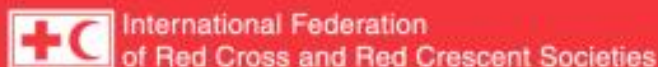


# Mid-Year report



## West Africa Sahel+ Region

Appeal No. MAA61004

31 August 2010

This report covers the period 01/January/2010 to 30/June/2010.



Polio campaign in the Gambia/IFRC

### In brief

#### Programme outcome:

In line with the [Strategy 2020](#), the IFRC Sahel Regional Representation' disaster management (DM) programme effectively supports Sahel National Societies (NS) programming focusing on disaster risk reduction (DRR) including adaptation to climate change; early warning system development; disaster preparedness and response, and reporting on emergencies in a timely and appropriate manner. The IFRC's Sahel plus (Sahel+) health programme framework is based on the S2020 Strategic Aim 2: enable healthy and safe living, which entails supporting NS in developing and establishing sustainable community-based health programmes and effective response to health emergencies. The health and care programme thus contributes to healthy and safe living conditions through projects on addressing issues related to community health, emergencies, malaria prevention and control, as well as HIV and AIDS.

As a cross cutting element of the three S2020 strategic aims, the organisational development (OD) programmes aims to develop the capacity of the local communities, the civil society and the Red Cross/Red Crescent staff to address the humanitarian challenges faced by the most vulnerable people..The focus in on achieving key activities including framework for organisational development programmes in the Sahel+ region in 2010-2011; improved NS legal base; improved NS leadership capacities; improved NS professional capacities; improved NS capacity in programming planning, performance measurement, tracking and reporting; improves NS volunteer management systems; and improved NS financial sustainability.

#### Programme(s) summary:

The IFRC Sahel Regional Representation office covers nine countries: Burkina Faso, Cape Verde, Gambia, Guinea Bissau, Guinea, Mali, Mauritania, Niger and Senegal. Sahel NS' priorities for 2010-2011 are streamlined to be in line with S2020 strategic aims whilst guided by the [Johannesburg Commitment](#) of 2008 which follow up on [Algiers Plan of Action](#) and [ARCHI 2010](#).

The DM department provided technical support to community-based DRR and climate adaptation work, as well as assisting NS responding to food insecurity crisis. Based on the health and care strategy for West and Central Africa, the Algiers Plan of Action and the Johannesburg Commitment, the Sahel NS focussed on supporting the improvement of health status of mothers and children, malaria prevention, clean water supply and provision of sanitation facilities, preparedness for and response to health emergencies. With support of the IFRC, the Sahel NS have also been involved in social mobilization activities during mass vaccination campaigns and the distribution of long lasting insecticide treated nets (LLINs). As part of the [Framework for Action](#), HIV and AIDS has been a priority of National Societies, thus enhancing activities that contribute to reducing the spread and impact of the pandemic. Burkina Faso and Guinea are part of the Global Alliance on HIV and have been focusing on mobilising resources to support the scale-up of the HIV and AIDS activities. The OD activities were focused on developing and strengthening Sahel NS' structures both in terms of governance and management, as well as improving the capacities in service delivery to the most vulnerable according to the S2020. The OD actions aimed to facilitate the scaling-up of activities by providing technical support in programme, development and promoting integrated approach to programming of some related project components. Guidance has been provided to NS on effective volunteer management system. Through the Spanish Government funding, institutional support to Sahel NS has been improved. This includes finance development and establishment of working standard procedures that ensures sustainability. The OD department continues encouraging and facilitating knowledge sharing through peer-to-peer support and experience sharing with other regions.

**Financial situation:** The total (2010) budget is CHF 2,221,649 (USD 2,160,296 or EUR 1,692,685), of which CHF 1,880,186 (85 per cent) covered during the reporting period (including opening balance). Overall expenditure during the reporting period was CHF 281,178 (13 per cent) of the budget.

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

**No. of people we have reached:**

Sahel Regional Representation Office provides technical support to Red Cross And Red Crescent National Societies in the region - Burkina Faso, Cape Verde, Gambia, Guinea Bissau, Guinea, Mali, Mauritania, Niger and Senegal. In total more than 37,420 talk sessions of sensitization have been held and have reached more than 76,190 persons with over 19,110 men 34,330 women and 22,750 children.

**Our partners:**

During the first half of 2010, IFRC Sahel Regional Representation worked closely with the following Movement partners that are present in the region: Canadian, Swedish, Japanese, Spanish and French Red Cross Societies, as well as ICRC. Outside the Movement, IFRC regional representation worked with institutions such as the USAID, ECHO, WHO, UNICEF. Local authorities and government partners including the Department of Health, Department of Social Welfare and Development, National Disaster Coordinating Councils, National Food Authorities, Overseas Workers Welfare Administration, and local government units. The Sahel National Societies also worked with civil society organizations.

