

# FINAL REPORT



International Federation of Red Cross and Red Crescent Societies  
Fédération Internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge  
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja  
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

## THE PHILIPPINES: TYPHOONS

04 October 2005

The Federation's mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world's largest humanitarian organization and its millions of volunteers are active in over 181 countries.

### In Brief

Appeal No. 26/04; Final Report; Period covered: 13 June 2005 – 31 August 2005; Final Appeal coverage: 77.5%; Due to constraints in closing financial accounts and the pending finalization for the utilization of remaining appeal funds, the Final Financial Report will only be published at a later date. ([Click here to go directly to the attached Interim Financial Report](#)).

The Philippine National Red Cross (PNRC) has submitted a separate proposal to the Federation regional delegation in Bangkok for the utilization of the remaining appeal funds. The proposal aims at increasing response preparedness capacity at the national level by advancing the gains in development achieved under the Typhoon Emergency Appeal (No. 26/04) programme on institutional capacity building. It also includes the establishment of the national disaster response team, the pilot testing of the assessment templates, in-country logistics training, and the repair of heavy transport fleet for disaster response operations. The proposal is currently under review by the regional delegation. Donors are requested to respond to the reallocations through the Southeast Asia desk officers within the next two weeks.

#### Appeal history:

- Preliminary appeal launched on 2 December 2004 for CHF 2,011,000 (USD 1,749,036 or EUR 1,316,738) for three months for 250,000 beneficiaries.
- Appeal revised on 15 December 2004 for CHF 4,193,878 (USD 3,634,146 or EUR 2,731,487) for six months for 60,000 families (some 300,000 beneficiaries).
- The appeal timeframe was extended to the end of August 2005 on 13 June 2005.
- Disaster Relief Emergency Funds (DREF) allocated: CHF 150,000.

**Related Emergency or Annual Appeals: Philippines Floods and Landslides Emergency Appeal 03/04, Southeast Asia Regional Appeals 01.66/2004 and 05AA057**

All International 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.

For longer-term programmes in this or other countries or regions, please refer to the Federation's Annual Appeal. For support to or for further information concerning Federation programmes or operations in this or other countries, or for national society profiles, please also access the Federation's website at <http://www.ifrc.org>

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For longer-term programmes, please refer to the Federation's Annual Appeal.

## Background and summary

In late November and early December 2004, a series of four typhoons battered the islands of Luzon in the Philippines. The destruction was so great that the Philippine government had requested for international assistance to repair damaged infrastructure including roads, bridges, schools, health centres and dikes. The destruction covered several provinces in Northern Luzon, Central Luzon, Southern Luzon and the Bicol Region.

These areas are prone to annual typhoons, but this was an unusual case, considering that some provinces were struck several times in a matter of days with cumulative effects on the environment and the communities. Secondary disasters also occurred as a result of the typhoons, including flash floods, mudslides and epidemics.

The PNRC is mandated to assist the Philippine government in relief, health, welfare and development. Immediately after the typhoons, it had mobilized its chapters in relief distribution, utilizing local relief funds to support the disaster operations in affected areas. Its local resources, however, were exhausted because of the magnitude of the disaster and large number of affected families. It had asked the help of local donors and the Federation to seek international assistance. The Federation sent its regional programme coordinator for Southeast Asia and two disaster risk management programme officers to draft an international appeal in Manila, Philippines together with some members of the PNRC technical staff. Coordination meetings were held with the UN Disaster Assessment and Coordination (UNDAC) team, the National Disaster Coordinating Council and other agencies involved in disaster response operations to avoid duplication and to maximize resources. With the approval of PNRC, the appeal was finalized and sent to Geneva for dissemination. The formal launching of the appeal was undertaken together with the UNDAC team at the Asian Institute of Management attended by members of the diplomatic community and representatives from various components of the UN system and leaders of PNRC and the Federation. By early January 2005, the appeal was fully covered.



