 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.



The Red Crescent Society of Tajikistan (RCST) responded to the needs of the affected families during the floods in April by distributing relief items from its contingency disaster preparedness stock. Photo: RCST.

## In brief

**Programme Summary:** In the first half of the year, the Federation country representation<sup>1</sup> in Tajikistan continued to support the Red Crescent Society of Tajikistan (RCST) by providing membership services in the four core areas related to the Federation's Global Agenda goals. A new common approach to programmes was mutually agreed, with more focus to be placed upon community-based programming and integrating programmes to improve sustainability and higher impact at the local level.

National Societies from the region actively participated in the 7<sup>th</sup> European Regional Red Cross and Red Crescent Conference, which was held in Istanbul from 20-24 May. The Conference concluded with the adoption of the *Istanbul Commitments*, centred on the Conference's two main themes of Health and Care, and Migration.

The RCST requested CHF 85,115 from the Federation's Disaster Relief Emergency Fund (DREF) to respond to heavy flooding in the eastern regions of Tajikistan during April. The final narrative and financial report on the operation and how the DREF allocation was used can be found on the Federation website. [Click here to go directly to see the final report.](#)

**Needs:** Total 2006-2007 budget CHF 3,762,090 (USD 3,118,960 or EUR 2,319,935) out of which 80% covered. Outstanding needs are CHF 758,639 (USD 628,990 or EUR 467,955). [Click here to go directly to the attached financial report.](#)

**No. of people we help:** A total of 64,591 people benefited directly from Federation supported programmes from January to June 2007, and 189,755 will benefit from activities planned for the rest of the year:

<sup>1</sup> From 1 July 2007, the regional delegations have been renamed regional representations as part of the new operating model of the Federation Secretariat. The new name is used throughout this report.

Programme	Number of Beneficiaries
<b>Health and Care</b>	<b>HIV and AIDS</b> – 21,382 (women – 54.4%, men – 45.6%, children 14 – 18 years old – 39.8%) <b>Harm Reduction</b> – 703 (women – 35%, men – 65%) <b>TB</b> – 635 (Women – 54.3%, men – 45.7%)
<b>Water and Sanitation</b>	104 (women – 45%, men – 55%)
<b>Disaster Management</b>	37,686 (women – 12,607, men - 25,079)
<b>Organizational Development/Youth</b>	4,081
<b>Total number of beneficiaries</b>	<b>64,591</b>

**Our Partners:** Total of 80 community-based, national, government-based, international organizations, United Nations (UN), developmental agencies and partners within the movement that National Societies and delegations

## Progress towards objectives-by sector

### Health and care programme

**Objective:** By the end of 2007, a strengthened Red Crescent Society of Tajikistan (RCST) has contributed to the prevention of tuberculosis (TB), HIV and AIDS, sexually transmitted infections (STIs), drug abuse and communicable diseases among targeted communities of Tajikistan.



**RCST volunteers and field officers conduct a meeting on HIV and AIDS/STI, TB and drug abuse among school children in summer camp using an interactive methodology.**

At the 7<sup>th</sup> European Regional Conference held in Istanbul, National Societies committed firmly to scaling up their actions to address increasing and changing needs in health and care services caused by ageing population, migration, socio-economic crises, HIV and AIDS and tuberculosis (TB). Strong focus was given to fighting stigmatization, and on involving marginalized people, youth and volunteers in the design and implementation of programmes.

This commitment already influences the Federation’s support to the National Society of Tajikistan in its health and care programme with vulnerable rural communities. The National Society programme works to decrease the rate of morbidity and the risk of HIV, STIs, TB, drug abuse and communicable diseases spreading within and between communities. Reducing intolerance and discrimination towards people living with HIV (PLWH) and TB patients that often leads to social exclusion is also a priority. The strategies used are awareness raising activities focussing largely on prevention; a harm reduction

project; and psychological support to TB patients in the targeted communities.

In the beginning of the year, the RCST continued its HIV prevention activities in the 16 jamoats, or regions, of Sughd and Khatlon that had been selected in 2006. Starting from June, 16 new jamoats have been identified using the standard selection criteria and activities have begun.

In June, skilled and experienced trainers from international, governmental and non-governmental organizations conducted a training of trainers’ seminar for the two regional HIV and AIDS officers, the two regional health

coordinators and eight members of the RCST district committee health staff. The aim of the training was to build the capacity of the RCST staff to involve and train new volunteers. With larger numbers of better trained staff the National Society is in a stronger position to work with communities.