In response to the Niger Food Crisis, a good coordination and close collaboration have been set up with Red Cross and Red Crescent Movement partners present in the country: the International Committee of the Red Cross (ICRC), Qatar Red Crescent and the French, Irish and Spanish Red Cross Societies. The Climate Centre provides financial and technical support to DM activities

The major contributors to this annual appeal are the Canadian, Japanese, Swedish, and Norwegian Red Cross Societies, USAID, and ECHO. The Bill and Melinda Gates Foundation contributed largely to the polio rounds activities. Also contributing to the work of National societies on a bilateral basis are Danish, Spanish, Canadian, Belgium, and French Red Cross Societies, and ICRC. The main partners of the OD programmes are the Danish, Canadian, Icelandic, Spanish, Japanese, and Swedish Red Cross Societies, as well as the Spanish and the Irish governments, ICRC offices in Dakar, Guinea and Mauritania, and the Qatari Red Crescent.

## Context

The nine countries of the Sahel region are among the poorest in the world. The region is also prone to flooding whilst the countries are facing multiple hazards related to climate change. The humanitarian situation and the level of vulnerability are challenging the efforts made by the IFRC to support the NS in assisting the populations in terms of disaster management and risk reduction. Although scaling-up disaster response capacities of NS is a priority in the Sahel region, DRR risk at the centre of the new approach to risk management.

Food insecurity is one of the greatest challenges in the Sahel region. Precarious weather and environmental conditions, in addition to consecutive food crises in most of Sahel countries caused food shortages. The most severe food insecurity crisis during this reporting period is in Niger. Among other factors contributing to the food crisis, the last rain season was poor, erratic and although late the season was very short. According to the Niger government, the harvest was very low and led to a 31 percent decrease in crop production compared to last year (410,000 tonnes less). The most affected regions are Diffa (328,781 people), Zinder (1,707,695) and Tahoua (1,983,452). The same regions suffered from the food insecurity crisis in 2005.

As far as preparedness on climate change is concerned, the regional seasonal forecasts has predicted a higher than normal rainfall over Senegal, South West Mauritania, The Gambia, Guinea Bissau and northern part of Guinea Conakry. Based on last year's experience, this prediction is expected to result in significant flooding in some parts of the country affecting communities whose health and livelihoods have been weakened and yet heavily dependent on agro-pastoral activities. The DM department has supported NS to develop mitigation and preventive measures for the looming disasters.

Most of Sahel countries such as Guinea-Bissau, Guinea, and Niger have been subjected to violence, conflict and political crises, which resulted in instability, insecurity and social economic crisis. The consequences of climate change with recurrent droughts or floods coupled with the limited resources make their already poor populations highly vulnerable

The West Africa Sahel countries not only share some of the world's worst health indicators but also have underlying poverty and under-development. The little progress made towards achieving the Millennium Development Goals (MGDs) are threatened by rising food prices that deplete even more vulnerable groups and cancel the success registered in the fight against child malnutrition. Moreover, the Sahel sub region is specially affected by the consequences of climate change whose effects are increasingly impacting the economies and livelihoods of vulnerable groups though recurrent drought and floods.

The poor human development is manifest in the high infant and child mortality as well as high maternal mortality rate. Despite the success in infant mortality for the children under five years, the number of deaths of children under five years is still unacceptable in the Sahel countries. In 2006, 167 children out of 1,000 live births, died before their fifth birthday (MDGs Report 2008). This overview of infant and maternal mortality is compounded by emergency epidemics outbreaks such as meningitis, polio, measles and cholera that make children paying a heavy burden in Burkina, Mali, Senegal, Niger, Mauritania and Guinea. At the same time, HIV infection is concentrated around specific groups (men having sex with men, sex workers) with prevalence rates up to 20 percent and the level of socio-professional categories (soldiers, miners, fishers...) the prevalence is often above 3 percent.

In addition to the health challenges, the threat of human pandemic is more real than ever. Experts worldwide agree that it is imminent. The threat thus sparing no country and Sahel countries are among the most vulnerable. There is also a worsening of health status among communities characterized by inequalities between girls and boys to access educational and reproductive health services because of cultural and religious barriers that clearly affect gender issue.

In this context, the NS of the Sahel + sub region have been constrained by lack of resources, which has a direct impact on programming, financial sustainability and capacity to serve the most vulnerable people. The limited resources have contributed to the low level of implementation of planned

programmes, and have affected the planning processes. In addition, the lack of resources has affected the volunteer management systems, whilst some NS are still struggling to improve their legal base. Governance and management development remained a challenge for some NS (Governance and leadership issues, lack of human and financial resources, and lack of partners). Since 2009, the OD department efforts were directed towards developing NS human resources and ensuring that each NS has a strategic plan. During the reporting period, the OD department managed to assist in addressing some of the NS governance and management issues. .

## Progress towards outcomes

### Disaster Management

**Programme Component:** Improved self-reliance of individuals and communities to reduce their vulnerability to public health emergencies and disasters.

**Outcome:** Improved risk reduction and disaster preparedness within National Society that builds safer and resilient communities.

