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Annual report Eritrea

 International Federation
of Red Cross and Red Crescent Societies

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4 May 2012

**This report covers the
period 1 January to 31
December 2011.**

*Communities fetching water from the
RCSE constructed new water supply
system in Northern Red Sea Branch.*
Photo: RCSE



In brief

Programme outcome

The programmes of the Red Cross Society of Eritrea (RCSE) are based on the National Society's five year strategic plan (2008-2012) and are aligned with the principles and priorities of the International Federation of Red Cross and Red Crescent Societies (IFRC). RCSE delivers its developmental services to target communities through its core programmes of community based health development programme (CBHDP), disaster management, organizational development and principles and values.

Programme summary

In 2011, RCSE with support from the IFRC provided services to over 200,000 beneficiaries through its core programme areas.

The disaster management department focused on strengthening the capacity of target communities to predict and plan for disasters, in an effort to mitigate their impact, as well as respond to and effectively cope with their consequences. As part of its risk reduction and climate change adaptation initiative, water and soil conservation, along with environmental protection activities were carried out. Specifically, the activities included tree planting and construction of water reservoirs. The National Society also promoted nutritional values and livelihood among selected villages through a fish farming initiative.

Since disaster preparedness is a key element in risk reduction, RCSE trained its volunteers in first aid in order to build their skills in first response to emergencies. The National Society, with its network of trained volunteers, was able to provide relief to people affected during an earthquake in the Southern Red Sea coast and others by fire hazards in Maekel region.

Under its community based health and first aid (CBHFA) programme, RCSE promoted good health practices and worked towards inspiring community based hygiene and sanitation transformation activities through its volunteer network. The community centred programme carried out integrated components of water and sanitation, HIV/AIDS, capacity building of vulnerable female headed

households, among other initiatives. Access to clean drinking water was provided to target communities, along with adequate sanitation facilities including in schools (latrine coverage increased from 5 per cent to 75 per cent during 2011). RCSE volunteers also conducted awareness on health and hygiene issues, which led to proper use of the provided water and sanitation facilities. Under the HIV/AIDS programme, people living with HIV (PLHIV) were provided livelihood support and orphans and vulnerable children (OVC) were provided education support. RCSE, through its ambulance service programme, responded to a large number of casualties operating in all its six branches.

The National Society's organizational development programme continued building the capacity of its staff and volunteers to ensure effective and efficient delivery of its services to vulnerable populations. Focus was also on getting RCSE recognized by the state of Eritrea. Towards the last quarter of 2011, the National Society submitted its draft constitution documents to the Eritrean government.

Dissemination of Fundamental Principles of the International Red Cross and Red Crescent Movement, along with humanitarian values, continued to be embedded in all RCSE programmes. These were disseminated among public, private and government organizations through street campaigns, distribution of brochures and during implementation of all programme activities.

Financial situation

The total 2011 budget is CHF 2,323,261, of which CHF 2,003,455 (86 per cent) was covered during the reporting period (including opening balance). Overall expenditure during the reporting period was CHF 1,577,051, corresponding to 68 per cent of the budget and 79 per cent of the funds available. The expenditure rate was slightly low due to various factors including slow implementation and absorption capacity of the National Society, late confirmation of pledges from donors and delayed disbursement of funds (the process of fund disbursement from donors till the time it reaches the field level).

Project/programme yearly finance status			
Year budget	Expenditure	Per cent of budget spent	Per cent of available funds spent
CHF 2,323,261	CHF 1,577,051	68 %	79 %

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

Number of people we have reached

Programme	Activity	No. of people reached
Disaster management	Mine risk education training	35,536
	First aid and relief management training	570
	Food security (fish farming training)	180
	Relief distribution (earthquake/volcanic eruption and fire hazards)	3,625
Total number reached under the disaster management programme		39,911
Health and care (Water and sanitation hardware)	Dams	11,560
	Borehole and wells	3,970
	Water points with hand pumps	21,210
	School latrines	4,104
	<i>Subtotal (hardware)</i>	<i>40,844</i>
Health and care (Water and sanitation software)	Health and hygiene awareness	101,960
	CBHFA training (first response to emergencies)	3,019
	PLHIV and OVC supported	1,222
	Ambulance service	15,780
	<i>Subtotal (software)</i>	<i>121,981</i>
Total number reached under the health and care programme		162,825
Principles and Values	Information dissemination	5,286
Total number reached under principles and values		5,286
Total number reached with different services¹		208,022

