

Appeal 2004



International Federation
of Red Cross and Red Crescent Societies

Central Europe

Appeal no. 01.75/2004

The International Federation's mission is to improve the lives of vulnerable people by mobilizing the power of humanity. The Federation is the world's largest humanitarian organization, and its millions of volunteers are active in over 180 countries. All international assistance to support vulnerable communities seeks to adhere to the Code of Conduct and the Humanitarian Charter and Minimum Standards in Disaster Response, according to the SPHERE Project.

This document reflects a range of programmes and activities to be implemented in 2004, and the related funding requirements. For further information concerning programmes or operations in this or other countries or regions, please also access the Federation website at <http://www.ifrc.org>

Below: click on programme title to go to relevant text and figure to go to programme budget

Programme title	2004 in CHF
Strengthening national societies	
Health and care	482,866
Disaster management	416,897
Organisational development	988,277
Coordination & implementation	725,476
Total	2,613,516¹

Regional Context

With the accession of ten new member countries to the European Union (EU) in 2004 the political map of Europe will change. This will have a profound impact on people in the new member states. It will also affect communities in current members as well as those aiming to join the EU in future. The various Red Cross Societies will experience this change in different ways, as new demands and opportunities arise. The Federation's regional delegation for Central Europe will adjust to the new situation enabling it to respond to the changing needs of national societies.

¹ USD 1.99 million or EUR 1.68 million.

As countries restructure economically and prepare for accession (or possible accession) to the EU, it is often people at the bottom of the social ladder who pay the price. Social disruption, under-funded health and social services and high unemployment continue to marginalise the vulnerable. Most Central European countries have climbed back to 1990 levels of GNP, but this masks strong disparities within the population. There is a growing divide between a minority accumulating wealth and large marginalised groups not benefiting from the transition. Homelessness and unemployment, in some countries reaching 40 per cent, growing abuse of alcohol and drugs, and increasing prevalence of HIV infections and tuberculosis (TB) are indicators of the region's deteriorating health and social situation. Of the people living with HIV/AIDS the majority is injecting drug users, many of whom are teenagers.

In the Balkans, which experienced a succession of conflicts over the last decade, the situation is becoming more stable, translating into improved security and modest economic growth. Many refugees and internally displaced persons (IDP) have returned to their places of origin. However, large numbers of people remain vulnerable and poor, and the refugees and IDPs continue to need humanitarian assistance. In Kosovo there is still no enduring political solution.

Countries	Total Population (million)	Population Growth (%) projected 2001- 2015	Life Expectancy at Birth (years)	Gross National Income per capita 2002 (USD)	Rural Population (%)
Albania	3.2	1.0	74	1,380	57
Bosnia Herzegovina	4.1	0.5	-	1,270	57
Bulgaria	8.0	-0.7	72	1,790	33
Croatia	4.4	-0.3	74	4,640	42
Czech Republic	10.2	-0.2	75	5,560	25
Estonia	1.4	-0.5	71	4,130	31
Hungary	10.2	-0.6	72	5,280	35
Latvia	2.4	-0.7	70	3,480	40
Lithuania	3.5	-0.2	73	3,660	31
Macedonia	2.0	0.4	73	1,700	41
Poland	38.6	0.0	74	4,570	37
Romania	22.4	-0.3	70	1,850	45
Serbia and Montenegro (Yugoslavia)	10.7	0.1	-	1,400	48
Slovakia	5.4	0.0	73	3,950	42
Slovenia	2.0	-0.2		9,810	51

Source: www.worldbank.org

National societies in Central Europe are struggling to adjust programmes to respond to the new and increasing needs of their populations, while simultaneously adapting their structures and ways of working. They are often ill-equipped to deliver all the health and social services required or to take on new responsibilities involving complex problems, such as HIV and TB, drug abuse or trafficking in people, when they are faced with serious financial difficulties and structures inherited from the previous political system.

The accession of ten countries to the European Union in May 2004 – eight of which are covered by the regional delegation for Central Europe, based in Budapest – will affect national societies. In this new context the Federation secretariat is also redefining its way of working in the region. It is adjusting its structures to better support national societies in the areas they have indicated. As the current 15 member states become 25, the borders between different regional groupings will be affected. This will have an impact on the way the national societies within Europe operate, increasing cooperation across regional borders. Already many Central European national societies are members of Europe-wide networks such as European Red Cross/Red Crescent Network on AIDS (ERNA), Platform for European Red Cross Co-operation on Refugees, Asylum-seekers and Migrants (PERCO), the European Youth Network and others. The role of the regional delegation will be to strengthen these.

After an initial emphasis on operations issuing from the conflict in the Balkans, the regional delegation, based in Budapest since 1992, has shifted its focus to capacity building work with national societies. Such capacity building support has been provided in the four core areas of the Federation's Strategy 2010: disaster response, disaster preparedness, health and care in the community, and humanitarian values. In addition, assistance has been provided through the regional organisational development programme encompassing organisational development, resource and finance development, participatory community development, and youth activities. With eight countries on the road to EU membership, the regional delegation has also been assisting the national societies in these countries to prepare themselves for the consequences of the EU enlargement.

The Brussels Red Cross/EU office will act as an important point of dialogue for the accession national societies by hosting networks, facilitating knowledge sharing and serving as a pool of information. However, as it does not – and will not – provide capacity building or other services not related to EU issues to its members, there will still be a need for the regional delegation to work with the first wave accession state national societies through 2004. This work will focus on supporting these national societies to be strong organisations in the EU context: well functioning and confident, solid and sound institutions of civil society. As of 2004 the regional delegation will adjust its work so that support to these societies will come directly from the secretariat in Geneva (as is now the case for the other EU member state societies). Making this shift happen will form part of the 2004 review of the Europe department's implementation plan for the secretariat's strategy for change.