From January to May, the volunteers trained as part of the 2006 programme disseminated information on HIV and AIDS, STIs, drug abuse and HIV/TB co-infection. Each volunteer conducted between three and four meetings a month with a total of 21,382 people, (11,635 women and 9,747 men) including youth, servicemen, street children, labour migrants and their families and injecting drug users gaining essential knowledge on the diseases and ways to increase prevention. Participants were given numerous gifts and incentives related to the programme's theme of ensuring informed communities - 286 condoms, 730 booklets, posters and notebooks and various image products like badges, T-shirts and ribbons.

In Sughd region, volunteers from the health and youth programmes conducted a public health campaign dedicated to the International Day against Drug Abuse. The campaign was organized jointly with the local authorities, the healthy lifestyle centre, the drug control agency under the President of the Republic of Tajikistan and other NGOs. Many of the day's activities were highlighted in the mass media.

Monitoring of the epidemiological situation in the four districts of Kulyab oblast indicated that the situation related to HIV, drug abuse and TB are the most serious. The statistics also show a tendency to rise in the Kulyab jamoat of Kulyab district compared to other jamoats. The ability of the population to appeal to the specialized health institutions in this jamoat has been increased due to the good work of the relevant health and care departments, the RCST, international and non governmental organizations in running prevention and health education activities. This led to better detection of the diseases and accordingly increased the number of patients. The table below shows vividly the growth in HIV, TB and drug abuse even in a six-month timeframe.

Name	Number of patients in January 2007	Number of patients in June 2007
HIV	79	105
TB	769	1190
Drug abuse	140	169

The RCST continued its harm reduction work in Gorno-Badakhshan Autonomous Oblast (GBAO) within the framework of the HIV prevention programme. During the reporting period the National Society facilitated the exchange of syringes, distributed disinfectants, ran voluntary testing sessions on HIV, offered counselling and held sessions on giving first aid to a total of 104 people, including 66 injecting drug users (IDU). This was achieved through the established trust point and intensive outreach work. Out of 66 IDUs, 48 are permanent clients and the average age is 32; all are male. One IDU became a volunteer of the RCST.

The table below shows the generalized data of the programme:

Number of IDUs served by the trust point in a day	Average number of IDUs served in the trust point	Number of permanent IDUs	Average syringe consumption per day per IDU	Percentage of returned syringes	Total number of visits to the trust point
4 – 5	66	48	2-3	50	180

The nurse at the trust point referred two IDUs to specialists for an examination and consultation and gave first aid and medical aid to two IDUs. If any IDU becomes sick, the nurse first gives them support and comfort, then refers them to the hospital if she thinks it is necessary. The nurse will also visit them at home or in the hospital and talk with the IDU and their family members.

The RCST continued its *Tajikistan DOTS* programme, which was initiated at the end of 2006. This reporting period has seen significant success in the number of DOTS trainings completed. Following the eight training sessions held,

85 doctors and 128 nurses from all the primary health care facilities in Wahdat region have now been trained. An extra training session was requested by the Ministry of Health to train doctors due to the high turn over of staff. This training is planned for July.

One of the programme components is to strengthen the drug supply system at the oblast and rayon level. This has been done in two main ways. Firstly, the project supported the person responsible for the drug stocks in Wahdat to attend a three-day drug management training course. Secondly, it arranges logistic support for the Wahdat TB programme by transporting drugs from the national drug centre to the rayon.

The TB centre in Wahdat will undergo a rehabilitation programme of its own, starting in June. A laboratory, a sputum (productive cough) collecting and preparation room, a drug stock room, a patient observation room and a doctor's consultation room will be built.

To develop effective and sustainable TB control in Wahdat, the district coordination council (DCC) was established. The members of the council were identified and selected in coordination with Ministry of Health officials, local Hukumat members, the head of the Republican TB Centre (RTBC), Project HOPE, the United Nations Development Programme (UNDP), the American Red Cross, other district health officers and the members of DCC. In June, the first coordination council meeting was held.

A management information systems (MIS) specialist was recruited for the Wahdat DOTS project, to be responsible for maintaining all project records, keeping project data on training and monitoring and collecting data from the Ministry of Health related to TB.