¹ Please note that one person could have been reached with more than one service

Our partners

Movement partners providing financial and technical support to RCSE include the Red Cross Societies of Sweden, Denmark, Finland, Netherlands, Austria, as well as IFRC and the International Committee of the Red Cross (ICRC). Other partners include the UK government’s department for international development (DFID) and the European Union’s water facility programme.

RCSE also works in close cooperation with stakeholders within the country, including the Ministry of Health, Ministry of Education, Ministry of Agriculture, Water Resources Department, National Union of Eritrean Women, National Union of Eritrean Youth and Students and Eritrean Demining Agency.

Context

Eritrea has a total population of 5.0 million, with two thirds of the population living in rural areas, and a population growth of 2.7 per cent². The Eritrean economy is slowly gaining momentum after the disruption following the border war with Ethiopia in 1998. Climate change and a prolonged drought has had a negative effect on agricultural productivity, affecting the socio-economic development of the country. The main rainy season for most part of the country is June to September. There is also a short rainy season (March to May), which is very important for long cycle crop planting. In 2011, the short rains did not perform well. Although Eritrea was not severely affected by the drought situation in the Horn of Africa, small shocks to agricultural output affected mainly peasant farmers in rural areas, exposing them to poverty and vulnerability.

Eritrea is on track towards meeting some of the UN Millenium Development Goals (MDGs), particularly those related to child health, maternal mortality, HIV/AIDS, malaria and other major diseases. According to UNDP, In 2011, 0.4 per cent of young people (15-24 years) were living with HIV/AIDS and the under five mortality rate (per 1,000 live births) was 55. However, there is still a long way to go in other sectors such as access to safe water and sanitation. According to the World Bank, 14 per cent of the Eritrean population had access to improved sanitation in 2008 and, according to UNDP, 60 per cent of the population had access to improved water sources in 2008. More effort and investments are required to accelerate and scale-up interventions, if the country is to achieve the MDGs within the timeframe.

Progress towards outcomes

Disaster Management

The disaster management programme of RCSE focuses on disaster preparedness / prevention and disaster response, with integrated climate change adaptation activities.

<p>Programme component 1: Disaster management planning</p>	<p>Outcome: Improved ability of communities in Eritrea to predict and plan for disasters to mitigate their impact on vulnerable communities, and respond to and effectively cope with their consequences.</p> <p>Achievements: As part of RCSE’s risk reduction and climate change adaptation programme, water conservation and environmental protection initiatives were carried out. The National Society constructed 62,716 cubic meters of check dams for water conservation and to treat a catchment area above the dam to prevent it from siltation and to conserve the soil and reduce land degradation. Along with the construction of check dams, land terracing and tree planting, was undertaken in an effort to significantly reduce exposure to flood hazards as well as improve water conservation and environmental protection.</p> <p>One of the villages covered was in Ghinda district in the Northern Red Sea</p>
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² UNICEF State of the World’s Children, 2011