As the northern societies of Central Europe turn towards Brussels and Geneva, and the Federation country presence in the southern part of the region reduces, the regional delegation will act as an "umbrella" for the southern societies. It will also change its role and way of working, shifting from direct programme support to promoting networking, partnerships, advocacy, knowledge sharing and consulting. These future directions are spelled out in the Central Europe Regional Strategy 2003-2006, developed in consultation with national societies and based on the Europe department's implementation plan.

Red Cross and Red Crescent Priorities

National Society Strategies:

In the spring of 2003 the regional delegation consulted all 15 national societies of the region concerning their priorities for future support. This was part of the process of drafting individual country plans for the regional strategy. The societies were asked about the support each was currently receiving from the regional delegation (or Federation country delegation/office) and the assistance that they wished to receive during 2003-2004 and beyond. The outcome was discussed in a partnership meeting in Bratislava in June 2003.

Continued capacity building support, to consolidate progress, was sought in disaster management as well as in different areas of health and care, especially in HIV/AIDS and harm reduction. A significant number of requests concerned support for organisational development, including updating of statutes, governance and management,

volunteer development, financial management and fundraising. This is an area several national societies considered vital and one in which it was felt not enough support had been received. Furthermore, migration, youth, participatory community development, advocacy and work with the media were also pinpointed as priorities. The regional delegation appreciates the diversity among the region's national societies and adjusts its support to respond to their individual needs.

International Red Cross and Red Crescent Movement Context:

The Federation structure in Central Europe is undergoing a number of changes because the crisis that prompted the establishment of an important presence in the region is changing to a more stable situation. The needs of national societies are also changing, and the funding available is reducing.

As the situation stabilises in the Balkans, the Federation's physical presence is being reduced. The Albania delegation was closed at the end of 2001, the Macedonia delegation and the Zagreb sub regional office in Croatia, which focused on population movements, closed in autumn 2003. The Federation will maintain its country delegation in Serbia and Montenegro until the end of 2004. After this, it is foreseen that a country representative will focus on three key areas: relations with government and civil society, governance and management and related OD-issues, and service development and delivery. The Kosovo office will be maintained, as will the office in Bosnia and Herzegovina until the situations there become more stable. The regional umbrella from Budapest will cover societies no longer covered by a country delegation.

The International Committee of the Red Cross' (ICRC) regional delegation for Central Europe is also based in Budapest. It focuses work with national societies on the following areas: dissemination, tracing, conflict preparedness, mine awareness, and advice on statutory and legal matters. There are frequent contacts and a good coordination between the regional Federation and ICRC delegations as well as with the respective country delegations/offices in the western Balkans.

A large number of partner national societies either support or are present in Central Europe through multilateral or bilateral activities or partnerships. The Nordic-Baltic partnership has continued since the mid-90s, bringing together the five Nordic and three Baltic Societies in a variety of programmes. The Austrian Red Cross has initiated new partnerships with its neighbours, and the German Red Cross supports a number of societies. The American Red Cross has established a regional office in Sofia and coordinates its work with the Budapest regional delegation. The Nordic societies continue to support the regional health, disaster preparedness and organisational development programmes. The Spanish and the French Red Cross have bilateral programmes in some countries.

Strengthening the National Society

1. Health and Care <[Click here to return to title page](#)>

Background and Achievements

The regional health and care programme for Central Europe was established in 2001 to build and strengthen the capacity of the 15 national societies in the region so that they are able to promote the health and wellbeing of vulnerable individuals and communities.

The national societies have showed that they are competent and committed, even with limited financial and human resources, in dealing with health and care issues although all do not have an appointed person to coordinate the area. During the past year some national societies (e.g. Macedonian Red Cross and Slovak Red Cross) have appointed a health officer and health and care activities have improved. National societies have good relations with the government (Ministry of Health, Ministry of Education etc.) but coordination could be better. As an example, in 2002, Bulgaria, Croatia, Estonia and Romania received grants from Global Fund to Fight Against HIV/AIDS, TB and Malaria. However, only the Croatian Red Cross is involved in the Country Coordinated Mechanism (CCM), a channel through which stronger partnerships can be sought.

(For Global Fund, see <http://www.theglobalfund.org/en/>)

National societies will need further support to be recognised by their governments as viable partners, Assistance to establish links with respective authorities will position the organisations in the community and facilitate discussions concerning their future role in health and care.

The health and social situation varies from country to country, depending on, for instance, the socio-economic situation (Roma population, elderly people, families with many children etc.) and health services provided by the government. As a consequence national societies face different challenges in responding to the needs of the most vulnerable people in the communities.

The increasing rate of HIV infections and TB is the main concern. The prevalence of newly-reported HIV infections is increasing rapidly; Estonia reports the highest rate of new HIV infections (12 infections in 1999, 7,700 infections in 2001). The majority of reported HIV infections are related to injecting drug use. An estimated 1 per cent of the population is injecting drugs; some of them are young teenagers. TB is most prevalent among the poor and their families, including the homeless, alcoholics, ex-prisoners and the malnourished. Romania has the highest prevalence of TB in the region, with more than 20 000 new infections in 2002. Estonia also has the highest rate of multi-drug resistant form of TB. The links between TB and HIV are strong as an HIV infected person who becomes newly infected by tuberculosis rapidly progresses to active TB.

