

Programme Update

 International Federation
of Red Cross and Red Crescent Societies

Timor-Leste

Appeal No. MAATP001
30 June 2009

This report covers the period 1 January to
30 June 2009.



CVTL health staff debating critical issues for CVTL in health, in preparation for the national society's new strategic plan 2010-2014 which will be drafted at a workshop in July.
International Federation

In brief

Programme purpose:

Cruz Vermelha de Timor-Leste (CVTL), the national society of Timor-Leste and the International Federation's framework in Timor-Leste are the Global Agenda goals:

- Reduce the number of deaths, injuries and impact from disasters (disaster management)
- Reduce the number of deaths, illness and impact from diseases and public health emergencies (health and care)
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability (organizational development).

Programme summary:

Since before the start of the year, Cruz Vermelha Timor-Leste (CVTL) recognized the importance of preparing for their new strategic plan 2010-2014. They commissioned an internal and external review, an external evaluation of their health programme, and undertook a range of activities with the aim of gathering relevant information from all their stakeholders. Rapid expansion of programmes over the last two years has created challenges for CVTL's organizational and management capacity, and the national society recognizes the need to focus on programme consolidation and improving service delivery while at the same time, investing in institutional strengthening to prepare for scaling-up in the future.

The International Federation Timor-Leste country office and Red Cross partners supported these activities through training and facilitation at branch and national levels, and presently await outcomes of the forthcoming July workshop with keen anticipation.

Programme implementation met the challenges of an overstretched organization, but made some good

progress in the reporting period; particularly in standardizing programme approaches, piloting methods and in organizational development at branch and national headquarters level.

Financial situation: The budget for 2009 has been revised from CHF 1,758,888 (USD 1.6 million or EUR 1.1 million) to CHF 1,686,599 (USD 1.6 million or EUR 1.1 million), of which 90 per cent is covered. Expenditure from January to June 2009 was 41 per cent of the total 2009 budget.

Core costs were reviewed with the commencement of a fully-funded head of country office in April. Some programme costs were reduced when CVTL found other partners to fund needs, and where some programmes such as first aid were cut due to the lack of funding.

In general, the 2009 appeal is adequately funded by a very supportive group of Red Cross partners and their governments. The health programme continues to work towards covering remaining funding needs and has budgeted to do so.

[Click here to go directly to the attached financial report.](#)

No. of people we help: The number of people benefiting directly from CVTL's interventions in disaster management was approximately 5,134 men and 4,859 women. This information is taken from vulnerability and capacity assessments of targeted communities and emergency response training. The number of people benefiting directly from CVTL's health interventions was approximately 10,894 in total. The source of this figure is mostly from information dissemination activities and community visits as well as water and sanitation projects.

Our partners: Generous support continues to be provided to CVTL through the International Federation by the Australian Red Cross, Danish Red Cross/Danish government, Finnish Red Cross/Finnish government, German Red Cross, Japanese Red Cross, New Zealand Red Cross, and Norwegian Red Cross/Norwegian government. CVTL also has bilateral partnerships with Austrian Red Cross, Australian Red Cross, Japanese Red Cross and Spanish Red Cross, and receives support from the International Committee of the Red Cross (ICRC), the International Federation's SOS fund and other regional funds. The national society collaborates with non-Movement partners including the government of Timor-Leste, UNICEF, WHO, IOM, and other international and national non-governmental organizations.

On behalf of the Timor-Leste national society, the International Federation would like to thank all partners and donors for their support to this appeal.

Context

Timor-Leste is still struggling to make progress in economic and human development terms against a backdrop of poverty and social tension in one of the least economically developed nations in Asia. Half the population presently lives below the basic needs poverty line and half the children under five years old are underweight.

There remains a strong overt UN police and International Stabilization Force (ISF) presence in Timor-Leste but the overall situation so far in 2009 has been calm.

The government of Timor-Leste is committed to improving the lives of its people and, with its development partners, providing wide-ranging development programmes and at the same time, making good progress on the consolidation of peace and stability in the country. The national society, Cruz Vermelha de Timor-Leste (CVTL) is still a young national society but is actively addressing some of the critical challenges of the country. Working with the International Federation, Red Cross partners and others, it has defined its priorities as the improvement of preventative health and care, disaster management and emergency response with a focus on community mobilization.

CVTL will develop a new strategic plan in 2009, re-affirming its vision and developing guidelines on how it will carry out its work in the coming 2010-2014 period. CVTL personnel have attached high priority to this and have undertaken a number of preparation activities in the first half of the year. An internal-external review of CVTL and an external evaluation of CVTL health will also contribute useful analysis to guide the process.

Progress towards outcomes

Please refer to the [Plan](#) for further information.