**Outcome:** Vulnerability Capacity Assessment activities (VCA) are conducted in targeted NS and community-based disaster mitigation project conducted and documented

#### Achievements

The African Centre of Meteorological Application for Development (ACMAD) predicted a high probability flooding in the Sahel Region for the 2010 rainy season. To minimize the impact of floods, the NS carried out a capacity assessment before the development of plans of action for preparedness, response and recovery programme. With the support of the IFRC in Gambia for instance, the DRR and Climate Change Adaptation (CCA) five years programme was started by developing contingency plans for Kerewan and Bumtokon communities. These plans outline to the communities the risks and proposed solutions for mitigating the impact, reducing the risk and adapting to climate change. In Mali, a national workshop on climate change adaptation was held where Mali Red Cross exchanged and shared tools, methodologies, experiences, good practices and lessons learned and on strengthening partnerships with government ministries, the UN agencies, and other non-governmental organizations in DRR and CCA.

**Outcome:** The culture of risk reduction is promoted in schools in the framework of the following quotation: “risk reduction begins at school” and knowledge related to the most frequent hazards increased among vulnerable groups in targeted areas.

#### Achievements

The International Federation initiative for risk reduction at schools rely on the promotion of proven risk reduction activities inclusive of the reactive measures often undertaken by communities to deal with hazards. In Guinea Conakry a risk reduction programme at school has been initiated to improve students’ learning conditions through the use of solar energy project, including keeping girls in school and also fighting against fire hazards. These students are selected in secondary and high schools in three prefectures in Guinea. Two solar panels will be installed in each prefecture, and a total of 162 students including 60 boys and 102 girls will directly benefit from the solar lamps.

**Programme Component:** Reduce the risk of food insecurity and improve the living conditions of most vulnerable populations.

**Outcome:** Food security community-based projects are implemented and beneficiaries and Red Cross/Red Crescent volunteers are trained to achieve project objectives in Mauritania, Niger, and Guinea. The target groups are communities affected by food insecurity, and volunteers at Red Cross branch level.

#### Achievements

During the reporting period, the Sahel DM unit provided technical support in food security operation in Niger. It follows that Niger has been facing food shortages worsened by a nutritional crisis, especially among the children under five years old. According to the last statistics published in early June 2010 by the Early Warning System department of the Niger Government, more than 2,006,164 people are severely food insecure, 1,924,906 are moderately food insecure and 2,217,953 in a risk of food

insecurity. As soon as the government published the information on the vast food shortage in Niger, the IFRC Sahel Regional Representation supported the Red Cross Society of Niger (RCSN) in developing a plan of action and a clear strategy on reducing the impact of the food crisis. An appeal of almost one million Swiss francs (CHF 986,862, USD 932,409 or EUR 677,278) was launched on 17 March, 2010 to assist 300,000 people affected by the food shortage. The appeal is a response to an international call from the Niger government and the RCSN request to the IFRC for technical and funding support. The RCSN plan of action included food security and nutrition activities including cash-for-work, food aid distribution of food and provision of seed and strengthening the capacity of the nutrition and health centres.

The “cash for work” project has been implemented in 61 villages in Niger, and its aims to increase the resilience of the most vulnerable people and mitigate the impact of food insecurity. While providing cash to vulnerable people, they in turn provide manpower for improving the environment for an increased agricultural production (anti-erosion and water harvesting measures). Food aid distribution has been achieved with the help of the Red Cross volunteers in collaboration with partners. In collaboration with the WFP, RCSN provided food items to more than 12,000 beneficiaries in Zinder. The seeds purchased with the support of the IFRC, have been distributed to 120 villages. More than 3,400 families (around 23,000 people) have been reached.

The RCSN volunteers are assisting several health centres to provide appropriate nutritional services to the affected communities. A total of 60 volunteers have been trained on malnutrition detection and delivery of messages on nutrition and health.

### Constraints or Challenges

The main constraints are related to: the lack of NS capacities in climate change management; the partners’ lack of information about the Red Cross Movement capacities in DRR and CCA. However, the workshops such as the one held in Mali contributed to strengthening the capacities in DRR and CCA, whilst increasing understanding the tools, methodology, experience, good practices and lessons learned on community-based climate change adaptation developed by the Red Cross Movement.

## Health & Care

### Programme Component: Community-based health programmes and First Aid

**Outcome:** Improved Maternal, Newborn and Child Health (MNCH) through NS community based activities including safe motherhood and child health initiatives, vaccination and nutrition activities in the Gambia, Mali and Senegal.

**Outcome:** Increased capacity of communities and volunteers who are prepared and are able to respond to first aid needs and identify health priorities in their communities. The concerned countries include all Sahel NS that will be trained on CBHFA. The Gambia Red Cross Society, Mali Red Cross, Burkina Faso Red Cross Society and the Red Cross Society of Guinea will start running pilot project on CBHFA. The target groups are communities and volunteers.

**Outcome:** Voluntary non remunerated blood donation: The number of voluntary non remunerated blood donations has increased in Gambia, Burkina Faso and Guinea among the children under five, pre and post delivery women, HIV and malaria infected, and the victims of accidents.