National societies have focused on the HIV/AIDS and TB prevention programmes, including the reduction of drug related harm. The Croatian Red Cross and the Latvian Red Cross have gained good experience on harm reduction. This knowledge and experience will be utilised through sub-regional seminars in 2004. The aim is that the most national societies will implement drug prevention programmes and establish some harm reduction activities, according to the legislation of the respective countries. In autumn 2003 the Bulgarian Red Cross started a one-year drug prevention programme with a focus on integration of youth population of Bulgarian and Roma origin. Most national societies have translated the Federation manual "Action with Youth" into local languages. The implementation of peer education programmes has been carried out in collaboration with the Red Cross Youth. The Slovak Red Cross finished a pilot phase of a HIV/AIDS prevention project in June 2002. The preventive activities of Slovak Red Cross were given as an example of stigma and discrimination campaigning during the ERNA meeting in Armenia in 2002. The second phase of the project will target 2,000 students in secondary and high schools in Slovakia. The Lithuanian Red Cross has started to cooperate with the Kaliningrad branch of the Russian Red Cross on this issue. A signed plan of action includes activities of HIV/AIDS prevention programme (peer education) and visiting nurses services.

HIV/AIDS and TB are heavily stigmatised, leading to under-diagnosing of HIV and unsatisfactory treatment compliance in TB. The actual number of people living with HIV/AIDS may be four times more than the estimated rate. Socially, both diseases are stigmatised and require long-term involvement from health care providers and volunteers. Cooperation with the regional youth and information programme has been successful and all national societies have been active in recruiting local branches to organise advocacy campaigns (World Aids Day on 1 December, World Red Cross Day on 8 May, and World TB Day). In 2004-2005 anti-stigma activities will increase cooperation with existing partners, such as the Global Network of People Living with HIV and AIDS (GNP+), European Network of People Living with HIV and AIDS (ENP+). In addition, new partners will also be added.

In many countries access to voluntary confidential HIV testing and counselling is not well functioning. The Macedonian Red Cross has a new programme in this area; the experience will be shared with other national societies to encourage them. The knowledge and experience from Macedonian Red Cross will be used in the region in 2004.

The aim of networking is to establish a learning environment for national societies to share knowledge, experience and best practices already existing. Regional workshops have supported the establishment of the effective networks. The regional delegation has organised workshops in 2002 and 2003, where the main topics have been on blood donor recruitment, social welfare and psychological support. Cooperation with regional programmes of participatory community development (social welfare) and disaster management (psychological support) has been successful. Networking with Help Age International (HAI) was started in April 2003. It will continue in September 2003 and January 2004 with the seminar on "Age Awareness" facilitated by the HAI. Since 1999, the European Red Cross/Red Crescent Network on AIDS (ERNA) has increased the number of member national societies to 32 (including Central Asia). Annual meetings have been organised on selected topics, such as peer education, and harm reduction. In September 2003 the meeting was held in Latvia focusing on advocacy on harm reduction as well

as care and treatment. The representative from International Harm Reduction Development (Open Society Institute) introduced activities and encourages national societies to increase cooperation.

Cooperation with the EU enlargement officer in Budapest and the EU Red Cross/Red Crescent office will continue, as eight of the national societies in the region will join the EU in May 2004. In 2003 the EU accession national societies were eligible to participate in the EU Road Safety campaign in 2003-2004. The national societies, including the Bulgarian Red Cross and Romanian Red Cross, have been active in planning and implementing the campaign. In 2002 the Austrian Red Cross invited neighbour national societies to prepare a joint application for the EU Public Health Programme, to secure safe blood supplies. A decision is still pending.

The prevalence of HIV/AIDS and TB will affect planning and implementation of other health and care activities. The promotion of safe blood supplies is important. In some countries, blood donors are still paid and the number of family blood donors is high. In 2003 the Bulgarian Red Cross, Hungarian Red Cross, Macedonian Red Cross, Serbia & Montenegro Red Cross and Slovak Red Cross have translated and printed a total of 2,500 copies of the Federation manual "Making a Difference" into the local language. With the assistance of the Austrian Red Cross a web site for blood donor recruitment issues has been designed. The site will provide relevant information and best practices to all national societies and will be updated by the regional task force.

National societies have made psychological support a priority in the wake of joint seminars with health and care and disaster management programme managers. In 2003 they are committed to integrate psychological support with other activities, such as disaster preparedness and community based first aid. All national societies participated in the seminars. First aid/ psychological support officers have started cooperating with their respective officers of the regional disaster response team (RDRT) to be prepared for future crises.

A regional task force to coordinate psychological support issues and provide training is planned. Cooperation with the Reference Centre for Psychological Support in Copenhagen has been good.

A community-based approach, integrated with health and care activities, will be emphasised in 2004-2005. The methodology of participatory community development (PCD) was introduced to social welfare officers at a seminar in April 2003. As a result, a branch in Romania and another in Hungary have started a joint project. Seminar participants established sub-networks on social welfare to make sure services keep up with changing community needs.

One vital service is home care for lonely elderly people. Many national societies (e.g. Croatia, BiH, Serbia & Montenegro, Bulgaria) provide this. The Latvian and Lithuanian Red Cross have long traditions of a visiting nurses service. In 2003 both national societies trained their nurses to improve qualifications and motivation. A Croatian Red Cross manual, 'Home Care and First Aid', has been translated into Latvian and Lithuanian, and will be used by nurses.