*Within days, homes and infrastructure were swept away by floods and mudslides.*



*A map showing Luzon and the provinces covered by the operations.*

A modest delegation of three people was set up by the Federation in the Philippines with a head of delegation, a logistics delegate and a finance delegate. For its part, the PNRC organized a project team led by the head of the disaster management service, and composed of contractual workers hired for the project and permanent staff of the disaster management service, community health and nursing service, logistics and other support departments involved in the operation.

## Coordination

The national society, with the Federation, maintained close and regular consultation with the national and local government agencies and other humanitarian organizations on various sectors of relief activities. The PNRC is active party to the national disaster coordinating council and participates in national coordination efforts and planning.

There was continuous coordination and consultation with the local communities and *barangay* (village) officials during the implementation of the rehabilitation of health facilities and distribution of new emergency health kits.

The Spanish Red Cross/ECHO coordinated with the community health and nursing service for the purchase and provision of equipment assistance for health stations in Infanta and General Nakar, Quezon referencing the field health assessment undertaken in the areas by the service team. The disaster management service consulted the community health and nursing service for the potential assistance of the Singapore Red Cross for the rehabilitation of health facilities in Aurora province affected by disasters but not supported by this appeal.

### Analysis of the operation - objectives, achievements, impact

#### Emergency relief (food and non-food)

**Objective 1: 50,000 affected families (approximately 250,000 people) receive basic food items and 25,000 families (approximately 125,000 people) receive non-food items to help recover their losses arising from the damage caused by the severe weather disturbances.**

#### Progress/Achievements

A total of 50,000 families or 100 per cent of the target number of families in 13 provinces were covered by the project, each receiving a food package containing 21 kg of rice, 21 tins of sardines and 35 packs of noodles for each family. The following table details the breakdown of food parcels distributed.

**Distribution of Food Items Per Chapter**

Chapter	Target Families	Families Served	Accomplishment
1. Aurora	5,000 families	5,000 families	100 %
2. Quezon-Lucena	4,000 families	4,000 families	100 %
3. Camarines Sur	6,000 families	6,000 families	100 %
4. Catanduanes	2,000 families	2,000 families	100 %
5. Mindoro Oriental	4,000 families	4,000 families	100 %
6. Nueva Ecija	6,000 families	6,000 families	100 %
7. Nueva Vizcaya	5,000 families	5,000 families	100 %
8. Quirino	5,000 families	5,000 families	100 %
9. Kalinga Apayao	2,000 families	2,000 families	100 %
10. Isabela	3,000 families	3,000 families	100 %
11. Cagayan	1,000 families	1,000 families	100 %
12. Bulacan	3,000 families	3,000 families	100 %
13. Camarines Norte	4,000 families	4,000 families	100 %
Total	50,000 families	50,000 families	100 %

Rice was sourced out from the National Food Authority (NFA) which imports rice from Vietnam and has an established network of warehouses in various areas covered by the project. This undertaking was covered by a Memorandum of Agreement indicating the terms of the procurement and documentation requirements of the Federation. PNRC facilitated the procurement of rice for a volume of 21 kg for each sack. These were then sent to the local warehouses of the NFA where the rice was packed and inspected by SGS Philippines, a quality assurance company, for compliance to specifications and quality indicated in the agreement. The rice allocations were taken from NFA warehouses by the local chapters for distribution in identified areas after they had passed quantity and quality standards. In some cases, due to the absence of a chapter warehouse, the NFA warehouses were also utilized as storage area during distribution.

Sardines and noodles were procured by the PNRC headquarters and directed to its central warehouse in Mandaluyong City. PNRC trucks consisting of two ten-wheeler trucks, two six-wheeler trucks and two mini vans were utilized to deliver the goods to chapter warehouses. Two mini vans from the chapters also augmented the fleet of vehicles at the national headquarters to fast track the delivery of supplies. Inspection by SGS Philippines was carried out at the central warehouse and supplies passing quality checks were delivered to the chapters. Food items were then repacked by volunteers into family packages using plastic bags bearing the PNRC logo. Teams of volunteers were assigned specific areas for scheduled relief distributions. Team leaders conducted regular meetings in the chapters and included planning of distribution process and feedback on the results of the relief distribution.