The project established 55 village development committees (VDCs) in 55 villages. The RCST has hired four community mobilizers who, together with the VDCs, jointly selected a total of 91 volunteers in 20 villages to be trained in adult learning, community mobilization and information on the DOTS project, specifically in Wahdat. The opportunity was also taken to brief the volunteers about the principles of the RCST. The volunteers come from many different backgrounds, such as homemakers, teachers, students, farm workers and health providers. Once trained, these volunteers will run health sessions on TB in their respective communities.

During the reporting period, three monitoring visits were conducted by the national monitoring team. The team assessed the implementation of the DOTS by checking the recording and reporting systems, clinics, laboratories and drug management. They offered advice on how all of these could be improved in Wahdat, as well as how primary health care and the district TB service and DOTS centre could be better integrated. The specific recommendations were for more visits to be paid to the district polyclinic and community health facilities and to visit patients at home.

In total 142 TB patients, both new and returning, have been registered in this period. Out of this number, 49 have been hospitalized and are receiving treatment at the Shifo hospital, formerly known as the Machiton TB hospital. After being discharged from the hospital the patients are registered at the district TB centre to continue their treatment.

### **Water and Sanitation programme**

**Objectives:** By the end of 2007, the RCST has strengthened its capacity to improve the health status of targeted vulnerable population in Tajikistan through improved water and sanitation.

**Achievements:** Between January and June, the RCST conducted assessments and hygiene campaigns through its Participatory Hygiene and Sanitation Transformation (PHAST) trainings in the ten targeted vulnerable rural villages. The trainings conducted will help to identify not only the most urgent drinking water and improved sanitation facility needs of the targeted populations, but also to find other problems which could be directly tackled by other RCST programmes. The PHAST trainings, as a community based approach, are ongoing and it is expected that from August results will start being seen in tackling the problems of vulnerable people living in these communities.

## Disaster Management

**Objectives:** By the end of 2007, the disaster preparedness and response capacity of the RCST staff, vulnerable communities and secondary schools has improved through community based disaster preparedness, disaster response and first aid trainings (including on the Sphere project and safe access), small-scale mitigation works, simulation exercises, increased network of Red Crescent volunteers, disaster awareness and strengthened partnerships with the government and relevant humanitarian organizations.

**Achievements:** The RCST disaster management programme has continued to strengthen its own disaster response capacity to cope with emergencies and to reduce the risk of disasters in vulnerable communities. This has been achieved by increasing the number of trained volunteers; by forming, training and equipping new local disaster committees (LDCs); and by distributing public awareness information materials on what kind of disasters certain regions are at risk from and the measures to take to reduce these risks and their impact.

There have been ten disaster preparedness and response trainings conducted for schoolteachers in each of the following locations: Dushanbe, Rudaky district, the Rasht valley and the Kurgan-tube region. The trainings gave basic information on disasters, disaster awareness and there was a special topic on the 'rules of conduct' in the case of earthquakes or other emergency situations that called for an evacuation. In order to increase the disaster awareness of the schoolteachers and schoolchildren in the above mentioned locations, natural disaster management training manuals – ABCs for schoolteachers, family disaster response plan brochures and booklets on basic information about disasters, *Earthquake* colouring books- were reprinted and distributed to the schoolchildren.

In the reporting period, a staggering 53 disasters of different forms and degrees of severity occurred in the country. Totally, 12,753 people were directly affected, with 28 people losing their lives, 23 people injured, 264 houses totally destroyed and 1,187 houses partially destroyed. The torrential rainfall that caused flash floods and landslides in the eastern regions of Tajikistan for two days in mid April was a medium scale disaster (*for detailed information please go to the DREF bulletin on the [Federation website](#)*).

As part of the efforts to strengthen the RCST capacity, the following activities have been implemented between January and July:

- a memorandum of cooperation between the Committee of Emergency Situations and the RCST was prolonged till June 2008;
- the RCST national disaster preparedness and response plan of 2004 was revised and updated;
- the RCST contingency plan was finalized and approved by the RCST plenary in April;
- in order to identify and improve the disaster response capacity of the RCST disaster management centres, a capacity assessment was initiated that should be completed by the end of August 2007;
- the selection of the RCST national disaster response team (NDRT) from RCST staff was completed and response equipment, including transportation was procured;
- disaster preparedness stock consisting of 62 tents, 500 mattresses, 500 pillows, 300 hygiene kits, 300 cooking sets, 500 quilts, 500 water cans was procured and handed over to the RCST for further distribution among the ten RCST disaster preparedness centres.