The regional delegation will continue to provide support and coordination in health and care to the 15 national societies during 2004. As part of the scaling down of the Budapest delegation, it is foreseen that the health and care delegate will finish in mid 2004. Health coordinators from national societies will cover the position. National societies, including those in EU accession countries, have expressed there is a need for continued support after 1 May 2004, as the EU Red Cross/Red Crescent office does not provide professional assistance and support. As the rate of HIV/AIDS & TB increases, health coordinators face a stiff challenge. They will need to address ongoing issues of drug prevention/harm reduction, voluntary counselling and testing on HIV, human trafficking (an area where the Federation developed a policy during 2003).

Goal:

The national societies in Central Europe region are viable partners of their respective authorities in improving the health and social situation.

Objective:

Through the regional delegation's promotion of knowledge sharing and exchange of best practices the capacity of the national societies will be increased in:

- implementing sustainable **HIV/AIDS & TB** and **drug prevention** activities,
- providing sustainable services in **social welfare** to meet human needs and promote the wellbeing of the most vulnerable individuals and communities,

- promoting **voluntary, non-remunerated blood donation** to raise awareness of safe blood supply, and
- providing sustainable **community based first aid** activities, including **psychological support**.

Expected Results:

- By the end of 2004, all national societies will have sustainable activities on **HIV/AIDS, TB** (where relevant) and **drug prevention** programmes, including **drug related harm reduction**, closely integrated with other health and care activities, sharing the best practices through ERNA network.
- By the end of 2004, all national societies will have an awareness and advocacy plan to fight against stigma, social exclusion and discrimination of people living with **HIV/AIDS & TB**.
- By mid 2004, the established sub-networks on **social welfare** will have a plan of action for sustainable community based activities in collaboration with other health and care activities (PCD).
- The national societies in the region will carry out awareness and advocacy campaigns for social welfare activities throughout 2004.
- By the end of 2004, the regional task force has started to coordinate activities on **voluntary, non-remunerated blood donor recruitment**. The success stories (best practices) for raising the awareness for safe blood supply will be available on the web site, which is updated by the regional task force.
- By the end of 2004, all national societies will have sustainable activities on **community-based first aid**, including **psychological support**, integrated with other health and care activities.
- By mid 2004 the regional task force for psychological support is in place and will start to provide support and training for national societies, in cooperation with disaster management.

2. Disaster Management [<Click here to return to title page>](#)

Background and achievements/lessons to date

Red Cross societies in the region have shown that they are competent in dealing with emergency situations. Past problems in coordination, both inside the Red Cross Movement and with governmental departments and other organisations, have been addressed. Red Cross societies, governments and other organisations cooperate much more closely.

Part of this process has been to support national societies in their efforts to be recognised by their governments. This initiative is an important part of the disaster management programme. All national societies in the region have started discussions with their respective governments regarding the future role of the Red Cross in national disaster management plans.

One aspect of regional disaster management planning is the setting up of a regional disaster response team (RDRT). A first training was organised in 2002 and a second held in Sutomore, Serbia and Montenegro 2003. There are now about 45 people on the regional roster ready to assess needs in the wake of any disaster in the region. Each team member should be available for up to 14 days at a time, by agreement with their national society. The team was first used during the Central European floods in the summer of 2002. See: http://www.ifrc.org/cqi/pdf_appeals.pl?02/2502FR.pdf

Experience soon proved that the concept of having people from Central Europe trained to intervene in the region was correct. Fifteen of those trained come from the governmental sector, supported by the Stability Pact Disaster Preparedness and Prevention Initiative (DPPI). The team will eventually consist of about 60 people and more members will be trained in 2004.

Communities in Central Europe are potentially at risk from several disasters, including earthquakes, floods, landslides, forest fires, technological disasters and more 'regular' emergencies such as transport accidents (Stability Pact Disaster and Prevention Initiative report June 2001).

The regional approach to disaster management has established networks to promote a learning environment for the national societies. The Budapest delegation has organised a series of workshops at both regional and national levels to support the development of a disaster management network. It involves members/volunteers from national societies. There has been collaboration with the health and care and communication departments of the regional delegation during this process.

In the southern part of the region, where the Federation has a disaster management coordinator, networking is functioning well. National societies know each other well and have shown several times that they consider themselves part of a network. During 2003 there were several examples where networking assisted effective humanitarian action. During a drought and consequent heavy forest fires, which dried wells, the emergency response of the Red Cross Society of Bosnia and Herzegovina benefited from external assistance. They provided fresh water for drinking and cooking and there was significant cross-border activity in support. The benefit of regional cooperation was also demonstrated in the response to floods in Bosnia-Herzegovina, and Central Europe generally, in 2002 and water pollution in Serbia and Montenegro.

Nevertheless, the Central European floods, in the summer of 2002, affected progress during 2003, particularly in reporting and administration. However, a series of workshops was held to improve national society reporting skills. Training materials were translated into major regional languages.

The position of disaster management delegate in Budapest is due to end after May 2004. As part of the regional delegation's exit strategy it has continued to strengthen the network among the national societies in the southern sub-region. The Stability Pact DPPI (Disaster Preparedness and Prevention Initiative) will continue to support the programme area related to civil protection, under which national society disaster preparedness activities fall, at least till the end of 2007.