*Local resources were mobilized at PNRC chapters for distribution activities.*

Distribution points utilized during the operation included village halls, community centres, gymnasiums, school grounds and makeshift distribution centres where infrastructure was not available.

The chapters were able to mobilize local resources for the distribution activities. Some local authorities provided vehicles for hauling of relief supplies while others provided food and accommodation, human resource and also service vehicles for volunteers during the distribution.

The procurement of non-food items had been undertaken by the PNRC national headquarters. These were delivered directly to the PNRC central warehouse in Mandaluyong City and vehicles at the headquarters were used to deliver them on to eight chapter warehouses (Aurora, Camarines Sur, Catanduanes, Nueva Ecija, Nueva Vizcaya, Quirino, Isabela and Bulacan) covered by the project.

The distribution was launched in all chapters covered for non-food items since 3 March 2005, and by the end of July, 25,000 families or 100 per cent of the target had already been assisted. The following table shows the breakdown of non-food items distributed.

**Distribution of Non-food Items Per Chapter**

Chapter	Target Families	Families Served	Accomplishment
1. Aurora	6,000 families	6,000 families	100 %
2. Camarines Sur	4,000 families	4,000 families	100 %
3. Catanduanes	3,000 families	3,000 families	100 %
4. Nueva Ecija	4,000 families	4,000 families	100 %
5. Nueva Vizcaya	2,500 families	2,500 families	100 %
6. Quirino	1,500 families	1,500 families	100 %
7. Isabela	2,000 families	2,000 families	100 %
8. Bulacan	2,000 families	2,000 families	100 %
Total	25,000 families	25,000 families	100 %

**Information materials on family preparedness and disease prevention were also integrated into the distribution activities.** In several areas such as Camarines Sur and Quirino, medical missions were conducted along with the distributions. All the chapters involved were provided with visibility materials such as streamers and volunteer identification cards. They were also given award sheets for distribution of food, non-food items and shelter materials; these were utilized at each distribution.



*Many of the affected were first-time beneficiaries and expressed gratitude for the assistance received.*

The beneficiaries felt very happy about the items which were distributed to them and expressed much thankfulness. For most, the food and non-food assistance was their first ever received, with some receiving shelter materials as well.

The criteria for the selection of beneficiaries include those with completely or partially damaged houses, poor economic status or low-income families, families with vulnerable groups such as persons with disability, the elderly, children, lactating and pregnant mothers. Families which were covered for shelter materials were

considered a priority for food and non-food assistance while families covered by non-food items were also considered priority for food item assistance. This strategy was conceptualized for a comprehensive coverage and an integrated approach in relief distribution.

The identification of beneficiaries was carried out by chapter volunteers. From master lists developed by local government units and their social welfare departments, the volunteers visited the communities, conducting home visits and validating the data. From these field visits, they identified target families based on the set criteria.

### Shelter

**Objective 2: 2,500 affected families (approximately 12,500 people) are able to return home through the provision of semi-permanent shelter kits.**

### Progress/Achievements

The project surpassed the target of 2,500 families for shelter materials. A total of 2,640 families or 105.6 per cent of the target families have been provided with shelter materials including 12 pieces of galvanized iron sheets, 10 pieces of flexboard, 2 kg of umbrella nails, 1 hammer, 1 saw and 1 measuring tape. The additional shelter materials for 140 families were procured when a surplus was identified owing to the prices of these materials being lower than expected. A total of 100 families were provided the materials in Bulacan province, which was not originally targeted, and an additional 35 families were covered in Quirino province while 5 others were provided with the materials in Kalinga province. Prior to the first procurement of the materials, the chapter administrators had already appealed for additional materials to cover families that need them most in their respective areas. Below is the breakdown of distribution for the shelter materials:

**Distribution of Shelter Materials Per Chapter**

Chapter	Target Families	Families Served	Accomplishment
1. Aurora	250 families	250 families	100 %
3. Camarines Sur	500 families	500 families	100 %
4. Catanduanes	150 families	150 families	100 %
5. Mindoro Oriental	500 families	500 families	100 %
6. Nueva Ecija	250 families	250 families	100 %
7. Nueva Vizcaya	450 families	450 families	100 %
8. Quirino	185 families	185 families	100 %
9. Kalinga Apayao	5 families	5 families	100 %
12. Bulacan	100 families	100 families	100 %
13. Camarines Norte	250 families	250 families	100 %
Total	2,640 families	2,640 families	100 %



*PNRC supplied shelter materials to enable target families build their own homes, helping them return to normal lives.*

Prior to the distribution of shelter materials, each head of the family was asked to sign a letter of commitment to fully use the shelter materials in reconstruction of their houses and not for other purposes. They were also encouraged to seek other support from the local government units and non-government organizations in order to complete all the materials they need for housing. Each beneficiary family was also given an engineering plan developed by the project engineer as a guide for reconstruction work.

Coordinating with local officials and Kalinga Luzon, a housing initiative for disaster victims was undertaken to supplement the materials for the construction of houses and provide the beneficiaries with additional aid from other sources to complete their houses. In the Nueva Ecija chapter, the local government provided counterpart funds for the procurement of additional materials such as cement, while in Camarines Norte, Gawad Kalinga provided additional materials to some beneficiaries for the housing to be completed. During the reporting period, many of the beneficiaries were already able to repair their homes utilizing the materials distributed to them.

### **Health, water and sanitation**

**Objective 3: 25,000 families (approximately 125,000 people) have improved access to primary health care services, water and sanitation facilities.**

#### **Progress/Achievements**

Of the health emergency kits provided by the Federation, the PNRC distributed these in the three most affected municipalities of Quezon Province. Supplementary drugs, infusions and equipments were provided to the General Nakar main health centre while 1 carton of basic health units was provided to each of the *barangay* health stations in Batangan, Minahan Sur, Pagsanagahan, Banglos, Magsikap, San Marcelino, Sablang, Maligaya and Umiray. In the Municipality of Infanta, the main health Centre was provided with supplementary equipments while the district hospital was provided with supplementary drugs, infusions and renewable supplies.



*PNRC distributed much needed health supplies to affected municipalities in the form of health emergency kits supplied by the Federation.*

*Barangay* health stations in Infanta were each provided with 1 basic unit in *barangays* Comon, Agos-agos, Banogao, Tongohin, Magsaysay, Bantilan, Libjo, Boboin, Maypulot and Langas. In the Municipality of Real, the main health centre was provided with supplementary renewable supplies and equipment while the *barangay* health stations in Kiloloron, Capalong, Tignoan and Lubayat were each provided with 1 basic unit and supplementary equipments. Other emergency health kits were also provided to rural health units and *barangay* health stations in Aurora and Nueva Ecija provinces. These areas were identified by the PNRC health department through a field assessment undertaken in late January up to February 2005 to support health service delivery in affected areas. Local government health workers have been provided with orientation and report forms on the utilization of medicines and medical supplies for project documentation. A total of 3,245 patients have been reported to have benefited from the assistance.



*PNRC rehabilitated barangay health stations, restoring basic health care and services to affected communities.*

officers from the three municipalities. Also in attendance were PNRC officials headed by the chairman and the secretary-general and the Federation head of delegation in the Philippines. PNRC was able to complement the project with medical equipment through the funds provided by the European Commission Directorate General for Humanitarian Aid (ECHO). The equipment included dressing trays, vaccine refrigerators, weighing scales, dental chairs and examining tables.