	<p>region of the country, which is prone to flash floods that result in destruction of crop fields consequently affecting food security in this mountainous community. The check dam constructed here increased the community's capacity to harvest and conserve rain water, to help supply adequate water for improved crop yields.</p>
<p>Programme component 2: Disaster preparedness and risk reduction</p>	<p>Outcome 1: By 2011, 10,000 community members will have improved their ability to reduce loss of life and disabilities caused by disasters.</p> <p>Outcome 2: By 2011, the capacity of RCSE core staff and volunteers to respond effectively during disasters will be improved.</p> <p>Achievements: Eritrea's border conflict with Ethiopia and the 30 year long war of independence has left the country as one of the most mined in the world. The RCSE, in cooperation with the Eritrean Demining Authority and with technical and financial support from ICRC, conducted mine risk education (MRE) sessions for students and rural communities especially those with highly mine infested fields. These were carried out through the RCSE volunteers network and resulted in about 35,536 individuals being trained in MRE during 2011.</p> <p>The RCSE's disaster management department also organized basic first aid and relief management training for 570 community volunteers, community volunteer facilitators, staff, teachers, students, police force personnel and industrial workers. The provision of first aid skills to these target groups has shown an improved capacity among them to provide first aid to people involved in traffic accidents. Vehicle and bicycles accidents are a major problem in major towns and on highways across the country.</p> <p>During the reporting period, RCSE was involved in emergency relief operations enabling it to acquire substantial experience in this field. The National Society continued to preposition emergency relief items in its' warehouses. Following the earthquake and volcanic eruption that hit the southern part of the country in June 2011, RCSE provided support to about 3,500 displaced people with food and water supply, along with non-food items. The RCSE has 3 staff members trained as regional disaster response team (RDRT) members and most of its core staff and volunteers are trained as National Disaster Response Team (NDRT) members, making them experienced in disaster preparedness, response and mitigation. These trained staff and volunteers, jointly with the local administration, played an active role in assisting the 3,500 displaced people.</p> <p>In addition to responding to the earthquake, RCSE provided food and non-food items to 25 households (125 people) in Maekel region, who had lost their property due to fires that broke out there.</p>
<p>Programme component 3: Disaster response and recovery</p>	<p>Outcome 1: By 2011 the logistical capacity of RCSE is strengthened.</p> <p>Outcome 2: The effects of disasters in 24 coaching areas are mitigated/reduced by 2011.</p> <p>Achievements: During 2011, RCSE continued conducting internal training programmes for its' staff and volunteers in NDRT, relief management, first aid, road safety, disaster risk reduction and participatory hygiene and sanitation transformation (PHAST). First aid trainings were conducted in communities to strengthen their capacities to respond to disasters and carry out recovery programmes after a disaster hits an area. These trainings were done under the community based health and first aid (CBHFA) programme, resulting in a total of 3,019 people gaining knowledge</p>

	<p>and skills on first response to emergencies.</p> <p>With support from ICRC, RCSE organized a NDRT training for 193 staff and volunteers from all its six branches. The training covered needs assessment, relief distribution, basic camp management, basic emergency water and sanitation supply, among other subjects. During the earthquake operation, 45 volunteers from this trained group were deployed to the affected area and involved in relief operations that included distribution of relief items and providing first aid.</p>
<p>Programme component 4: Disaster risk reduction (Food security)</p>	<p>Outcome: Improved food production, accessibility and utilization at household level in order to have a healthy and productive community.</p> <p>Achievements: During the reporting period, RCSE continued to implement integrated food security/livelihood initiatives through its different core programmes, based on quality assessment and analysis (water and soil conservation, animal husbandry, fishing and preserving fish for food etc). Through its community based health development programme, the National Society trained 180 community members on hatching fish from nearby ponds, along with preparation and preservation of fish as a source of food. The fish farming initiative is a joint venture with the Ministry of Fishery and Marine resources and is aimed at introducing fish farming as a means of livelihood and diversified diet among communities, particularly in areas that traditionally do not consume fish. This initiative will therefore improve food diversification among communities, benefitting them with improved nutritional content by adding fish to their diet. Further, the surplus fish will be sold, which will improve the living standards of these communities.</p>
<p>Programme component 5: Climate change</p>	<p>Outcome: Climate change adaptation projects are developed and implemented in target villages.</p> <p>Achievements: As mentioned above, as part of RCSE's risk reduction and climate change adaptation programme, check dams were constructed including in flood prone areas like Ghinda district. These check dams, combined with land terracing and tree planting, significantly reduced the exposure to floods in these areas and improved water conservation and environmental protection.</p>

Health and Care

The CBHDP is one of the key programmes of RCSE and its main objective is to mitigate the health problems caused by improper hygiene and sanitation practices. The programme promotes good health practices and inspires community based hygiene and sanitation transformation activities through volunteer network. Integrated components of water, sanitation and hygiene, as well as capacity building, are carried out under its' purview. The programme is community centered and is the backbone of RCSE's health and care programme.