To boost visibility, a NDRT folder including information about the RCST disaster response teams with the donor's logo was designed and printed for distribution to RCST partners and disaster management centres.

## Organizational Development and youth programme

**Objective:** By the end of 2007, the RCST capacity to work with the vulnerable has increased through the process of organizational change.

In the beginning of this year, the RCST took a step forward by moving to a new structure with the division of the governance and management. A new governing board consisting of 13 members, all volunteers including the RCST president, was elected and the new president suggested that they appoint a secretary general. The new governance

and management structure was approved by the oblast/regional and city/district RCST branches. Another positive development has been the consolidating and integrating of the recommendations from the ICRC/Federation Joint Commission for National Society statutes into the RCST statutes and registering them with the Ministry of Justice of Tajikistan.

In order to improve the National Society work within the Movement and with external partners, the RCST organizational development department, with Federation support, facilitated a Cooperation Agreement Strategy (CAS) meeting which took place in March. All the Participating National Societies (PNS) working in Tajikistan were present. Through the CAS process, partners jointly defined the common goals and developed further plans to coordinate means of support. A key document in this process is the *National Society Development Strategy 2007-2009*, which the organizational development department took the lead in drafting. The draft version was translated into English and presented to all PNSs for comments and recommendations. The final version is expected to be presented during the next reporting period.

The RCST has undergone its first external audit, with a final report of the findings released. The RCST, with the support of the Federation, has prepared a plan of action to implement the audit recommendations in the next reporting period.

In April, the organizational development department initiated a call for proposals to all RCST branches. The purpose is to give all branches the opportunity to present their own projects that tackle the problems vulnerable communities in their regions face, thus, increasing the capacity of the branches to provide better services. So far, 14 proposals have been received from different branches, reflecting the different needs of their communities and branches. Proposals are still coming in, and three relevant proposals from different branches will be selected in accordance with the set criteria.

Work has continued on strengthening the youth movement structure and integrating youth members into all programmes. To this end, in February a youth coordinators' meeting was held for the youth coordinators from the oblast, regional and city branches to exchange their various experiences. The programme achievements from last year, new initiatives for 2007 and various reporting issues were also discussed. Together with the most active young Red Crescent volunteers they had the chance to take part in the International Humanitarian Law (IHL) seminars organized by the International Committee of the Red Cross (ICRC) in the RCST headquarters' building. Following this seminar, Red Crescent volunteers conducted 120 seminars on IHL for 4,018 schoolchildren and students.



**RCST volunteers and youth coordinators during the International Red Cross Red Crescent Day celebrations.**

Integration of youth and volunteers into all Federation programmes has been enhanced. During the emergency operations in the eastern part of the country Red Crescent volunteers and youth provided great support to people affected by the disaster. On their own initiative they conducted several small-scale fundraising campaigns to help the children of the affected families, who had been left without clothes and food.

Volunteers also played an active part in the preparation and celebration of the International Red Cross day. Several activities took place in district centres and in Dushanbe, with volunteers informing people in the streets about the Movement, the activities that the RCST conduct in the country and explained the valuable support that the RCST gets from its donors to support its work. Passers-by were given booklets and other information materials explaining how people can make a contribution to improving the life of vulnerable people by volunteering. Radio programmes dedicated to the International Red

Cross Day were broadcast on the radio station *Asia Plus* and the RCST activities are highlighted in the mass media on a weekly basis and posted on the RCST website ([www.rcst.tj](http://www.rcst.tj)).

Other achievements include the 45 RCST volunteers providing social support and care to 135 lonely elderly people in Dushanbe through home visits. In addition, on the eve of Victory Day on 9 May, food parcels were distributed to lonely elderly people. Volunteers also organized a series of targeted fundraising campaigns, raising up to USD 920, which was used to help 725 infants, handicapped children and lonely elderly people.

## Working in partnership

The RCST and the Federation maintained the close relationships that have been established in recent years with partners from within and outside the Movement. In the field of disaster management, both the RCST and the Federation are members of the Rapid Emergency Assessment and Coordination Team (REACT) which includes more than 65 NGOs and governmental structures. The emergency commission under the national government coordinates its disaster preparedness and response activities with all disaster management players within the country through regular coordination meetings.

In line with Federation of the Future and the need to increase cooperation among the Movement partners, the Federation country representation focused its activities on building the capacity and ability of the RCST to coordinate with different partner National Societies. The Federation continues to assist the National Society take on more responsibility and lead the coordination process through CAS.