During the turnover ceremonies, the municipal mayors were asked for a pledge of commitment to sustain and maintain the health facilities and they have responded positively to this, calling upon PNRC to establish a branch in the area and pledging to support this move.

In line with water and sanitation initiatives, and after the training of 26 PNRC staff members on the use of the portable water testing kits provided by the Federation, actual water testing was undertaken in Real, Quezon, covering 5 hand pumps, 15 springs, 1 open dug well and 1 water fall. Most of the hand pumps were recommended for chlorination and since the rural health units possess available chlorine powders, the pumps were referred to them for chlorination activities. Improvement and protection were recommended for the open dug well, while boiling was suggested as a short-term solution. Most of the springs were contaminated with bacteria and were recommended for boiling and household container disinfection. The project health coordinator discussed these recommendations with the local government health departments for action. The water testing kits are now being used by the PNRC community health and nursing service department to test water sources in other chapters as well.

To sustain the health initiatives, health education activities were also carried out during the project operation. A total of 50,000 health advisory booklets were distributed to various chapters affected by the disaster. These included information on the prevention and control of acute respiratory infection, diarrhoea and other diseases which are common in disaster situations. Teaching aids on hygiene and flips charts were also distributed to chapters for the use by their health volunteers and the same materials were also provided to government health facilities in Quezon province.

### **Institutional capacity building**

**Objective 4: The capacity of the PNRC and the affected communities to respond to emergency situations is increased.**

#### **Progress/Achievements**

An administrative memorandum was delivered to all chapters on the training of disaster response teams (DRT) in various regions. The criteria for the selection of participants were indicated in the memorandum and these included a two-year service period required from a trainee after the training, and previous attendance in PNRC training courses such as disaster management and standard first aid. Three participants were expected to attend from each chapter consisting two volunteers and one staff. The staff members were required to be of permanent status and involved in disaster operations. A total of nine regional DRT trainings courses were conducted with three held in Mindanao, two in Visayas and four in Luzon. All together, 254 participants graduated from the said training programme, representing 85 PNRC chapters.

In total, 12 health facilities composed of 1 main health centre and 11 *barangay* health stations have been repaired and rehabilitated in the three municipalities of Quezon considered as worst hit during the multiple typhoons. These include the main health centre of General Nakar and the *barangay* health stations of Lubayat, Tignoan and Kiloloron in the Municipality of Real, Quezon, Agos-agos, Langos, Libho, Dinahican, Bubuen, Maypulot and Bautilan in the Municipality of Infanta, Quezon and Catablingan and Minahan Sur in the Municipality of General Nakar, Quezon. Engineering plans were developed by project engineers including the bill of materials after the area assessment in February and March 2005. The procurement of construction materials was completed in April and the actual construction was undertaken from May to 12 June 2005. On 13 June 2005, a mass turnover of the newly repaired health facilities was held. It was attended by all the municipal mayors, members of the municipal council and health workers headed by the municipal health

In support to the capacity building activities, a workshop on the '*Standardization of Disaster Assessment and DRT Deployment*' was organized and participants came from the various offices involved in disaster response operations at the headquarters, and included representatives of the regional directors and chapter administrators. Flow diagrams were developed on these concerns and an assessment format was developed for future disasters. It was agreed during the workshop that assessment could be made more effective if chapters had baseline data gathered before a disaster strikes to aid field assessment teams and to quickly analyze assessment data.

The project also organized update training sessions for chapter administrators on disaster management in the Mindanao Region, Central and Northern Luzon Region including the National Capital Region and Southern Luzon. The topics included disaster management policies and guidelines, Humanitarian Charter and Minimum Standards in Disaster Response (Sphere Standards) on various sectors, critical incident stress debriefing and disaster assessment. As a result of the workshop on the '*Standardization of Disaster Assessment and DRT Deployment*', the standard assessment form and process were also presented to the participants.