<p>Programme component 1: Water and sanitation</p>	<p>Outcome: Improved access to safe water, sanitation and hygiene services.</p> <p>Achievements: Provision of water supply along with sanitation and hygiene promotion is a flagship programme of RCSE. It is also one of the priority areas of development for the government of Eritrea. The National Society approach to the water and sanitation programme is based on the IFRC's global water and sanitation initiative, which embarks on a community based integrated water supply programming encompassing the hardware and software components.</p>
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	<p>The hardware component involves construction of micro-dams, terracing and tree planting, rehabilitation of piped water supply systems, repair and replacement of hand pumps, as well as construction of school latrines and boreholes. The National Society has done a lot under this component. Some of the achievements include:</p> <ul style="list-style-type: none"> - Land terracing to prevent and reduce soil erosion and water diversion channels in 10 villages; - A subsurface dam/sand storage dam (capacity of 130,000 cubic meters) serving over 10,000 people and their livestock with clean water within a distance of 3 kilometres; - Check dams of 62,716 cubic meters for water conservation, which has increased capacity to harvest and conserve rain water. It will also contribute to recharging underground water, which is beneficial to the environment and communities; - A subsurface dam/earth dam (capacity of 500,000 cubic meters), serving a population of 1,560 people and 2,500 livestock; - A well protected and upgraded hand pump serving 750 people; - Two boreholes drilled and fitted with hand-pumps serving 3,220 people; - Six water points fitted with new hand-pumps and renovated, serving 6,870 people in six villages; - Ten water points upgraded/installed with solar pumping system, with complete reticulation water supply lines and storage facilities serving 14,340 people and livestock in 10 villages; - Five school latrines serving 4,104 pupils in five villages. The number of pits per latrine is based on the school population with segregation by gender. All latrines are constructed with hand washing facilities. <p>The software component adopts the integrated community led total sanitation (CLTS) and participatory health and sanitation transformation (PHAST) methodologies, with emphasis on capacity building of target communities to induce behavioural change and improve their sanitation and hygienic practices. The achievements of RCSE under this component include:</p> <ul style="list-style-type: none"> - A total of 105 villages, with a population of 101,960 people, were reached with health and hygiene education using CLTS and PHAST methods; - Following these interventions, latrine coverage in these villages increased from 5 per cent to 75 percent (13,922 households' latrines). In addition, 34 villages were declared open defecation free while 43 others are at the final stages of being declared so.
<p>Programme component 2: Community based health and first aid</p>	<p>Outcome: Increased healthy communities which are able to cope with health and disaster challenges achieved through community based integrated health and first aid activities.</p> <p>Achievements: About 104 training sessions on CBHFA were organised for 2,679 volunteers at the village level. In addition, 12 CBHFA training sessions were held for 340 students.</p> <p>Improved skills of community members in basic first aid has been appreciated, along with their enhanced capacity to respond to basic ailments and be the first responders in health emergencies. This is particularly significant in the context of limited accessibility to health facilities by rural communities in Eritrea. The reporting period saw trained volunteers effectively assisting injured people during road accidents.</p>