**Outcome:** Malaria: The protection of vulnerable populations against malaria has increased in Burkina Faso, Gambia, Mali, Niger and Senegal among children under five, pregnant and breast feeding woman, PLWA and other risk groups.

**Outcome:** Red Cross/Red Crescent support to Polio and measles campaigns: NSs’ involvement in social mobilization during national initiatives to eradicate polio and reduce measles morbidity and mortality is ensured by the mobilization of volunteers in Burkina Faso, Guinea, Mali and Niger among children under five and risk groups according to MoH’s decision.

### Achievements

The Sahel regional health programme focused on providing support to the NS on community-based health projects and health emergencies. The work plans for providing technical support in the priority projects such as community-based health and first aid (CBHFA), malaria, water and sanitation; human pandemic preparedness have been defined.

The Sahel NS as auxiliary to the local authorities played a key role in assisting the Ministries of Health (MoH) in participating in Polio synchronized campaigns, social mobilization activities during meningitis outbreaks across the region.

The mother and child health project of the Tintane local committee in Mauritania was effectively implemented and had positive impact within the communities reached. Community health volunteers (CHVs) were recruited and trained in Tintane (Mauritania), Gambia and Senegal. In Tintane, they undertook health promotion activities, reaching more than 4,500 households. In total 37,422 talk sessions on sensitization have been held and reached 76,194 persons (19,113 men, 34,331 women and 22,750 children).

#### **Programme Component 1: Public Health Emergency**

**Outcome:** Access to preventive health services has improved in targeted areas in Burkina Faso, Gambia, Mali, Niger, Guinea Bissau and Guinea.

**Outcome:** Avian and Human Pandemic Influenza: Programme continuing actions to prevent and contain avian influenza outbreaks through community-based health programme and education action are ensured in Mali and Senegal. The target groups are National Societies and vulnerable communities.

**Outcome:** Increasing pandemic preparedness by contingency plans definition for service continuity during pandemic, and preparation of response actions during pandemic outbreak are effective in Mali and Senegal. The target groups are National societies and vulnerable communities.

#### **Achievements**

The Sahel region experienced a number of health emergencies since the beginning of the year. For example, Burkina Faso faced severe meningitis outbreaks, whilst Senegal experienced polio outbreaks that justified at least five polio immunization campaigns. The Senegalese Red Cross actively participated in all polio immunization campaigns by mobilizing its volunteers to carry out social mobilization activities. Niger, Mali, and Burkina Faso Red Cross Societies also participated in their local the polio immunization campaigns.

Meningitis outbreak was recorded in Burkina Faso and in response to the request for technical and funding support, the IFRC provided Burkina Faso Red Cross Society with Disaster Relief Emergency Fund (DREF): <http://www.ifrc.org/docs/appeals/10/MDRBF009DREF.pdf>

The regional health team with Geneva support also followed up and provided information on different health crises within the region and used forums of the health working group and other regional contacts to advocate for NS participation in health interventions. The technical advice of the regional team was sought during specific outbreaks, including Dengue Fever in Cape Verde [http://www.ifrc.org/cgi/pdf\\_appeals.pl?09/MDRCV001do.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?09/MDRCV001do.pdf)

#### **Programme Component: HIV and AIDS**

**Outcome:** Vulnerability to HIV and its impact are reduced through the prevention of further infections, the support to HIV affected people and the reduction of stigma and discrimination. Burkina Faso, Gambia, Guinea and Senegal are targeted, and the beneficiaries will be the persons infected and affected by HIV, orphans, risk groups (soldiers, sex workers, and MSM).

#### **Achievements**

The IFRC Sahel Regional Representation continued to support HIV and AIDS project activities in Guinea and Burkina Faso that are members of the Global Alliance on HIV. Red Cross volunteers trained as peer educators undertook HIV and AIDS awareness campaigns on HIV prevention and anti stigma and discrimination.

#### **Constraints or Challenges**

The health and care initiatives to support the NS were constrained by limited funding resources. Resources are still required to supporting scaling up of health projects at NS level, and to support the technical support provided by the IFRC Sahel Regional Representation Office.

## **Organizational Development**

## **Programme Component: Improving the National Societies legal base**

**Outcome:** Updated statutes are available in Senegal, Mauritania and Mali.

### **Achievements**

In the last two years, the IFRC in collaboration with the ICRC had been assisting NS such as the Senegalese Red Cross (SRC) in solving institutional challenges. After an assessment of the situation, and recommendations made by partners, the NS started revising its Statutes in September 2009, later adopted at the General Assembly (GA) held on 16 March, 2010 after the approval of the governing board, the technical departments of state and the [Joint Commission](#). Further to the adoption of statutes, the SRC started elections for board members at regional level and for the central committee members. This process will lead to the next GA planned for 12 September 2010. This GA will elect a new central committee and a new President for the NS. In recognition of this critical process and the NS willingness to make change, the IFRC convened a coordination meeting with all partners present in Dakar (ICRC, French, Danish, Canadian, and Spanish Red Cross Society) to discuss the bases for a new cooperation framework with the SRC.