Disaster Management

Programme purpose: Reduce the number of deaths, injuries and impacts deaths caused by disasters

Programme component 1: Disaster management planning

Expected result: Improved ability of CVTL to predict and plan for disasters, to mitigate their impact on vulnerable communities, and effectively cope with their consequences

Achievements

- *VCA as a major planning tool:* CVTL used vulnerability and capacity assessment (VCA) tools in five areas for collecting data on nature and the level of risk that vulnerable people face; the underlying reasons of vulnerability, who will be the worst-affected and what initiatives can be undertaken to address their vulnerability. This information was used in designing disaster management activities.
- *Use of scientific information:* CVTL received weather forecasts from department of meteorology. This information was passed to district branches for further dissemination to communities. Similarly, specific disaster-related information was available from the national disaster management directorate as well. The hazards mapping done by OCHA/UNMIT² integrated humanitarian coordination team and others prepared by UNDP were also utilized as a scientific tool for programme planning.
- *Contingency planning:* CVTL completed an internal and external working environment review in 2008 which was considered as the first part of a contingency planning process. In 2009, preparations are underway to start the second phase of contingency planning which will help identify potential areas of CVTL engagement in responding to future disasters and to build up CVTL capacity accordingly.
- *Standard operating procedures:* CVTL is continuing to develop a standard operating procedure for emergency response. Input from three district branches was solicited during emergency response training. The framework is translated into the local language and is shared with district branches. Similarly, a guideline on community-based risk reduction is drafted which is being used for programme design. Brochures and a booklet are under preparation.
- *Integrated planning:* Integrated planning is an approach in use by CVTL but needs to be developed further. Vulnerability and capacity assessments identified a number of priorities in the community which were beyond the scope of the disaster management, health and organizational development departments, and this information is shared with other non-governmental organizations, local government, and other relevant parties.
- *Staff capacity building on disaster management planning:* Disaster management staff in CVTL have been given opportunities to develop their confidence for managing disaster management programmes. Programme management skills such as writing application documents, developing work plans, monitoring activities and budgets, and writing reports have all improved to some extent compared to past years.

Programme component 2: Organizational preparedness

Expected result: Improved capacity in skilled human resources, and financial and material capacity for effective disaster management

² United Nations Office for the Coordination of Humanitarian Aid/United Nations Integrated Mission in Timor-Leste

Achievements

- *Capacity-building:* Two aspects of organizational preparedness i.e. training/capacity building, and pre-positioning of emergency equipment and stocks, were taken into account in the annual plan. In line with this, CVTL received support from the International Federation, ICRC and the government of Timor-Leste for stocking family kits for 1,250 families, 500 families and 200 families respectively. In addition, CVTL received water supply equipment from ICRC which can supply enough water for up to 5,000 people per day in emergencies. Two CVTL staff attended two rounds of water and sanitation training for emergency response organized by the International Federation and ICRC respectively. The family kit stocks are kept in Dili and several other districts.
- *External exposure:* The CVTL programme coordinator and the Suai branch president attended a regional-level relief-to-recovery workshop. The CVTL community-based disaster preparedness manager attended a regional level workshop on risk reduction. Similarly, the disaster management coordinator participated in a regional disaster management committee meeting. Two staff from CVTL attended disaster risk reduction training in Dili. Bacau branch staff attended a five-day training session on disaster risk reduction. These exposures were helpful in developing the professional capacity of staff.
- *Response capacity-building:* CVTL organized training for staff and volunteers in three branches in the Viqueque, Manufahi, and Ermera districts, to develop branch disaster response teams. Two other districts will have similar training by June 2009. CVTL staff, volunteers, local people from disaster-prone communities, government officials (especially fire fighters) and district disaster management committee members were engaged in the training. Participants practiced what they had learnt through simulation exercises.
- The DM programme is fully funded; there are, therefore, no funding constraints presently affecting this programme.
- With the above arrangements in place, CVTL is placed in a good position to respond to disasters. During the reporting period, CVTL received two requests from the national disaster management directorate to respond to flooding in two different districts. The national society responded effectively on both occasions.

Programme component 3: Community preparedness/disaster risk reduction

Expected result: Improved self-resilience of individuals and communities to reduce their vulnerabilities to public health emergencies and disasters