Developments during 2003 showed a strong need for continued support also to the northern sub-region, even after EU accession in May 2004. The EU will open up a future programme area related to civil protection. It is important that accession countries have a coordinated approach in this field. The regional delegation intends to apply a similar approach in the northern sub-region as in the southern sub-region and establish a network during the first part of 2004. The two sub-regional networks will receive support from the regional delegation. The main tasks will be to: first, support national society efforts to work closely with their respective governments; second, carry out vulnerability capacity analysis; third, conduct disaster preparedness planning; and fourth, organise sub-regional meetings for exchange of ideas, training of regional disaster response team members and for practicing simulations.

In the northern sub-region there will also be extended support to national societies related to EU accession. In the southern sub-region established cooperation with the Stability Pact DPPI will continue.

Goal:

The efficiency and effectiveness of national societies in the region in their response to natural or man-made disasters is increased.

Objective:

Disaster response capacity of the national societies in the region is strengthened through the development of disaster preparedness plans and a regional disaster management strategy, including a contingency plan.

Expected Results:

- By the end of 2004, all national societies in the region have disaster preparedness plans, including contingency plans, within their respective national contexts.
- By the end of 2004, a strategic regional disaster management plan – based on regional needs, opportunities and threats, outlining the specific roles and responsibilities of national societies – is in place. In addition, disaster response mechanisms are in place at the regional delegation enabling it to be ready for prompt action.
- Close cooperation with the regional health and care, communication and organisational development programmes establishes a disaster management plan within national societies
- By mid 2004, the regional disaster response team (RDRT) is staffed, trained and equipped, and a computerised regional database to track resources is established.
- A disaster management programme for the southern sub-region is running throughout 2004 providing continued support to national societies in their work with the Stability Pact DPPI.
- A disaster management programme for the northern sub-region is running from April 2004 establishing contacts with relevant programmes within the EU.
- By the end of 2004, a disaster management network is in place in Bosnia and Herzegovina.

3. Humanitarian values [<Click here to return to title page>](#)

Note: This section has been incorporated into section no.5. The reason for this is that the regional delegation in 2004 will be reduced in size and will no longer have a delegate position for communication and humanitarian values. Therefore, the humanitarian values, advocacy and coordination functions will be integrated, reflecting the new ways of working of the regional delegation, as described in the Central Europe Regional Strategy.

4. Organisational Development [<Click here to return to title page>](#)

Background and achievements

For more than a decade national societies in Central Europe have been struggling to adjust their programmes to new and increasing needs while simultaneously adapting structures and ways of working in the face of profound legal, political and economic changes. The Federation's regional delegation's organisational development programme has supported national societies to manage this difficult transition.

The programme has focused on: facilitating organisational change in national societies; assisting them to create strategies in line with Strategy 2010 (the Federation's main programming strategy document); and upgrading their financial management systems. Particular support has been provided to the Latvian Red Cross and to the Romanian Red Cross in designing a comprehensive change process. Consultations have started with the Polish Red Cross to find a solution to the society's financial difficulties.

To encourage strategic planning in national societies, training has been organised in project planning process (PPP, the Federation's main project planning tool) as well as in participatory working methods at branch and community level. Five national societies have implemented community-based projects. Encouraged by the success of their neighbours more are planning to do so in 2004. The regional youth programme has promoted networking and provided training and materials for annual awareness campaigns in disaster preparedness and health.

Lack of financial resources remains a concern of most societies. The regional delegation has provided support in resource development on a project basis using consultants and facilitating exchanges between societies, as well as by providing training opportunities. Societies wanting to make their financial management systems more transparent and effective have received assistance in systems development, staff training and acquisition of equipment. A growing number of societies are revising and updating their statutes. They have also been engaged on the drafting of a Red Cross law. The regional delegation has provided some support, sharing knowledge and expertise, but more needs to be done.

In spring 2003, national societies were consulted about priorities for Federation support in 2004-2005. A significant number pinpointed aspects of organisational development, such as updating of statutes, governance and management, volunteer development, financial management and fundraising. Organisational development support from the regional delegation will support these needs during the coming two years. This will be done through the different components of the programme, namely: organisational development (statutes, governance & management), financial and resource development, branch and community based programmes, youth and volunteer management, and EU integration.

Goal:

The capacities of Central European national societies to organise people, mobilise resources and adjust their structures to better respond to new vulnerabilities in their communities are strengthened.

4.1. Governance and Management

Background:

According to the Central Europe regional strategy, regional delegation support to national societies will shift from direct implementation to focus more on networking, knowledge sharing, promotion of partnerships and facilitation of consultancies. On a case by case basis the regional delegation will consult, support and offer services in key areas such as governance and management, strategic planning, project planning, reporting, human resources development and national society statutes and law. To do this, a regional team will be used that will include regional delegation staff as well as experienced people from Central European national societies and partner societies. Outside consultants will be contracted as needed and skills in the region will be utilised when possible.

Organisational development projects will continue with the Latvian Red Cross, which is undergoing a restructuring and a financial management overhaul, the Serbia and Montenegro Red Cross (see separate appeal), and the Romanian Red Cross, which embarked on a comprehensive change process in mid-2003. Support to the Romanian Red Cross covers a broad range of functions, including governance and management, financial and human resources as well as communication. During the first half of 2003 the Romanian Red Cross, supported by the regional delegation, produced a two-year development plan for July 2003-June 2005. The programme began in the summer of 2003, with the help of a grant from the Federation capacity building fund towards the first project year. The regional delegation will continue to provide consultations and coaching throughout the process.