Mali Red Cross (MRC) has proceeded to revise its Statutes in April 2010 and the new draft has been shared with partners and approved by the central committee.

In Mauritania the OD resource person deployed to support the strategic planning process has made recommendations on institutional development. One of the main recommendations was about the revision of the Statutes that was last reviewed about 25 years ago. A commission composed of ICRC, IFRC, PNS and the Mauritania Red Crescent chaired by the first vice-president has been set up to revise the statutes and submit a draft to the central committee by end of August 2010. The first meeting of the commission was held on 17 June 2010. The Sahel Regional Representation OD team has shared reference documents, such as SRC newly adopted Statutes and guidelines on NS statutes revision from the Joint Commission with Mauritania Red Crescent.

## **Programme Component: Improving Sahel NS professional capacities**

**Outcome:** Adequate and trained staff is available for NS in compliance with human resources (HR) best practices and regulations in Guinea and Mauritania.

### **Achievements**

The organisational restructuring plan developed with the technical support of the IFRC and adopted in 2009 by the NS is still under implementation in Guinea. Regular coordination meetings were held to monitor and coach the NS in the process following the resignation of the former Secretary General in September 2009. The last coordination meeting was held on 19 February 2010 where the IFRC was represented by the Resource Mobilisation (RM) manager. The reports indicate tremendous achievements on the process, through a fundraising strategy is need to mobilise resources to support salaries for HR/Administration and logistics for the two years. The new Secretary Executive was appointed early 2010, with the support of the IFRC Sahel Regional Representation and the recruitment process coordination team including IFRC, ICRC, Danish Red Cross and the NS.

The OD support to Guinea Red Cross in the form of finance development continues through the IFRC finance team coaching of the financial and administrative manager (responsable administratif et financier – RAF) recruited in 2009. The IFRC has over handed over the process to Danish Red Cross that is supporting the salary for the RAF in 2010. The recruitment of the new Secretary General for Guinea Red Cross was completed in May, 2010. The Danish Red Cross has also pledged to support part of the salary cost for this position. The IFRC will provide leadership training and some office equipment including a laptop computer. The Irish Government has providing funding support through the IFRC to two new positions in Guinea Red Cross. The NS has also recruited in June 2010 DM, RFL and Communication focal points whose salaries will be supported by ICRC and an administrative assistant paid by the Guinea Red Cross. The new recruited staff will be provided with computers and other office equipment donated by the IFRC Secretariat.

An IT mission was sent to Guinea from 7 to 18 February 2010 to provide the NS with technical support on the use of IT and communication equipments. By the end of the mission, two computers

were purchased and 16 were repaired/rebooted, four internet flash discs purchased, and a Motorola VHF repeater installed. This mission aimed to make the National Society functional.

The Regional programme for institutional development of West African National Red Cross Societies of Morocco, Senegal, Mali, Cape Verde, Mauritania, Gambia, Guinea Bissau, Guinea Conakry, and Niger funded by Spanish Government to strengthen their response capacities within the framework of their humanitarian mandate ended in December 2009. A final evaluation of the IDWARC programme started in April 2010 and the evaluation team visited the nine countries from 26 April to 29 May. The evaluation report was submitted to IFRC on 15 June. A debriefing session with IFRC Secretariat in and Spanish Red Cross was held on 10 June 2010 in Geneva.

The draft final report that should have been submitted on 30 June will be finalised in September 2010. Recommendations will be shared with the stakeholders and donors and it is envisaged that the programme continues in some Sahel countries for 2011.

The Sahel OD manager visited Niger Red Cross in the framework of the food crisis operation to assess the NS capacity development needs in disaster response operations. The identified needs were incorporated into the revised emergency appeal (MDRNE005) issued on 29 June 2010.

#### **Programme Component: Improving National Societies programming and planning**

**Outcome:** Strategic Plans are reviewed in Mali and Mauritania

Mali Red Cross shared the evaluation report of the 2005-2008 strategic plan in January 2010 with partners and IFRC Regional Representation departments (Health, DM, and Migration) for further input. Consequently, the strategic planning workshop was held from 9 to 13 March 2010 and was supported by the IFRC. This workshop was attended by representatives from the IFRC, ICRC and resident PNSs, the technical departments of state and several other partners. From the NS all levels of the organisation including regional programme coordinators and Presidents of all branches were represented. The workshop was facilitated by a consultant supported by the Canadian Red Cross and the IFRC team as co-facilitators.

In Mauritania, the report for VCA and SWOT analysis carried out in 2009 has finalised shared with the IFRC regional departments for consultation before the next planning process.