Achievements

- *VCA as a planning tool:* CVTL carried out five vulnerability and capacity assessments to design community-based disaster preparedness and risk reduction action plans. The major priorities of these vulnerable communities were: increasing access to livelihood options, water and sanitation facilities, and health services. Other priorities were self-employment, shelter, increased awareness of health, disaster preparedness and water and sanitation, and capacity development for reducing the risks of impending disasters through structural and non-structural measures.
- *Mitigation activities:* Much branch time was spent carrying out VCAs. However, the Bacau branch has completed construction of two water wells and another well is half-finished. The community also carried out drainage construction. In Viqueque and Suai, community members constructed a fence to protect a water source. The Liquica branch and a local coastal community discussed cyclone preparedness measures and early warning systems. Early warning messages were disseminated to communities in the eastern part of the country, including Los Palos, Bacau and Viqueque, when notification of a cyclone was issued. In all districts, a radio message was circulated for wet season preparedness. The Ainaro branch provided house repair and maintenance training to 35 people (eight women and 27 men) in Belehitu, and the tools necessary for repair and maintenance of houses. The Oecussi branch constructed latrines with raised platforms in flood-affected areas.
- *Awareness of environment protection:* In Liquica, 59 volunteers in the community planted 600 saplings with the aim to protect a school building from future landslides. The Ainaro branch mobilized the community for the management of garbage and the digging of one garbage pit for each household. Sessions on environment protection were organized at Belehitu and posters were distributed for awareness-raising. During World Red Cross day, 400 saplings were planted and 800 saplings were distributed to the community for plantation. In

Suai, a community facilitated plantation in a water catchment area for water conservation and protection from landslides. In Oecussi, CVTL mobilized people in Manan to plant coconut trees.

Programme component 4: Disaster response

Expected result: Improved response assistance to meet the needs of people affected by disasters

Achievements

- *Relief supplies (non-food items):* 50 families in the Viqueque district faced flash floods recently in May. CVTL completed an assessment and relief distribution follows. Relief distribution will consist of non-food items such as blankets, tarpaulins, clothing, and hygiene kits. Similarly, another 21 families in Carabalu village were also threatened by flooding. In Maliana, 12 houses were destroyed by floods. CVTL conducted a survey and advocated to the government and local non-governmental organizations for support.

Programme component 5: Recovery

Expected result: Improved assistance to restore or improve pre-disaster living conditions

Achievements

- *Livelihood analysis:* CVTL completed two livelihood analyses in the reporting period in Caicasa and Sarabere. Key priorities were increasing access to clean drinking water, sanitation, health clinic, proper garbage disposal, and irrigation facilities. The VCA also revealed difficulties in accessing improved quality seeds, agriculture skills and equipment. Some critical issues of land use were also raised.
- *Livelihood options:* In response to the analysis in Caicasa, CVTL completed approximately 95 per cent of its work on access to water for drinking and irrigation in Sarabere with the protection of a nearby spring catchment. Up to 46 people in the community received training and tools for agriculture, improved seeds and knowledge of harvesting techniques. They also attended health awareness sessions and training for treatment of soil, seed storage, improved cooking techniques for preparing nutritious meals for children, book-keeping, composting and other relevant skills. Community members garnered their first harvest of vegetable crops, making sufficient income to buy rice during lean periods. They now plan to plant a second crop of vegetables. In Sarabere, another community is ready to begin similar interventions.

Constraints or challenges

- The risk reduction programme manager resigned and a new manager has been recruited. Branch staff in Aileu, Maliana and Liquica also resigned but these have been replaced, apart from in Liquica where the replacement is yet to be identified.
- Prolonged rainy season delayed progress in the construction of water schemes and other risk mitigation activities.
- Two CVTL cars (both managed by the disaster management programme) were severely damaged in road accidents creating a serious problem for transportation. One of them has since been repaired.
- Branch staff are in serious need of guidelines for programme implementation; training is scheduled for the second half of the year will start the process.
- Due to the early departure of the previous head of country office, the disaster management delegate was also assigned the duties of acting head. This situation remained for an extended period as identification of a suitable funded head of country office turned out to be highly challenging. This placed some restrictions on the time the disaster management delegate was able to devote to the disaster management programme proper, although any negative impact was minimized through external support.

Health and care

Programme purpose: To reduce the number of deaths, illnesses and impacts from diseases and public health emergencies

Programme component 1: Water and sanitation

Expected result: Access to safe water and sanitation improved in the target area

Achievements

- *Complete rehabilitation of a water system to five sub-villages:* This included the protection of a spring catchment, 15 kilometres of salvaged/new piping and construction of ten distribution tanks and six tap stands with 30 anchor points and 200 pillars.
- Cleaner, better quality water is now supplied to 600 households (approximately 2,970 people), and is within reasonable walking distance.
- A five-day community-based first aid (CBFA) training session was conducted in five out of the eight sub-villages that received the water system. This resulted in a total of 75 village volunteers comprising 30 women and 45 men.
- CVTL conducted an internal water and sanitation workshop to discuss findings of the Australian Red Cross water and sanitation evaluation, and to discuss likely future directions and issues.