<p>Programme component 3: HIV and AIDS</p>	<p>Outcome: Vulnerability to HIV and its impact reduced through preventing further infection, expanding care, treatment, and support, and reducing stigma and discrimination.</p> <p>Achievements: The HIV/AIDS programme supported PLHIV and vulnerable women through the provision of much needed skills and material to improve their livelihoods and make them self reliant. About 20 PLHIV and the guardians of OVC received 80 goats and training in animal husbandry by RCSE’s Southern Red Sea branch. In addition, 30 PLHIV and OVC received similar training in poultry rearing and provided 1,500 chickens. The allocation of goats and chickens was based on standards set by the Ministry of Agriculture. Further, 20 women living with HIV from RCSE’s Maekel branch were trained in weaving and tailoring and received weaving machines and start-up kits.</p> <p>The HIV/AIDS programme also supported 988 OVC in RCSE’s Northern Red Sea branch with the distribution of school materials and 164 OVC in the Southern Red Sea branch with school materials and school fee payments. This contributed to the retention of these OVC in school. The programme will continue to provide similar support to OVC for the next two years, along with providing livelihood activities for their guardians to ensure sustainability.</p> <p>The National Society trained 180 peer educators (30 from each region) during the reporting period. The trained peer educators formed peer education groups that regularly met to discuss issues related to HIV/AIDS, reproductive health and gender. This approach aimed at changing behaviour through awareness raising and problem solving to reduce risky sexual and domestic behaviour (Information on the impact of the trained peer groups can be made available, if required).</p>
<p>Programme Component 4: Emergency health</p>	<p>Outcome: Access to curative and preventive health services improved in the target area.</p> <p>Achievements: Through its ambulance service programme, RCSE responded to over 15,780 casualties operating in all its six branches. An increase in the demand for ambulances was seen due to increasing public awareness and the fact that RCSE is the only institution with a national network providing such a service (the Ministry of Health has some ambulances but not enough to cope with the high demand). The assistance given to people to reach health facilities is one of the life saving services provided by the National Society.</p> <p>Despite its relevance and proven viability as a key life saving response, the ambulance service programme is currently threatened by limited funding as existing donors are phasing out or are reducing their support to the programme. RCSE is exploring sustainable means to run the ambulance service. One viable option is for municipalities to have a small fee added to ambulance services. However, at the moment external support is needed to revamp its ailing fleet.</p>

Organizational Development

The RCSE aims to establish a well functioning organization with sustainable systems and staff possessing the desired level of managerial capacity and competences to address the plight of the most vulnerable. The National Society is currently working under a de facto status of recognition but gets full support and cooperation from the Government of Eritrea, under the patronship of the Minister of Health, in implementing its’ programmes across the country through its’ six branches.

RCSE has presence in all the six regions of the country through its' branch offices. The six branches are responsible for implementing programmes in their respective areas through a coaching system. The organizational development department strives to upgrade the capacity of its staff through providing training opportunities.

<p>Programme component 1: Well-functioning National Society</p>	<p>Outcome: RCSE has a well functioning organization with sustainable systems, procedures and staff with desired level of managerial and technical competencies to address the plight of the most vulnerable.</p> <p>Achievements: The National Society has recognized the need to improve its monitoring and evaluation systems. In keeping with this, a consultant was engaged in the last quarter of 2011 to develop a monitoring and evaluation system to be completed in 2012. This will follow a comprehensive training and orientation on the tools developed jointly by IFRC and the consultant.</p> <p>RCSE deputy Secretary General participated in an exchange visit to the Kenya Red Cross Society as an orientation effort on management structures, policy and strategic developments and general management structures. This presented an opportunity to experience best practices that can be adopted by RCSE.</p> <p>The National Society also hosted delegates from the Sudan Red Crescent Society to share experiences on HIV/AIDS prevention approaches adopted by the two National Societies. This provided an opportunity to learn from one another in an effort to improve HIV/AIDS programming based on best approaches.</p> <p>Further, RCSE hosted staff from the Uganda Red Cross Society who came on a lessons learning mission to study the National Society's best practices related to integrated community development approaches. This is an IFRC initiative piloted in Uganda, Kenya, Ethiopia and Eritrea, with support from the Netherlands Red Cross Society. The approach includes community participatory approaches in problem identification (cause and effect), problem solving and resource identification by communities, incorporating application of all tools including participatory rural appraisal (PRA) and vulnerability and capacity assessment (VCA). RCSE has made good progress with the application of the above tools in all its development programmes.</p>
<p>Programme component 2: Financial sustainability</p>	<p>Outcome: Existing partnerships are strengthened and new ones formed.</p> <p>Achievements: The IFRC country office and RCSE maintained the same partners, mainly partner national societies, ICRC and the European Union. Efforts were made to scale-up support from the same partners, as well as create new partnerships with diplomatic communities present in the country.</p>
<p>Programme component 3: Branch development and/or volunteer management</p>	<p>Outcome: Availability of skilled volunteers who are able to provide effective and efficient humanitarian service.</p> <p>Achievements: Recognizing the importance of volunteers in implementing essential humanitarian services, a national volunteer coordinator was recruited. This position will be important as being responsible for recruiting more volunteers, coordinating trainings to ensure the volunteers are adequately skilled to provide assistance, ensuring volunteer retention, as well as carrying out other</p>