Nevertheless, the main challenge was the result of the Government's Audit to the Mauritania Red Crescent, which is a stumbling block to the process. Another problem concerned the fact that staff members recruited in 2009 to support the strategic plan process are no more in place, the RAF resigned while the food security officer has joined the government. The NS has no finance officer and food security focal point whose work is currently being done by the health coordinator. However, the IFRC support to Mauritania Red Crescent strategic planning process continued and the terms of reference have been developed and submitted to the NS for them to accept the deployment of a new OD resource person by 10 May. IFRC OD resource person deployed for support to strategic planning process has completed the mission and debriefed on 31<sup>st</sup> May 2010. A plan of action has been developed based on the recommendations. As soon as funds are available at IFRC regional office, the gap in technical staff will be filled.

Guinea Bissau and Gambia Red Cross Societies have expressed their need for IFRC technical support in their next strategic planning workshops, scheduled this year. The IFRC team however, is waiting for evaluation reports on the programmes implemented in the framework of the previous strategic plan that ended in 2007 for Guinea Bissau and 2008 for the Gambia, as reference documents in the new process.

Mali Red Cross has organized a partnership meeting 16-18 June, 2010 in Bamako and the newly revised strategic plan was the framework for cooperation. It was attended by the Sahel Resource mobilisation officer on behalf of the OD team. A Cooperation Agreement Strategy (CAS) process has been initiated in Mali for a formal partnership, and this meeting was the starting point for the CAS process developed in Mali in coordination with PNS and ICRC. The outcome of the meeting will be approved by the Mali Red Cross governing board governance.

### **Programme Component: Improving NS volunteer management systems**

**Outcome:** Updated volunteering policy regulating volunteers insurance, limitation of volunteers work time, motivation system (benefit) and functioning data base are available in the NS.

#### **Achievements**

Clear guidance on volunteering management has been provided to NS, especially SRC that also received reference documents and technical guidance for their Volunteering Policy. A commission has been established to work on the development of the NS Volunteering Policy. Gambia Red Cross has also been supported by IFRC to draft its Volunteering Policy and ICRC is currently supporting the NS in the establishment of data base for a proper management of volunteers.

### **Programme Component: Improving NS financial sustainability**

**Outcome:** Improved financial systems are in place for more sustainability providing management tools

#### **Achievements**

Senegalese and Niger Red Cross finance officers have received training at the IFRC finance Department in Dakar. They also have been provided new financial management tools and procedures. Financial standard reporting format and models have also been provided and regular monitoring missions are conducted to the NS to follow on progress. Closer support is provided to SRC in terms of financial management in the framework of the 2010 flood operation funded by the Kuwait Red Crescent through the IFRC, to ensure that the donor's reporting requirements are met

#### **Constraints or Challenges**

The biggest challenge in 2010 is the low coverage of the Sahel Regional plan for 2010. Since the right sizing process started by end of 2009, the donors have been waiting for the IFRC structure to be put in place to help them plan for their funding support to the region. The restructuring process has taken longer than anticipated, thus delaying the donor decisions on funding support. Although the decentralized process re-established regional representation offices for closer and tailor made support to NS in accordance with the S2020 strategic aims, funding streams have been very slow and low. The only funding support in 2010 has been ear-marked for countries and not for the IFRC regional programmes. So far, many costs are being covered by funds carried forward from 2009, whilst anticipating support from the traditional donors. Like other programmes, lack of funding for Sahel OD activities did not allow to complete the planned activities and meeting the expected results.

## **Working in partnership**

The success of OD activities conducted by Sahel NS has been made possible by strong partnership with key partners at local, regional, and international levels. The involvement of PNS in the development process of Sahel NS on bilateral or through the IFRC has certainly helped in achieving the objectives set by the IFRC in some countries. For example, the IFRC phased out from Mali and handed over to eight PNS which are accompanying Mali Red Cross in the implementation of its programmes. These partners have the Mali strategic plan developed in March 2010 as a framework for action. In Guinea, several coordination meetings were held and a coordination team including Danish Red Cross, ICRC, IFRC and Guinea Red Cross is leading the restructuring process...

In the first half of 2010, partnerships have been made with institutions such as WHO, UNICEF, ECHO and USAID. During polio campaigns, a task force consisting of the national governments, Red Cross (IFRC and NS), UNICEF, WHO and other immunization partners have been set up.

Through partnerships, the DM department aims to attract funding from, within and outside Red Cross Red Crescent Movement is support of the NS activities. The Climate Centre with its financial and technical support is among the DM's partners. In response to the Niger Food Crisis, effective coordination and close collaboration have been established among Movement partners present in the country: the IFRC, ICRC, Qatar Red Crescent and the French, Irish and Spanish Red Cross Societies. The IFRC has signed a status agreement with the Government of Niger for a closer support to the NS. A cooperation agreement between the IFRC and the French Red Cross has been establish for a better management of nutrition activities in Niger. Besides, three countries, including Burkina Faso, Niger and Senegal have been identified as part of the partnership on Disaster Risk Reduction (DRR) with the World Bank.