The RCST organized several round tables for the local authorities - representatives of the 32 jamoats - to acquaint them with the strategy, perspectives, and plans to ensure their support during HIV and AIDS programme implementation. In addition, the RCST conducted public health campaigns collaboratively with the jamoats, healthy life style centres, oblast HIV centres and international and local organizations. The TB project is a close partner of the Ministry of Health at the national level, with regular meetings taking place with senior RTBC and Ministry of Health officials and district health department officials in Wahdat district.

The RCST and the Federation are members of the technical working group on HIV/TB co-infection and the national coordination committee on TB and HIV. The oblast HIV centres and central district hospitals regularly provided the RCST with data on morbidity in the regions.

The American Red Cross project manager attended the partnership meeting held at the RTBC. The meeting was initiated by the UNDP, with the presence of the RTBC director, a senior TB specialist from the Ministry of Health, representatives from the UNDP, Project HOPE, Project Sino, Caritas-Luxemburg, the World Health Organization (WHO), the United States Agency for International Development (USAID) and the Asian Development Bank. The focus of the meeting was to scale up the DOTS programme in the remaining districts of Tajikistan. Currently 91 per cent of Tajikistan is covered by DOTS and the Ministry of Health intends for it to have 100 per cent coverage by the end of this calendar year.

## Contributing to longer-term impact

The activities implemented during this reporting period have contributed to the global priorities of the Federation. For example, the disaster management programme through its livelihood activities contributed to reducing deaths, injuries and impacts from disasters. Likewise, the health programme contributed to reducing the number of deaths through its ongoing HIV and AIDS activities, and its safe drinking water and sanitation interventions. The organizational development programme increased the capacity of branches by increasing volunteer mobilization to reach out to communities and work with them in alleviating human suffering.

The above programmes were implemented with regard to gender aspects. Involvement of male and female volunteers in the delivery of services has been one of the characteristics of all the programmes. All volunteers accessed capacity building opportunities without discrimination. Female volunteers, both young and old are heard during the decision making processes. Also of vital importance is that there is no favour shown to any particular district and the activities are distributed based on population needs.

The collaboration with a variety of partners also contributed to some extent towards meeting the Millennium Development Goals in Tajikistan, particularly in combating HIV and AIDS and other diseases and in developing global partnerships for development.

The Federation and the Finnish Red Cross are planning to start a common programme that will increase the involvement of the RCST local branches in solving vulnerable communities' problems. It has been decided that the Finnish Red Cross will take the lead in participatory community development and the Federation will ensure the formal coordination and branch development through the integration of its ongoing programmes. The programme will be discussed in more depth with the RCST and the Rasht valley district branch may be suggested as a possible pilot project.

## Looking Ahead

For the rest of this year the Federation will maintain its presence in Tajikistan, supporting the National Society with its programmes towards the Global Agenda. The situation in the country will be monitored carefully in coordination with key stakeholders, including the government, to meet the commitments made in the Millennium Development Goals strategy by 2015.

In the second half of 2007, the programmes will work towards the objectives for 2007. A major accomplishment will hopefully be the finalizing of the RCST Development Strategy for 2007-2012. Once ready, this key document will be shared with all partners from within and outside the Movement. More attention will be paid to measuring the impact of the services that the National Society provides to people and communities. Proper monitoring and evaluation systems will be set up to measure progress towards achieving the goals of the RCST strategy.

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# International Federation of Red Cross and Red Crescent Societies