National field representatives of various service departments at the national headquarters were also given an update on disaster management. They were provided inputs on Sphere Standards, critical incident stress debriefing and health emergencies.

DRT equipment consisting of safety helmet, safety spectacles, gloves, boots, life jackets, backpacks, sleeping bags, megaphones and emergency kits for medical first responders have been procured and distributed to the chapters. Guidelines on its utilization have been issued through an administrative memorandum signed by the secretary-general to ensure its proper use and care.

The Federation had also turned over one satellite phone to PNRC for its use during disaster operations. The PNRC radio telephone operators have familiarized themselves with the technology for future use.

### **Lessons learnt**

Delays in the delivery of some of the construction materials for the rehabilitation of health facilities were encountered and additional materials were identified when the demolition work was undertaken. Consequently, construction work did not start on time. Actions were then facilitated to fast track the delivery of the materials and the additional needs were purchased after consultations and approval from the PNRC project management. In spite of these initial delays, the team continued to work as scheduled and focused to meet the target date of completion at the end of May 2005.

In addition, due to the enormous logistical requirements for the distribution of remaining food items in 13 provinces and the transport of several tonnes of shelter materials from the PNRC central warehouse to distribution points, the national society was not able to complete the operation before the end of June 2005. Therefore, the operational timeframe was extended until 31 August to allow PNRC to wind up field activities, consolidate project documents and financial reports from the chapters, and submit the final report. In future, stronger considerations in logistically challenging area of the Philippines should be taken when determining operational time frames.

**[Interim financial report below; click here to return to the title page.](#)**

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

26/04 PHILIPPINES: TYPHOONS

Selected Parameters	
Year/Period	2004/1-2005/12
Appeal	M04EA026
Budget	APPEAL

All figures are in Swiss Francs (CHF)

**I. Consolidated Response to Appeal**

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
Budget (A)		4'193'878				4'193'878
Opening Balance (B)		0				0
<b>Income</b>						
<b>Cash contributions</b>						
Andorra Government		46'290				46'290
Australian Red Cross		17'279				17'279
Belgian Red Cross		506'796				506'796
British Red Cross		471'694				471'694
Canadian Red Cross Society		192'600				192'600
Danish Red Cross		28'520				28'520
Denmark - Private Donors		445				445
Icelandic Red Cross		18'423				18'423
Irish Government		303'300				303'300
Japanese Red Cross Society		205'684				205'684
Korea Republic National RC		30'000				30'000
Liechtenstein Red Cross		5'000				5'000
Monaco Red Cross		15'430				15'430
Netherlands Red Cross		381'931				381'931
New York Office		11'450				11'450
New Zealand Government		81'700				81'700
New Zealand Red Cross		20'006				20'006
Norwegian Red Cross		213'187				213'187
On Line donations-Worldpay		15'000				15'000
On Line donations		1'326				1'326
Singapore Red Cross Society		34'747				34'747
Sweden - Private Donors		490				490
Swedish Red Cross		340'000				340'000
Swiss Government		100'000				100'000
Swiss Red Cross		6'952				6'952
Taiwan Chinese RCO		13'127				13'127
United Arab Emirates RC		5'927				5'927
<b>Cash contributions (C1)</b>		<b>3'067'304</b>				<b>3'067'304</b>
<b>Reallocations (within appeal or from/to another appeal)</b>						
DREF		0				0
<b>Reallocations (C2)</b>		<b>0</b>				<b>0</b>
<b>Inkind Goods &amp; Transport</b>						
Norwegian Red Cross		183'595				183'595
<b>Inkind Goods &amp; Transport (C3)</b>		<b>183'595</b>				<b>183'595</b>
<b>Total Income (C) = SUM(C1..C5)</b>		<b>3'250'900</b>				<b>3'250'900</b>
<b>Total Funding (B + C)</b>		<b>3'250'900</b>				<b>3'250'900</b>