## Contributing to longer-term impact

The results of the IDWARC evaluation will be used to monitor and evaluate the capacities of Sahel NS. Building well functioning and stronger NS is the main objective of the OD team and will be done in partnership with NS by using the regional resources and peer-to-peer support. A NS accreditation system will be put in place including criteria for classifying each according to its characteristics and level of development, as well as best practices and quality standards. The volunteering data base establishment will allow monitoring and mobilisation of volunteers by integrating gender, equity and diversity. Commercial First Aid programmes will also be developed by some NS as income generating activities.

The big challenge from the evaluation of the 2009 flooding season is the low coverage of the risk areas by the trained disaster response teams' members and their quick and appropriate deployment during emergencies. Indeed most of them are volunteers and it is difficult to move them from their village to other places for assessment and emergency operation implementation. Therefore, it is important to continue reinforcing and sustaining the National Disaster Response Team (NDRT) and Community-based Disaster Response Teams (CDRT) training sessions within the Sahel region as recommended by all NS.

## Looking ahead

For 2010-2011 the OD Sahel support will remain focused on National Societies capacity building including development of human resources with a monitoring process of restructuring/staffing plans. Support to strategic planning processes will continue till end of 2011. A framework for volunteering policies development and volunteers' databases will also be rolled-out to all NS. The Sahel Regional Representation Office will continue supporting NS to strengthen the greatest asset of the Movement, the volunteers at community level.

Communication and quality reporting will also be priority areas for development towards strengthening relationships and partnerships. Finance development remains another priority, and ties with NEPARC (New Partnership for African Red Cross and Red Crescent Societies) will be strengthened. External audits are also recommended for Sahel NS for more transparency and accountability.

As there are new disaster patterns and trends due to climate change, disaster risk management capacities and resources should be adjusted accordingly.

## How we work

*All Federation assistance seeks to adhere to the [Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations \(NGO's\) in Disaster Relief](#) and is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable.*

The IFRC's vision is to:

Inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.

## Contact information

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# International Federation of Red Cross and Red Crescent Societies

MAA61004 - Sahel Region

Mid-year Report 2010

Selected Parameters	
Reporting Timeframe	2010/1-2010/6
Budget Timeframe	2010/1-2010/12
Appeal	MAA61004
Budget	APPEAL

All figures are in Swiss Francs (CHF)

## I. Consolidated Response to Appeal

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
<b>A. Budget</b>	<b>1,469,136</b>	<b>470,160</b>	<b>282,353</b>		<b>0</b>	<b>2,221,649</b>
<b>B. Opening Balance</b>	<b>34,956</b>	<b>66,561</b>	<b>10,307</b>		<b>0</b>	<b>111,823</b>
<b>Income</b>						
<b>Cash contributions</b>						
<i>British Red Cross (from British Government)</i>			4,808			4,808
<i>Canadian Red Cross</i>		46,709				46,709
<i>Capacity Building Fund</i>			479			479
<i>Danish Red Cross</i>			253			253
<i>DFID Partnership grant</i>	135,901		16,150			152,052
<i>Finnish Red Cross</i>		6,441				6,441
<i>Finnish Red Cross (from Finnish Government)</i>		36,496				36,496
<i>ICRC</i>			11,000			11,000
<i>Japanese Red Cross</i>			0			0
<i>Kuwait Red Crescent</i>	994,151					994,151
<i>Norwegian Red Cross (from Norwegian Government)</i>	77,439					77,439
<b>C1. Cash contributions</b>	<b>1,207,492</b>	<b>89,646</b>	<b>32,690</b>			<b>1,329,828</b>
<b>Outstanding pledges (Revalued)</b>						
<i>Canadian Red Cross</i>		-46,746				-46,746
<i>DFID Partnership grant</i>	133,628					133,628
<i>Finnish Red Cross</i>		4,695				4,695
<i>Finnish Red Cross (from Finnish Government)</i>		26,607				26,607
<i>Japanese Red Cross</i>		24,353	54,795			79,149
<i>Kuwait Red Crescent</i>	133,966					133,966
<i>Netherlands Red Cross (from Netherlands Government)</i>	-1,463					-1,463
<i>Spanish Red Cross</i>			-1,756			-1,756
<b>C2. Outstanding pledges (Revalued)</b>	<b>266,132</b>	<b>8,910</b>	<b>53,040</b>			<b>328,081</b>
<b>Income reserved for future periods</b>						
<i>Spanish Government</i>			110,454			110,454
<b>C3. Income reserved for future periods</b>			<b>110,454</b>			<b>110,454</b>
<b>C. Total Income = SUM(C1..C6)</b>	<b>1,473,624</b>	<b>98,556</b>	<b>196,184</b>		<b>0</b>	<b>1,768,363</b>
<b>D. Total Funding = B + C</b>	<b>1,508,579</b>	<b>165,117</b>	<b>206,490</b>		<b>0</b>	<b>1,880,186</b>
<b>Appeal Coverage</b>	<b>103%</b>	<b>35%</b>	<b>73%</b>		<b>#DIV/0</b>	<b>85%</b>