The content of organisational development support to the Polish Red Cross is being defined. It will have a strong component of financial management, but will also include human resources and structural issues. The regional delegation will support the Macedonian Red Cross during the four first months of 2004 because of the closure of the Federation delegation in Skopje. Assistance will be given to finalise reporting and administrative tasks related to a refugee programme. The regional delegation is prepared to assist other national societies, as requested, based on specific organisational development matters.

Objective:

The national societies successfully implement the planned change processes, upgrade their capacities in governance and management and service delivery, and enhance their public image.

Expected Results:

- The skills of national society staff and volunteers in planning, project management and reporting are improved, and programmes are adjusted to better respond to new vulnerabilities and needs.
- National societies revise and update their statutes as needed, and modify their structures to suit their new roles and services as well as resources.
- Regional networks and sharing of best practices are strengthened; a regional pool of expertise is set up.

4.2. Financial Management and Financial Resource Development

Background and Achievements

An increasingly competitive humanitarian market with many organisations chasing the same funds, and the forthcoming EU accession in May 2004, is a challenge for the region's national societies. The environment is prompting adjustments and modernisation of current financial management systems. Financial transparency and accountability are preconditions for successful fundraising. Winning public and donor confidence is vital for national societies as they endeavour to meet the needs of the most vulnerable people.

Over the past two years, the main achievements in financial management development are: one national society (Estonia) has completely reorganised its financial management system, four (Latvia, Serbia and Montenegro, Romania, Bulgaria) are in the process of reorganisation, two (Poland, Macedonia) are planning such a process, and three (Lithuania, Slovakia and Slovenia) will in the near future. Reorganisation of financial management systems is related to the wider organisational development plan of a national society. It can only be successful if implemented in that context. Romanian Red Cross is an example of a national society where this issue has been approached in a holistic manner. Financial reorganisation was an integral part of the society's two-year organisational development plan. Lessons learned showed that a lack of good financial management practice is a poor base for any fundraising activities.

Objective:

The ability of national societies to handle their finances in a more transparent and accountable manner and to find more diversified and sustainable funding is improved.

Expected Results

- National societies have new financial management systems in place and financial management skills of personnel are enhanced.
- Fundraising skills of national society personnel are enhanced.
- An active regional network of national society fundraisers is established.

4.3. Branch and Community Development

Background:

The participatory community development programme was a pilot in five Central European countries from 2000-2002. Micro projects were successfully implemented in 20 communities, based on the needs of vulnerable people, such as:

- Provision of a community centre for vulnerable people;
- Provision of vocational training for unemployed adults;
- Renovation of schools to provide better conditions for children;
- Provision of hygiene programmes, including increasing the number of garbage containers in the community and building outdoor toilets;
- Establishment of a self help club and centre for disabled people; and
- Vaccination of community members.

As a result of the pilot participatory community development period, national societies in those countries are more aware of vulnerabilities and know better how to work with vulnerable people.

National societies also managed to attract new volunteers through participatory community development. For example in Hungary, three new volunteer branches were established. New partnerships between national societies and stakeholders resulted in new ways of cooperation, as well as new sources of funding. One community won a PHARE proposal and will continue the community development process with EU support.² A pilot advocacy campaign was carried out in Hungary with in kind support from Saatchi & Saatchi.

A regional participatory community development team has been established. A participatory community development branch development tool was designed and the package includes: a training manual for national and local coordinators; a series of booklets for local participatory community development team members; and a leaflet about the process. This package will be useful for those societies that are already implementing a participatory community development project as well as for those planning to use the approach in branch capacity building.

Most countries involved in the programme continued participatory community development on their own, with delegation technical support, integrating the approach in core activities, such as health and social welfare. In 2003-2004 five countries (Hungary, Bulgaria, Macedonia, Serbia and Montenegro, and Romania) will use the participatory community development branch development tool.

To share knowledge, interregional cooperation in participatory community development was started with the Amazonico programme in South America and with the Armenian Red Cross. The Azerbaijan Red Crescent is also using participatory community development materials during its branch development process. Instead of being a separate programme, participatory community development will, in 2004, be used as a branch development tool. The regional delegation coordinator will advise. In the course of two years participatory community development has become a basic tool for well functioning national societies, used particularly in branch development, in the region as well as beyond.

Objective:

Participatory community development is known and used as a tool for Red Cross and Red Crescent societies for their community-based projects.

Expected Results:

- The second round of implementation of participatory community development is finished by April 2004 in Bulgaria, Hungary, Serbia and Montenegro and Macedonia.
- The twinning pilot participatory community development is continuing between the Hungarian and the Romanian Red Cross supported by the regional delegation.
- Two additional national societies will implement a participatory community development programme in Central Europe.

² PHARE is an EU programme to assist accession countries in Central Europe on their preparation for joining the EU.

- The existing participatory community development facilitators network is reinforced and expanded to a well functioning worldwide network.
- Trained participatory community development consultants are available in Central Europe.

4.4. Regional Youth Development Programme

Background:

The regional youth development programme continued to support established youth networks as well as provide services, know-how and other assistance to national society youth sections. In addition, the programme focused on the two regional awareness and advocacy campaigns, Hunger Day and Candle March.

In 2003 the programme focused on developing some tools to strengthen youth sections within the region. Two CD-ROMs were produced. The first captured agreements, achievements and outcomes, from the 6th Central European regional conference, important for future development of youth activities. The second CD-ROM is a tool to implement and reinforce the Hunger Day campaign, currently being carried out in eight countries and more than 150 local branches. The CD-ROM, once distributed and translated by national societies into their own languages, will reach every local branch and be a great promotional tool.