**II. Balance of Funds**

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
Opening Balance (B)		0				0
Income (C)		3'250'900				3'250'900
Expenditure (D)		-2'801'928				-2'801'928
<b>Closing Balance (B + C + D)</b>		<b>448'972</b>				<b>448'972</b>

International Federation of Red Cross and Red Crescent Societies

26/04 PHILIPPINES: TYPHOONS

Selected Parameters	
Year/Period	2004/1-2005/12
Appeal	M04EA026
Budget	APPEAL

All figures are in Swiss Francs (CHF)

### III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation		
A							B	A - B
<b>BUDGET (C)</b>		4'193'878					4'193'878	
<b>Supplies</b>								
Shelter	734'500		65'341				65'341	669'159
Construction			371'046				371'046	-371'046
Clothing & textiles	420'000		274'667				274'667	145'333
Food	980'000		825'845				825'845	154'155
Water & Sanitation	81'600		43'047				43'047	38'553
Medical & First Aid	280'000		81'680				81'680	198'320
Teaching Materials	23'000		11'113				11'113	11'887
Utensils & Tools	295'000		264'211				264'211	30'789
Other Supplies & Services	140'576		133'939				133'939	6'637
<b>Total Supplies</b>	<b>2'954'676</b>		<b>2'070'888</b>				<b>2'070'888</b>	<b>883'788</b>
<b>Land, vehicles &amp; equipment</b>								
Computers & Telecom	62'000		23'633				23'633	38'367
Office/Household Furniture & Equipment			14'712				14'712	-14'712
<b>Total Land, vehicles &amp; equipment</b>	<b>62'000</b>		<b>38'344</b>				<b>38'344</b>	<b>23'656</b>
<b>Transport &amp; Storage</b>								
Storage	50'000		35'711				35'711	14'289
Distribution & Monitoring	200'000		186'277				186'277	13'723
Transport & Vehicle Costs	140'000		6'214				6'214	133'786
<b>Total Transport &amp; Storage</b>	<b>390'000</b>		<b>228'202</b>				<b>228'202</b>	<b>161'798</b>
<b>Personnel Expenditures</b>								
Delegates Payroll	280'000		128'140				128'140	151'860
Delegate Benefits			55'375				55'375	-55'375
Regionally Deployed Staff			1'645				1'645	-1'645
National Staff	43'600							43'600
National Society Staff			43'480				43'480	-43'480
<b>Total Personnel Expenditures</b>	<b>323'600</b>		<b>228'641</b>				<b>228'641</b>	<b>94'959</b>
<b>Workshops &amp; Training</b>								
Workshops & Training	104'000		91'729				91'729	12'271
<b>Total Workshops &amp; Training</b>	<b>104'000</b>		<b>91'729</b>				<b>91'729</b>	<b>12'271</b>
<b>General Expenditure</b>								
Travel	45'000		34'424				34'424	10'576
Information & Public Relation	12'000		1'546				1'546	10'454
Office Costs	30'000		13'272				13'272	16'728
Communications			19'516				19'516	-19'516
Financial Charges			-106'193				-106'193	106'193
Other General Expenses			481				481	-481
<b>Total General Expenditure</b>	<b>87'000</b>		<b>-36'954</b>				<b>-36'954</b>	<b>123'954</b>
<b>Program Support</b>								
Program Support	272'602		181'077				181'077	91'525
<b>Total Program Support</b>	<b>272'602</b>		<b>181'077</b>				<b>181'077</b>	<b>91'525</b>
<b>TOTAL EXPENDITURE (D)</b>	<b>4'193'878</b>		<b>2'801'928</b>				<b>2'801'928</b>	<b>1'391'950</b>
<b>VARIANCE (C - D)</b>			<b>1'391'950</b>				<b>1'391'950</b>	