## II. Balance of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
<b>B. Opening Balance</b>	<b>34,956</b>	<b>66,561</b>	<b>10,307</b>		<b>0</b>	<b>111,823</b>
<b>C. Income</b>	<b>1,473,624</b>	<b>98,556</b>	<b>196,184</b>		<b>0</b>	<b>1,768,363</b>
<b>E. Expenditure</b>	<b>-33,756</b>	<b>-63,639</b>	<b>-183,782</b>			<b>-281,178</b>
<b>F. Closing Balance = (B + C + E)</b>	<b>1,474,823</b>	<b>101,478</b>	<b>22,708</b>		<b>0</b>	<b>1,599,009</b>

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MAA61004 - Sahel Region

Mid-year Report 2010

Selected Parameters	
Reporting Timeframe	2010/1-2010/6
Budget Timeframe	2010/1-2010/12
Appeal	MAA61004
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## III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A		B					A - B	
<b>BUDGET (C)</b>		<b>1,469,136</b>	<b>470,160</b>	<b>282,353</b>		<b>0</b>	<b>2,221,649</b>	
<b>Supplies</b>								
Shelter - Relief	64,848							64,848
Clothing & textiles	24,000							24,000
Food			369				369	-369
Seeds,Plants	122,247							122,247
Water & Sanitation	24,000	30,051					30,051	-6,051
Medical & First Aid	30,000							30,000
Teaching Materials	12,000							12,000
Utensils & Tools	5,000							5,000
Other Supplies & Services	175,931							175,931
<b>Total Supplies</b>	<b>458,026</b>	<b>30,051</b>	<b>369</b>				<b>30,420</b>	<b>427,606</b>
<b>Land, vehicles &amp; equipment</b>								
Computers & Telecom	10,000			-6,441			-6,441	16,441
<b>Total Land, vehicles &amp; equipment</b>	<b>10,000</b>			<b>-6,441</b>			<b>-6,441</b>	<b>16,441</b>
<b>Transport &amp; Storage</b>								
Storage	13,445	-1,209					-1,209	14,654
Distribution & Monitoring	102,340	4,534		1,271			5,806	96,534
Transport & Vehicle Costs	246,239	3,644	1,100	1,192			5,936	240,303
<b>Total Transport &amp; Storage</b>	<b>362,024</b>	<b>6,969</b>	<b>1,100</b>	<b>2,464</b>			<b>10,533</b>	<b>351,490</b>
<b>Personnel</b>								
International Staff	143,500	1,192					1,192	142,308
Regionally Deployed Staff	14,297							14,297
National Staff	85,200		-618	20,315			19,697	65,503
National Society Staff	247,927	4,443	5,725	4,620			14,788	233,139
Consultants		2,401		62,554			64,955	-64,955
<b>Total Personnel</b>	<b>490,924</b>	<b>8,036</b>	<b>5,107</b>	<b>87,490</b>			<b>100,633</b>	<b>390,291</b>
<b>Workshops &amp; Training</b>								
Workshops & Training	242,891	66,074	33,461	11,434			110,968	131,923
<b>Total Workshops &amp; Training</b>	<b>242,891</b>	<b>66,074</b>	<b>33,461</b>	<b>11,434</b>			<b>110,968</b>	<b>131,923</b>
<b>General Expenditure</b>								
Travel	87,593	5,775	4,703	37,488			47,966	39,627
Information & Public Relation	239,369		139				139	239,230
Office Costs	127,118		10	298			309	126,809
Communications	26,651	321	1,868	529			2,718	23,933
Professional Fees				2,623			2,623	-2,623
Financial Charges		5,408	2,351	-515			7,244	-7,244
Other General Expenses	35,270	51	318	188			558	34,712
<b>Total General Expenditure</b>	<b>516,001</b>	<b>11,556</b>	<b>9,388</b>	<b>40,612</b>			<b>61,556</b>	<b>454,446</b>
<b>Contributions &amp; Transfers</b>								
Cash Transfers National Societies	1,400							1,400
<b>Total Contributions &amp; Transfers</b>	<b>1,400</b>							<b>1,400</b>
<b>Programme Support</b>								
Program Support	140,383	1,687	4,232	11,191			17,110	123,273
<b>Total Programme Support</b>	<b>140,383</b>	<b>1,687</b>	<b>4,232</b>	<b>11,191</b>			<b>17,110</b>	<b>123,273</b>
<b>Services</b>								
Shared Services			10,870	24,273			35,144	-35,144
<b>Total Services</b>			<b>10,870</b>	<b>24,273</b>			<b>35,144</b>	<b>-35,144</b>
<b>Operational Provisions</b>								
Operational Provisions		-90,617	-888	12,760			-78,745	78,745
<b>Total Operational Provisions</b>		<b>-90,617</b>	<b>-888</b>	<b>12,760</b>			<b>-78,745</b>	<b>78,745</b>

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

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
	A						B	A - B
BUDGET (C)		1,469,136	470,160	282,353		0	2,221,649	
TOTAL EXPENDITURE (D)	2,221,649	33,756	63,639	183,782			281,178	1,940,471
VARIANCE (C - D)		1,435,379	406,521	98,571			1,940,471	