Programme component 2: Community-based health and first aid

Expected result: Improved knowledge and practice of health-promoting behaviours provided through community-based first aid services

Achievements

- The community-based health and first aid (CBHFA) pilot project funded by Finnish Red Cross in five hamlets in Cribas village, Manatuto with the aim of improving implementation among community village volunteers has produced some success: improved support from the branch to village and also increased community ownership and empowerment. A field trip with the Finnish Red Cross health advisor included a group discussion with the mothers' group, branch staff, and branch and village volunteers.
 - Analysis of the baseline survey highlighted key behaviours to focus on for change, such as river water being used for toilet and also collected for domestic use
 - Alola foundation training for 13 mothers on breastfeeding: Following training, volunteers visited new mothers to encourage breastfeeding exclusively for the first six months after delivery. These volunteers also assist in the monthly government outreach service on the health promotion table.
 - Community volunteers participated in branch World Red Cross Day celebrations. Activities included sewing shut holes in mosquito nets and a volleyball challenge between branch volunteers and a mothers' group. Afterwards, with community present, there was a health promotion demonstration on hand washing and a parade.
 - Up to 600 long-life mosquito nets were purchased with a malaria-prevention focus to follow.
- The community-based health and first aid (CBHFA) manager, health coordinator and Federation health delegate attended a master training *CBHFA in Action* workshop in Bangkok in April.
- Community-based first aid (CBFA) guidelines have been revised to include the *CBHFA in Action* component. Also developed are additional documents on the collection of secondary data.
- A *CBHFA in Action* powerpoint presentation has been developed for use in sensitization workshops to be held in the second half of the year.
- In other areas, door-to-door education remains erratic but there has been a total of 931 household visits made in these target villages, with emphasis on malaria and keeping the environment clean.

- Up to 1,908 (including 977 women) community members and students have received information on health and hygiene topics such as malaria, diarrhoea, tuberculosis, breastfeeding, leprosy, dengue fever, toothache, water treatment and storage, and care of a person with a fever.
- A hygiene promotion proposal for two districts has been submitted to USAID.
- Social mobilization services provided to the ministry of health tetanus toxoid (TT)/measles campaign in Dili in May. Up to 50 CVTL volunteers provided campaign information to village leaders and schools in every sub-village and verified the existence of vaccination posts. Volunteers also provided assistance at vaccination posts during the immunization process funded by the World Health Organization (WHO). CVTL is expected to be contracted in a similar manner when similar campaigns are extended to Bacau and Bononaro.
- All health staff attended a two-day workshop in February for management and technical support.

Programme component 3: First aid

Expected result: Improved first aid knowledge and practice through first aid training and services to target populations

Achievements

There were no activities for first aid due to the lack of funding (see *Constraints and Challenges*).

Programme Component 4: HIV and AIDS

Expected result: Increased knowledge of HIV/sexually-transmitted infection prevention and reduction in discrimination and stigma among target populations (i.e. youth, peer educators and general public)

Achievements

- Revitalization of the HIV youth peer education programme started in February with the commencement of a consultant, recruited on a cost-share basis with the Global Fund.
- HIV youth peer education package development continues, despite a delay in scheduled completion. Key documents drafted include the CVTL HIV programme organigramme, roles and responsibilities, peer educator volunteer selection criteria, curriculum for peer education trainers and peer educators. Progress has also been made in drafting the HIV peer education manual.
- Up to 13 condom dispensers for installation in districts have been purchased through the Global Fund.
- The HIV manager, with the support of the health delegate and HIV consultant, has developed a condom dispenser policy for branch health staff, outlining condom supply and reporting channels.
- A HIV staff in-service session on sexually transmitted infections (STI) and HIV was held for 19 national headquarters staff, comprising five women and 14 men, in April.
- Information dissemination by branch volunteers reached a total of 2,498 community members and students (of which 1,192 females comprised 48 per cent) in 13 districts, with HIV/STI prevention information and information on stigma and discrimination
- Up to 497 HIV prevention pamphlets were distributed to community members and school children during information dissemination sessions in all 13 districts.

Programme component 5: Avian influenza

Expected result: Information on avian influenza disseminated in 13 districts; greater knowledge of the avian influenza virus, symptoms, transmission among target populations; and communities know how to take measures to prevent and mitigate an avian influenza A (H5N1) epidemic; increased preparedness of CVTL to mitigate effects of a human pandemic on the organization.

Achievements

- A total of 4,824 community and students have received avian influenza prevention information. A total of 561 school and communities are reached through the medium of drama on avian influenza prevention.
- A total of 3,372 avian influenza pamphlets were distributed to school students and community members
- Quotations have been sourced for the translation of the contingency plan. Ongoing work continues on the personal protection guidelines and part II of the contingency plan.
- A CVTL crisis management meeting was called by the CVTL secretary--general when the Influenza A/H1N1 epidemic reached phase 5. It was agreed that CVTL volunteers would be available for information dissemination if required.
- A staff and volunteer guidance note on personal protection against Influenza A/H1N1 has been developed in Tetun, with 500 copies printed and distributed to all 13 branches.
- Basic personal protective equipment has been purchased locally (used masks already in CVTL stock) and distributed to each branch, with instructions for use.
- The CVTL health coordinator and health delegate participated in the health cluster meeting convened to discuss the Influenza A/H1N1 situation in Timor-Leste. The government has informed the CVTL that at present, there is no need for CVTL volunteers.