	<p>volunteer management activities.</p> <p>The RCSE programmes are implemented through the coaching system that includes community volunteers, community volunteer leaders and community volunteer facilitators. During 2011, over 730 volunteers actively participated in National Society activities and special national events.</p>
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Principles and Values

The Fundamental Principles of the International Red Cross and Red Crescent Movement, along with humanitarian values, form an integral part of all RCSE programmes. Principles and values, along with International Humanitarian Law, were disseminated under these programmes. For instance, this was seen during all mine risk education sessions. In 2011, approximately 5,286 people were reached through such dissemination activities.

The National Society also carried out dissemination on principles and values during World Red Cross Day celebrations. This was done through general knowledge contests/games, street campaigns and distribution of brochures to the public. Further, RCSE participated in national festivals to present its humanitarian and development activities to the public, through the organisation of photo exhibitions, distribution of information, education and communication materials, as well as conducting of simulation exercises.

Constraints or Challenges

The non-recognition of RCSE by the state of Eritrea is perceived to be a risk factor by some partners within the Movement, particularly in relation to ensuring that the National Society is fully in line with the Movement's fundamental principles. This has resulted in a reluctance of some partners to engage in significant resource allocations for the National Society.

Owing to the same reason, RCSE also lacks a functioning governing board structure and hence the only highest level authority is the management (secretariat). This is a drawback towards it reaching a well functioning National Society benchmark.

Further, RCSE lacks clear internal monitoring and evaluation systems. This could have been a factor contributing towards low operational efficiency in some projects during 2011, along with limited coherence and realistic profiling of performance and meaningful impact of National Society programmes due to insufficient reporting.

In recognition of the above challenges and constraints, IFRC in support of RCSE continues to assure partners that, despite the absence of a decree of recognition, the National Society has always maintained its independence and impartiality in its humanitarian endeavours and has been observing respect of all the fundamental principles. Moreover, RCSE continues to engage in dialogue with the government for its official recognition and good progress is lately being observed. The National Society, with IFRC support, is in the process of upgrading its planning, monitoring, evaluation and reporting systems in an effort to build its capacity in this area.

Working in partnership

During the reporting period, RCSE worked in close partnership with several government ministries such as health, labour and human welfare, agriculture and water resources department, along with local provincial, sub-provincial and village administrations, national associations, United Nations (UN) agencies, and non-governmental organisations. These collaborations ensured adherence to national policies and guidelines. Movement partners of RCSE included the Austrian, Danish, Finnish, Netherlands and Swedish Red Cross Societies, as well as ICRC and IFRC.

Contributing to longer-term impact

RCSE programmes contributed positively and strengthened the capacity of target communities. The programmes targeted the most vulnerable segments of communities, whose coping mechanisms have

been undermined by years of conflict, displacement, poverty and climatic changes. This will greatly contribute to increased community resilience and reduced vulnerabilities to eminent risks. RCSE's success in 2011 will have direct and indirect contribution to the national development efforts of the country, particularly the MDGs, specifically in the areas of health and care, water supply and the reduction of risks to diseases through capacity building.

Looking ahead

The National Society is in the process of outlining its five years (2012-2017) strategic plan for development programmes. IFRC will continue to provide technical support to RCSE towards improving programme implementation. RCSE has identified areas for capacity building of its core staff, particularly in programme monitoring and evaluation. Towards this end, the National Society has identified a consultant who will organize a training on monitoring and evaluation in 2012.

RCSE will continue to foster and strengthen its partnership with existing and potential partners, with the ultimate aim of improving its service delivery to the most vulnerable communities in the country. It endeavours to develop realistic and relevant strategic plans and continue to invest in its institutional and human resource capacity as a catalyst towards sustainability and self reliance. The legal status of the National Society through official recognition (through a decree) remains a key priority of RCSE.

How we work

All IFRC assistance seeks to adhere to the [Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations](#) (NGOs) in Disaster Relief and 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.

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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 nonviolence and peace.

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