MAATJ001 - TAJIKISTAN

Interim Financial Report

Selected Parameters	
Reporting Timeframe	2006/01-2007/06
Budget Timeframe	2006/01-2007/12
Appeal	MAATJ001
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>1,139,851</b>	<b>1,910,239</b>		<b>712,000</b>	<b>0</b>	<b>3,762,090</b>
<b>B. Opening Balance</b>	<b>133,692</b>	<b>159,960</b>		<b>76,118</b>	<b>0</b>	<b>369,770</b>
<b>Income</b>						
<u>Cash contributions</u>						
<i>British Red Cross</i>	0			0		0
<i>DFID Partnership</i>	14,967	102,899		19,957		137,823
<i>Finnish Red Cross</i>	48,225	265,669				313,894
<i>Netherlands Red Cross</i>	23,289	56,079		17,540		96,908
<i>Norwegian Red Cross</i>	364,900	215,800		187,100		767,800
<i>Swedish Red Cross</i>	330,038	132,402		119,465		581,905
<b>C1. Cash contributions</b>	<b>781,419</b>	<b>772,849</b>		<b>344,062</b>		<b>1,898,330</b>
<u>Outstanding pledges (Revalued)</u>						
<i>DFID Partnership</i>		97,101				97,101
<i>Finnish Red Cross</i>		62,966				62,966
<i>Netherlands Red Cross</i>	-52,381	-51,458				-103,839
<i>Swedish Red Cross</i>	116,698	27,613		36,755		181,065
<b>C2. Outstanding pledges (Revalued)</b>	<b>64,317</b>	<b>136,222</b>		<b>36,755</b>		<b>237,293</b>
<u>Reallocations (within appeal or from/to another appeal)</u>						
<i>Finnish Red Cross</i>	0					0
<i>Netherlands Red Cross</i>		0				0
<i>Norwegian Red Cross</i>	0					0
<b>C3. Reallocations (within appeal or</b>	<b>0</b>	<b>0</b>				<b>0</b>
<u>Inkind Goods &amp; Transport</u>						
<i>Finnish Red Cross</i>		248,700				248,700
<i>Swedish Red Cross</i>		189,809				189,809
<b>C4. Inkind Goods &amp; Transport</b>		<b>438,509</b>				<b>438,509</b>
<u>Other Income</u>						
<i>Miscellaneous Income</i>	2,500	601		2,500		5,601
<i>Services &amp; Recoveries</i>	37,384	4,467		9,049	3,047	53,947
<b>C6. Other Income</b>	<b>39,885</b>	<b>5,067</b>		<b>11,549</b>	<b>3,047</b>	<b>59,548</b>
<b>C. Total Income = SUM(C1..C6)</b>	<b>885,621</b>	<b>1,352,647</b>		<b>392,366</b>	<b>3,047</b>	<b>2,633,681</b>
<b>D. Total Funding = B + C</b>	<b>1,019,313</b>	<b>1,512,607</b>		<b>468,484</b>	<b>3,047</b>	<b>3,003,451</b>

## II. Balance of Funds

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
<b>B. Opening Balance</b>	133,692	159,960		76,118	0	369,770
<b>C. Income</b>	885,621	1,352,647		392,366	3,047	2,633,681
<b>E. Expenditure</b>	-547,445	-1,217,739		-262,387	-2,894	-2,030,465
<b>F. Closing Balance = (B + C + E)</b>	<b>471,868</b>	<b>294,868</b>		<b>206,097</b>	<b>154</b>	<b>972,986</b>

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MAATJ001 - TAJIKISTAN

Interim Financial Report

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Reporting Timeframe	2006/01-2007/06
Budget Timeframe	2006/01-2007/12
Appeal	MAATJ001
Budget	APPEAL