Constraints or challenges:

- The health delegate's extended sick leave in February/March resulted in reduced technical support to CVTL and delays in programme implementation.
- An increasing number of CVTL health department projects and partners is creating a complex working environment that has impacted the implementation of the projects. There needs to be increased focus on management capacity building in addition to provision of technical support.
- The rapid turnover of volunteers working on the avian influenza programme: Of 100 volunteers in 2007, there are 18 remaining. This project will be integrated into the community-based health and first aid (CBHFA) programme in the second half of the year, with training for avian influenza activities.
- Village volunteers in Cribas community were reluctant to carry out activities as CVTL volunteers on other programmes in the village received a travel allowance for a training day. This has created tension which needs to be resolved by the national headquarters before there can be effective programme implementation. CVTL has recognized this problem and is working on standardizing its per diem and reimbursement policies.
- Monitoring and evaluation framework and tools have been developed for CBHFA but they have not been socialized as yet to branch staff.
- The heavy workload and competing demands at national headquarters has resulted in a lack of monitoring visits to the districts.
- Lack of funding for first aid in the first half of the year resulted in no activities being carried out. Funding has still not been forthcoming. CVTL were able to carry out other first aid activities with bilateral funding. The health delegate and health coordinator are reviewing future Federation involvement in first aid.
- Available data collected is only from January to April 2009.

Organizational development/capacity building

Programme purpose: To increase capacities of local community, civil society and CVTL as a member of the Red Cross Red Crescent Movement to address the most urgent situations of vulnerability

Programme component 1: Leadership and governance

Expected result: Improved CVTL leadership capacity to develop and implement strategies, to ensure good performance and accountability

Achievements:

CVTL launched Phase II of strategic planning in March, building on Phase I with an internal and external review carried out November/December 2008. Branch coordinators have met and more inclusive branch-level meetings will be organized in all branches in May/June. A full-day workshop with representation from all programmes, including staff, volunteers, and board members, was held 29 May 2009 to begin identifying key issues in programmes and organizational development. The strategic planning process has started later than originally planned by decision of the national society in connection with the timing of the general assembly, but is otherwise on track. A two-day national workshop will be held in July to draft the 2010-2014 strategic plan.

CVTL, with the support of its partners, progressed in its development of policies, procedures and guidelines in priority areas, including staff recruitment, code of conduct, volunteer policy, per diems, and the use of vehicles.

Programme component 2: National management capacity development

Expected result: Ensuring a well-functioning organization with sustainable systems, procedures and staff with a desired level of managerial and technical competence

Achievements:

- A set of 11 policies and procedures forming a 'staff manual' is in draft form, and now going through consultation with senior management.
- Finance team had one course on MYOB and is considering a second course later in the year.
- Action plans were developed for logistics and human resources, although both are constrained by the vacancy in the administration/human resource role. The logistics coordinator is back-stopping several tasks. Some aspects of these will not progress as quickly as originally anticipated, but steady work continues.
- A New Zealand volunteer with marketing and events experience was recruited to work with the CVTL dissemination coordinator on specified tasks including capturing CVTL World Red Cross Day commemoration activities and update the CVTL website. CVTL is exploring possibilities for longer-term technical support and recruitment of a dedicated communications officer to pursue the communications development plan objectives.

Programme component 3: Resource base development

Expected result: Ensuring financial sustainability

Achievements

- A finance working group, led by the finance coordinator and with support of the International Federation, partner national societies, and non-Red Cross partner technical support, has made progress addressing the most pressing finance issues. The finance manual is now in final draft stages, awaiting confirmation of procurement limits. An agreement between partners and CVTL management will see both working together with a focus on improving acquittals processing.
- Mapping of branch fundraising activities first carried out in mid-2008 was updated in February 2009. Branch development planning discussions have led to an agreement to roll-out fundraising training initially in five districts that have demonstrated some fundraising initiative and capacity. Lessons learned will feed back into development of the model for rollout to other branches. The training component is in development, drawing on learning from other national societies and is anticipated to begin rollout in late July.
- Strategic planning process planning incorporates the development of a resource mobilization plan, following approval of the next five-year strategic plan and CVTL has, with help from the country office, expressed interest in involvement in regional initiatives to share learning and develop resource mobilization options.

Programme component 4: Branch structure development

Expected result: Developing a nationwide coverage of grassroots units and services, with the capacity to play a key role in achieving the CVTL mandate.