In 2004 the youth programme will continue its cooperation and integration of youth into different programmes at the regional as well as national level. Disaster management will continue the 'From Needs to Action' project in two additional countries where the youth is heavily involved. The health and care programme will continue to utilise young volunteers in the field of HIV/AIDS and on the European Road Safety Campaign. Furthermore, the regional delegation's communications unit will support advocacy on youth issues.

The regional delegation youth officer position is due to finish in 2004. Instead, one of the region's national societies will play a coordinating role, supported by the delegation. The regional delegation will continue to support networking and knowledge sharing between youth officers on relevant issues. It will also maintain its engagement in youth volunteer development, the regional youth resource team (otherwise known as international trainers team) as well as supporting the organisation of youth workshops on specific issues. It will also work to ensure the continuation of two regional awareness campaigns per year.

A regional youth conference will be held in May 2004 to: evaluate the phasing out of the youth officer position; prepare common regional plans; and present possible outcomes to a partnership meeting.

National society youth section representatives, their volunteers and international trainers team members have been actively involved in the regional youth development programme for years. While they continue to express a need for further training and knowledge sharing, they are well equipped to serve vulnerable people across the region.

Objective:

The existing regional youth network is strengthened through meetings and learning from each other's approaches.

Expected results:

- The 7th Central European regional youth conference will be organised in May 2004.
- International Trainers Team members act as trainers in various activities conducted within Central Europe.
- National society youth sections benefit from access to relevant information.
- National society youth sections assist in organising their own training through advice, tools, manuals and experienced human resources with necessary expertise from the region.
- Programme related networking and cooperation initiatives are supported.

4.5 European Union Integration Support

Background and Achievements

Preparations in Central Europe for an enlarged European Union have been ongoing for several years. Since December 2001 a think tank – mandated by a general assembly of the 15 national Red Cross societies of the EU member states and the Federation – has tried to smooth the transition. The Red Cross EU Office in Brussels, the regional delegation in Budapest and the Federation secretariat in Geneva have been working together on the issue.

A plan of action, approved in December 2002 by another general assembly of the EU grouping of Red Cross societies, agreed that national societies of EU accession states would be entitled to observer status at the Red Cross' EU office. This enabled them to attend internal office meetings without voting rights and to have access to information without needing to make any financial contribution to the office, during that period.

EU enlargement brings challenges and opportunities to accession national societies. As well as new funding there are opportunities to enhance cooperation and partnerships with national societies in EU countries. The regional delegation and the Red Cross' EU office are committed to supporting EU accession national societies to make the most of new opportunities. This assistance will continue beyond the May 2004 accession.

In 2004 Red Cross officers for EU enlargement will remain in place in both Budapest as well as Brussels. The Budapest officer is the focal point for all EU accession National Societies and related enlargement issues. The Brussels officer is responsible for providing information (e.g. on funding, calls for proposals, common position papers, information on meetings etc) and support to the Budapest regional delegation. Information is provided to all EU accession national societies by intranet. EU accession state national societies have all appointed an EU enlargement focal person, who regularly links with the regional delegation. A special "EU Induction Meeting" was organised in Brussels in May 2003, and a follow-up training, based on needs, is scheduled for early 2004, before accession.

Some of the accession national societies are participating in different EU-based programmes, in partnership with EU member national societies, mainly Austrian Red Cross, British Red Cross and Italian Red Cross. The delegation regularly passes on information about EU enlargement issues and calls of proposals in social welfare and health to national society counterparts.

Objective:

The capacity of national societies to be part of a network with their EU partners and other representatives of civil society is improved, enabling them to benefit from existing knowledge and experiences, especially in obtaining EU funds.

Expected results:

- The capacities of national societies in identifying relevant funding opportunities and obtaining EU funds are strengthened
- National society skills in producing a successful project proposal are improved
- Partnerships between EU member national societies, NGOs and international organisations are reinforced.
- Cooperation between the national societies, the Red Cross EU office and different Red Cross networks is strengthened.
- The information flow and knowledge and experience sharing among national societies, the Red Cross EU office and different Red Cross networks is strengthened.

5. Coordination, Advocacy and Humanitarian Values [<Click here to return to title page>](#)

Note: This section reflects the integration of humanitarian values, advocacy and coordination functions in a smaller regional delegation in 2004, and the new ways of working described in the Central Europe Regional Strategy. For this reason there are no separate texts under section 3 – Humanitarian Values – and section 6 – International Representation and Advocacy.

Background and Achievements:

The central function of a regional delegation is to support national societies in the region through technical backing as well as facilitation and coordination of assistance. In line with the Central Europe Regional Strategy 2003-2006, the role of the Budapest delegation will continue to evolve in 2004, reflecting changing needs and diminishing funding. With a reduced staffing level, the regional delegation will focus on maximizing its coordination and cooperation role and developing existing Red Cross networks and strategic partnerships. This is the approach being used at a technical programme level – in health and care, disaster management and organisational development – as well as with wider image and profile building and advocacy, both nationally and internationally.

In 2004, the regional delegation's role in the promotion of humanitarian values and principles will be defined. It will take account of existing social challenges, EU enlargement, re-emerging ties within south-eastern Europe, reduced Federation presence in Central Europe and continuing development of modern communications. Communication between national societies within the EU will be facilitated. In addition, relations with governments and media and existing Central European networks will be strengthened. All the above will take account of a phasing out of regional delegation support in the future.