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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>1,139,851</b>	<b>1,910,239</b>		<b>712,000</b>	<b>0</b>	<b>3,762,090</b>	
<b>Supplies</b>								
Shelter - Relief	437,940		255,611				255,611	182,329
Construction Materials	76,810	13,259					13,259	63,551
Clothing & textiles	186,216	2,345	158,381				160,726	25,490
Food	1,966				2,571		2,571	-604
Seeds,Plants	14,857		4,937				4,937	9,920
Water & Sanitation	301,486	46,402					46,402	255,084
Medical & First Aid	67,652	1,574	13,415				14,989	52,663
Teaching Materials			683				683	-683
Utensils & Tools	111,766		31,143				31,143	80,623
Other Supplies & Services	42,051	929	6,360				7,289	34,762
<b>Total Supplies</b>	<b>1,240,743</b>	<b>64,508</b>	<b>470,529</b>		<b>2,571</b>		<b>537,609</b>	<b>703,134</b>
<b>Land, vehicles &amp; equipment</b>								
Land & Buildings	10,038				10,038		10,038	0
Vehicles	55,857	11,951	63,338				75,289	-19,432
Computers & Telecom	8,275	19,387	18,723		3,080	2,587	43,776	-35,501
Office/Household Furniture & Equipm.		2,897			3,651	1,489	8,037	-8,037
Others Machinery & Equipment	2,194		2,194		1,941	-4,135	0	2,194
<b>Total Land, vehicles &amp; equipment</b>	<b>76,364</b>	<b>34,234</b>	<b>84,255</b>		<b>18,710</b>	<b>-60</b>	<b>137,140</b>	<b>-60,775</b>
<b>Transport &amp; Storage</b>								
Storage	11,415	1,080	1,932		12	1,287	4,311	7,104
Distribution & Monitoring	83,901	1,485	96,620		426	10,031	108,563	-24,661
Transport & Vehicle Costs	161,811	42,650	51,603		25,812	-6,535	113,530	48,281
<b>Total Transport &amp; Storage</b>	<b>257,127</b>	<b>45,215</b>	<b>150,156</b>		<b>26,250</b>	<b>4,783</b>	<b>226,403</b>	<b>30,724</b>
<b>Personnel Expenditures</b>								
International Staff Payroll Benefits	257,030	70,341	123,980		55,804	99	250,223	6,807
Delegate Benefits	227,126							227,126
Regionally Deployed Staff	1,375	1,375					1,375	0
National Staff	262,530	99,549	81,491		30,722	-462	211,302	51,229
National Society Staff	170,255	38,818	18,069		32,052	462	89,400	80,854
Consultants	30,000	2,549	500				3,049	26,951
<b>Total Personnel Expenditures</b>	<b>948,316</b>	<b>212,633</b>	<b>224,040</b>		<b>118,578</b>	<b>99</b>	<b>555,350</b>	<b>392,966</b>
<b>Workshops &amp; Training</b>								
Workshops & Training	374,547	15,105	20,426		37,685		73,216	301,331
<b>Total Workshops &amp; Training</b>	<b>374,547</b>	<b>15,105</b>	<b>20,426</b>		<b>37,685</b>		<b>73,216</b>	<b>301,331</b>
<b>General Expenditure</b>								
Travel	95,091	44,102	24,521		17,973	156	86,753	8,338
Information & Public Relation	357,420	22,986	68,766		6,056		97,808	259,613
Office Costs	43,113	13,474	3,323		3,120	57,621	77,539	-34,426
Communications	30,827	409	5,832		1,149	43,858	51,248	-20,421
Professional Fees	1,865		19,073		16,982	1,861	37,917	-36,052
Financial Charges	32,458	5,729	11,865		272	88	17,954	14,504
Other General Expenses	91,523	48,111	58,339		17,879	-108,304	16,025	75,498
<b>Total General Expenditure</b>	<b>652,298</b>	<b>134,811</b>	<b>191,720</b>		<b>63,431</b>	<b>-4,719</b>	<b>385,244</b>	<b>267,054</b>
<b>Depreciation</b>								
Depreciation	2,343					2,603	2,603	-260
<b>Total Depreciation</b>	<b>2,343</b>					<b>2,603</b>	<b>2,603</b>	<b>-260</b>
<b>Program Support</b>								
Program Support	244,536	35,584	72,093		17,055	188	124,920	119,616
<b>Total Program Support</b>	<b>244,536</b>	<b>35,584</b>	<b>72,093</b>		<b>17,055</b>	<b>188</b>	<b>124,920</b>	<b>119,616</b>
<b>Operational Provisions</b>								

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

MAATJ001 - TAJIKISTAN

Interim Financial Report

Selected Parameters	
Reporting Timeframe	2006/01-2007/06
Budget Timeframe	2006/01-2007/12
Appeal	MAATJ001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

**III. Budget Analysis / Breakdown of Expenditure**

Account Groups	Budget	Expenditure					TOTAL	Variance
		Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation		
A							B	A - B
<b>BUDGET (C)</b>		<b>1,139,851</b>	<b>1,910,239</b>		<b>712,000</b>	<b>0</b>	<b>3,762,090</b>	
Operational Provisions	-34,183	5,354	4,520		-21,893		-12,019	-22,164
<b>Total Operational Provisions</b>	<b>-34,183</b>	<b>5,354</b>	<b>4,520</b>		<b>-21,893</b>		<b>-12,019</b>	<b>-22,164</b>
<b>TOTAL EXPENDITURE (D)</b>	<b>3,762,090</b>	<b>547,445</b>	<b>1,217,739</b>		<b>262,387</b>	<b>2,894</b>	<b>2,030,465</b>	<b>1,731,625</b>
<b>VARIANCE (C - D)</b>		<b>592,406</b>	<b>692,500</b>		<b>449,613</b>	<b>-2,894</b>	<b>1,731,625</b>	