Achievements

- Volunteer registration cards have been printed after consultation with branches and national programme management, and will be distributed to branches, along with training in June-July.
- Regular meetings of branch coordinators have helped develop the basis of a national multi-year branch development plan, with consensus on key issues among branch and national management including devolution of more planning, management and resource mobilization responsibility to branch level; strengthening internal and external communications effectiveness; considering how the integration of activities can continue to develop.
- A CVTL-recruited volunteer architect from Australian Volunteers International (AVI) began work on 27 April and has made good progress on branch rehabilitation projects long delayed by lack of technical expertise. Four branches have undergone initial assessment visits including meetings with branch rehabilitation sub-committees in each district. A work plan has been developed to approach the project in a standardized way, maximizing the capture of learning for CVTL; streamlining the projects; and ensuring branch sub-committees receive the technical support they need while maintaining involvement and leadership. Further assessment of the first branch is due to start early June, with work on-site targeted for July. Work on other branches will be rolled out two or three branches at a time and grouped geographically.

Programme component 5: Programming development

Expected result: Increasing capacity for programme development and management

Achievements

Cross-programme management planning meetings were re-introduced in May with the first programme coordinators' planning meeting, and a commitment was made to continue in a similar vein, including joint branch-national management planning meetings to further the CVTL branch development plan.

Communications training targeting non-communications staff is incorporated in the communications development planning to be pursued in the second half of the year.

Two CVTL youth Red Cross coordinators will attend the Solferino Youth Red Cross celebrations.

Constraints or challenges:

An ongoing constraint for CVTL is the pace of growth in activity that tends to push ahead of the pace of growth in staff capacity and skills. Programmes continue to have problems with slow rates of implementation, weak communication and inadequate coordination as management is stretched too thinly. It also limits staff availability to engage in the professional development activity that is needed in order to address this issue.

With the support of its partners, CVTL is making an effort to address this by ensuring capacity building needs are acknowledged in and activities written into budgets and work plans. The International Federation is helping to advocate for and coordinate partner support for this.

The weight of work and responsibility focused on senior management remains an issue of concern. Delegation of responsibility within the national office and from national to branch, and improved coordination and oversight capabilities will be necessary to maximize organizational effectiveness.

Working in partnership

- An integration agreement was signed between the International Federation and Austrian Red Cross, effective 1 April 2009.
- There is a good working relationship with ICRC who provides support to CVTL's dissemination and tracing programmes and more broadly, on cooperation and coordination issues.
- Close working relationships have been developed with multilateral support from Australian, Finnish, Japanese, New Zealand and Norwegian Red Cross partners. Regular visits from technical and regional representatives are welcomed as they help develop a good understanding of the role their support plays as well as some of the challenges that exist with CVTL capacity, local conditions, and other factors that impact programme implementation. Good cooperation has been established between CVTL, International Federation, Austrian Red Cross and Finnish Red Cross on developing a three-year approach to community-based health and first aid (CBHFA) with capacity building.

- Bilateral partners Austrian, Australian, Japanese and Spanish national societies have a good cooperative partnership with CVTL. Operational updates through fortnightly meetings and co-location provide good opportunities for regular ad hoc discussions. There is a resolution to discuss future plans in an open and clear manner so that CVTL has the opportunity to discuss and consult more broadly as required. The Austrian and Spanish Red Cross have contributed to branch rehabilitation and organizational development support while CVTL health staff, Japanese Red Cross and the International Federation have worked closely on developing the first aid master trainer programme. The health delegate also had input into the Japanese Red Cross 2010 plans and budget.
- CVTL's coordination with the government is evolving. The ministry of health is interested to develop a memorandum of understanding with CVTL. A small nutrition department pilot project in Manatuto to assist with a supplementary feeding programme has been proposed to initiate this collaboration. There is commitment to further develop coordination at district and national level in order to focus and guide service delivery where there is a good alignment of objectives. In May, there was good collaboration with the ministry of health/WHO on a public health campaign.
- CVTL is a member of the national disaster management committee and makes a recognized contribution to this sector. The national society is also a member of a national level disaster risk reduction working group. CVTL received funding from the government for emergency stocks and were twice requested to engage in emergency response.
- The Bacau branch hosted a district disaster management committee formulation meeting. At the request of the government, the branch also facilitated training sessions on basic disaster management for potential members of sub-district disaster management committees.
- In terms of branch cooperation:
 - Suai branch worked closely with Oxfam for community-based disaster preparedness;
 - Aileu branch with UNICEF, Plan International and the ministry of agriculture for livelihood options;
 - Bacau branch with Christian Relief Society and Austcare for risk reduction; Bacau branch regularly attended disaster management committee meetings and worked in coordination with AustCare and local non-governmental organizations;
 - Oecussi branch is a member of the disaster management committee and has worked with Concern Worldwide; and,
 - Ainaro branch staff carried out a survey of a flood-affected area together with World Food Programme staff.
- Application for International Federation membership of the humanitarian country team (formerly the Inter-Agency Standing Committee) is pending.
- CVTL collaboration with non-Red Cross partners is well established and increasingly includes utilizing volunteers e.g. through Australian Volunteers International (AVI) as an efficient way to access technical support.

Contributing to longer-term impact

DM and Health activities directly contribute to Millennium Development Goals and targets. Increased access to water, sanitation and health and livelihood services are directly linked to these and the Government's national development goals.

The tetanus toxoid (TT)/measles campaign is ongoing nationally and actual numbers of children/young adults immunized or given Vitamin A are still being determined. However, CVTL's social mobilization services were delivered as contracted and should significantly improve vaccination rates. Some areas for improvement were noted with the ministry of health's delivery of vaccination services and these have been fed back to the WHO.

Gender equity has been taken into account in recruitment of new branch coordinators with a stated policy to seek women candidates, although this has been challenging with a tendency for few women to apply for these roles. Equal access for women to community-based water and sanitation interventions has been identified as needing more focus.

Looking ahead

Focus in the upcoming months will be emphasized in the following:

- The health programme is behind schedule. Priority first aid activities will be conducted under a reduced International Federation programme (unfunded) and the Japanese Red Cross programme; CBHFA activities will be focused in two districts where funding is most likely to be continued and other districts will be prioritized as funding allows.

- A concept note prepared for the HIV peer education project with CHF 63,000 (approximately CHF 40,000 unfunded)
- Community-based first aid (CBFA) is budgeted for a full programme of activities but is dependent on funding.
- With organizational development learning consolidated in the first half of the year and growing capacity in CVTL to take a strong lead in determining objectives for partner support, planning for the second half will focus resources on the areas of highest priority and greatest potential results. The organizational development unit is working with CVTL and its other partners to identify ways to bring in additional technical support for specific areas of development. The expected result is more effective and provides better focused development for CVTL. Branch development is a top priority and increasing momentum is expected in this area.
- CVTL with International Federation organizational development (OD) support has been successful in an application for Specific OD Support (SOS) through the capacity building fund (CBF). This will support planned activities in strategic planning, branch resource mobilization capacity development and branch governance development from May 2009.

How we work	
<p>The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".</p>	<p>Global Agenda Goals:</p> <ul style="list-style-type: none"> • Reduce the numbers of deaths, injuries and impact from disasters. • Reduce the number of deaths, illnesses and impact from diseases and public health emergencies. • Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability. • Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.
Contact information	
<p>For further information specifically related to this report, please contact:</p> <ul style="list-style-type: none"> • Cruz Vermelha de Timor-Leste: Isabel Amaral Guterres, secretary general; email: sec-gen@cvtl.tp; phone: +670 332 1688; fax: +670 331 0301 • Federation country office, Timor-Leste: Valerie Hunnam, head of country office, email: valerie.hunnam@ifrc.org; phone: +670 332 2778; fax: +670 331 0301 • Federation Southeast Asia regional office, Bangkok, phone:+662 661 8201; fax: +662 661 9322 <ul style="list-style-type: none"> ○ Alan Bradbury, head of regional office, email: alan.bradbury@ifrc.org; ○ Andy McElroy, programme coordinator, email: andy.mcelroy@ifrc.org • Federation Asia Pacific zone office, Kuala Lumpur: <ul style="list-style-type: none"> ○ Jagan Chapagain, deputy head of zone; email: jagan.chapagain@ifrc.org; phone: +60 3 9207 5700; fax +60 3 2167 0670; ○ Penny Elghady, resource mobilization and PMER coordinator, email: penny.elghady@ifrc.org; phone: +603 9207 5775; fax: +603 2161 0670 <p>Please send all pledges of funding to zonerm.asiapacific@ifrc.org</p> 	

[<financial report below; click to return to title page>](#)

International Federation of Red Cross and Red Crescent Societies

MAATP001 - Timor-Leste

Mid-year report 2009

Selected Parameters	
Reporting Timeframe	2009/1-2009/6
Budget Timeframe	2009/1-2009/12
Appeal	MAATP001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL
A. Budget	471,931	552,106	437,283		225,279	1,686,599
B. Opening Balance	615,143	264,701	170,799		11,361	1,062,005
Income						
<u>Cash contributions</u>						
Australian Red Cross	92,885					92,885
Capacity Building Fund			30,923			30,923
Danish Red Cross					1,246	1,246
Danish Red Cross (from Danish Government)					17,927	17,927
Finnish Red Cross		3,159	3,159			6,318
Finnish Red Cross (from Finnish Government)		17,900	17,900			35,801
Germany Red Cross		14,818				14,818
Japanese Red Cross			21,947			21,947
New Zealand Red Cross		60,943	66,011			126,954
C1. Cash contributions	92,885	96,820	139,941		19,174	348,820
<u>Outstanding pledges (Revalued)</u>						
Australian Red Cross	-94,927	856				-94,070
Australian Red Cross (from Australian Government)					113,166	113,166
Finnish Red Cross		2,085	2,085		7,343	11,513
Finnish Red Cross (from Finnish Government)		11,816	11,816		41,608	65,240
New Zealand Red Cross		-60,963				-60,963
C2. Outstanding pledges (Revalued)	-94,927	-46,205	13,902		162,116	34,886
<u>Inkind Personnel</u>						
Finnish Red Cross					22,440	22,440
New Zealand Red Cross		26,400	26,400			52,800
C4. Inkind Personnel		26,400	26,400		22,440	75,240
C. Total Income = SUM(C1..C5)	-2,042	77,015	180,242		203,730	458,946
D. Total Funding = B + C	613,102	341,717	351,041		215,091	1,520,950
Appeal Coverage	130%	62%	80%		95%	90%

II. Balance of Funds

	Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL
B. Opening Balance	615,143	264,701	170,799		11,361	1,062,005
C. Income	-2,042	77,015	180,242		203,730	458,946
E. Expenditure	-327,182	-176,903	-141,740		-48,519	-694,343
F. Closing Balance = (B + C + E)	285,920	164,814	209,301		166,572	826,607

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III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance A - B
		Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination		
A							B	A - B
BUDGET (C)		471,931	552,106	437,283		225,279	1,686,599	
Supplies								
Shelter - Relief		895					895	-895
Construction Materials	101,540	505					505	101,035
Clothing & textiles	575	2,220	1,776				3,995	-3,420
Food	8,970							8,970
Seeds,Plants	1,610	33					33	1,577
Water & Sanitation	12,650	4,705	5,223				9,928	2,722
Medical & First Aid	4,600	80					80	4,520
Teaching Materials	3,896							3,896
Utensils & Tools	1,576							1,576
Other Supplies & Services	6,608	94,244					94,244	-87,636
Total Supplies	142,025	102,681	6,999				109,680	32,345
Land, vehicles & equipment								
Land & Buildings	40,250							40,250
Vehicles	11,000	4,022					4,022	6,978
Computers & Telecom	2,300	2,076					2,076	224
Office/Household Furniture & Equipm.		5,079	1,135			771	6,986	-6,986
Others Machinery & Equipment	2,601							2,601
Total Land, vehicles & equipment	56,151	11,177	1,135			771	13,084	43,067
Transport & Storage								
Storage		132	228				360	-360
Distribution & Monitoring	3,519	528					528	2,991
Transport & Vehicle Costs	78,002	12,884	11,431	6,282		-4,911	25,687	52,315
Total Transport & Storage	81,521	13,543	11,660	6,282		-4,911	26,575	54,946
Personnel								
International Staff	576,937	54,982	42,949	47,944		82,478	228,353	348,584
National Staff	39,688	15,234	10,872	10,872		-22,484	14,494	25,194
National Society Staff	175,216	36,962	29,377	24,807		76	91,222	83,994
Consultants	1,383	8,762	11,490			511	20,763	-19,380
Total Personnel	793,224	115,940	94,688	83,623		60,581	354,832	438,393
Workshops & Training								
Workshops & Training	173,459	3,554	8,614	2,235		-2,541	11,863	161,596
Total Workshops & Training	173,459	3,554	8,614	2,235		-2,541	11,863	161,596
General Expenditure								
Travel	55,368	17,526	17,339	16,276		-36,344	14,795	40,573
Information & Public Relation	60,219	648	1,661	489		410	3,208	57,011
Office Costs	169,695	7,082	1,926	3,623		12,154	24,786	144,909
Communications	32,916	5,787	3,309	2,600		13,738	25,435	7,481
Professional Fees	2,301		34				34	2,267
Financial Charges	163	117	10	4		2,976	3,107	-2,944
Other General Expenses	9,123	4,815	4,281	2,938		328	12,362	-3,239
Total General Expenditure	329,785	35,976	28,559	25,929		-6,737	83,727	246,059
Contributions & Transfers								
Membership Fees	805							805
Total Contributions & Transfers	805							805
Programme Support								
Program Support	109,629	22,539	10,833	7,718		1,921	43,011	66,618
Total Programme Support	109,629	22,539	10,833	7,718		1,921	43,011	66,618
Services								
Services & Recoveries		199					199	-199
Total Services		199					199	-199

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III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination		
A							B	A - B
BUDGET (C)		471,931	552,106	437,283		225,279	1,686,599	
Operational Provisions								
Operational Provisions		21,572	14,414	15,953		-565	51,374	-51,374
Total Operational Provisions		21,572	14,414	15,953		-565	51,374	-51,374
TOTAL EXPENDITURE (D)	1,686,599	327,182	176,903	141,740		48,519	694,343	992,256
VARIANCE (C - D)		144,750	375,203	295,543		176,760	992,256	