National societies with strong communicators will be encouraged to share their experience and expertise with sister societies. Specific technical assistance for individual national societies may be met through consultancy arrangements. In the absence of a regional information delegate, Budapest's role will be limited to one of coordinating and developing cooperation opportunities, rather than direct technical input. The promotion of humanitarian values and principles will, however, continue through training and advocacy within the health and care, disaster management and organisational development programmes. Supporting this will be the continuing development of the regional Red Cross website.

The regional delegation will continue to support the development of national society advocacy initiatives in support of vulnerable people. Much advocacy will be based on strengthening partnerships with governments, international and national organisations and NGOs.

National societies have recognised the value of promoting the interests of vulnerable people at the national, regional and international levels. Federation support will concentrate on training (including on-the-job), as well as helping national societies better utilise internationally-recognised events and conferences, such as World Aids Day, to promote key messages.

The regional delegation's role in international representation will be crucial in supporting national societies in building their capacity as key auxiliary partners to their respective governments and obtaining government recognition of this role.

Efforts will be made to advance these objectives with regional organisations, in particular the EU, OSCE, UN Economic Commission for Europe and others. The regional delegation will support national societies to review their partnerships to ensure that these links work in support of vulnerable people.

In 2004, the Federation will support national societies to advocate on: HIV/AIDS prevention and anti-stigmatisation and the humanitarian impact of migration, particularly in terms of people trafficking. The regional delegation, Brussels EU office and Geneva secretariat along with various regional agencies will cooperate to generate effective influence on these issues.

In light of diminishing external funding and assistance, the regional delegation's coordination of better resource management for and within the region will be crucial in 2004. The Budapest delegation will continue to lead members of the Movement, through a consultative process, to agree common objectives, criteria and methodologies based on national society priorities and plans. Various models for cooperation – such as the Nordic-Baltic partnership, the Austrian Red Cross partnerships with neighbouring Central European societies and branch twinning within the participatory community development programme – will continue to be developed and experiences shared.

In this way, existing Red Cross resources can be best used to serve the most vulnerable communities. 2004 will see increasing commitment to new ways of working, with emphasis on knowledge sharing, partnerships, consultancy arrangements and a reduction of hands-on programme implementation by regional or country delegations.

Goal:

Awareness of the situation of the most vulnerable groups in Central Europe is improved among various governments, UN agencies, regional organisations, international and national NGOs, the private sector and other stakeholders.

Objective:

The role of Central European national societies in voicing and responding to the needs of the most vulnerable groups in the region is recognised, supported and strengthened.

Expected Results:

- National societies are recognised as prominent actors in the strengthening of civil society, and as dialogue partners on national and regional vulnerability issues. They enjoy good relations with the government reinforcing their role and mandate, resulting in support for programmes and policy objectives.
- The Red Cross is recognised as a reliable partner and independent source of information on humanitarian issues for the media
- Knowledge sharing between Central European national societies and with other regions is increased and networking is strengthened and expanded.
- Regional resources are efficiently and effectively used to respond to regional needs and strategic partnerships with government, UN agencies, organisations and authorities provide a basis for more effective resource management and mobilisation that benefit national societies.
- Advocacy materials are made available to various partners, agencies, organisations and authorities.

6. International Representation

Note: Activities in this area are incorporated into “Coordination, Advocacy and Humanitarian Values” (section 5). This reflects a smaller regional delegation integrating international representation and advocacy functions into humanitarian values in 2004. It also indicates a new way of working as described in the Central Europe regional strategy.

Central Europe Appeal 2004

This appeal highlights the main aspects of the Federation’s assistance programme in Central Europe. It draws on a more detailed plan of action, guiding international support to national societies in Central Europe. The plan is constructed along the lines of a logical framework whereby activities feed into expected results, which feed into project objectives (where relevant), programme objectives and designated goals. The plan of action includes all activities, indicators, means of verification, assumptions/risks, detailed budget plans, timetable of implementation as well as monitoring and evaluation mechanisms.

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All International Federation Operations seek to adhere to the Code of Conduct and are committed to the Humanitarian Charter and Minimum Standards in Disaster Response (SPHERE Project) in delivering assistance to the most vulnerable.

For support to or for further information concerning Federation operations in this or other countries, please access the Federation website at <http://www.ifrc.org>

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BUDGET 2004

PROGRAMME BUDGETS SUMMARY

Appeal no.: 01.75/2004

Name: Central Europe Regional Programmes

PROGRAMME:

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	Emergency	Total
	CHF	CHF	CHF	CHF	CHF	CHF	CHF
Shelter & construction	0	0	0	0	0	0	0
Clothing & textiles	0	0	0	0	0	0	0
Food	0	0	0	0	0	0	0
Seeds & plants	0	0	0	0	0	0	0
Water & Sanitation	0	0	0	0	0	0	0
Medical & first aid	0	0	0	0	0	0	0
Teaching materials	0	0	0	0	0	0	0
Utensils & tools	0	0	0	0	0	0	0
Other relief supplies	0	0	0	152,000	0	0	152,000
SUPPLIES	0	0	0	152,000	0	0	152,000
Land & Buildings	0	0	0	0	0	0	0
Vehicles	0	0	0	0	0	0	0
Computers & telecom	0	0	0	58,000	0	0	58,000
Medical equipment	0	0	0	0	0	0	0
Other capital exp.	0	0	0	0	0	0	0
CAPITAL EXPENSES	0	0	0	58,000	0	0	58,000
Warehouse & Distribution	0	0	0	0	0	0	0
Transport & Vehicules	16,180	32,400	0	17,680	16,680	0	82,940
TRANSPORT & STORAGE	16,180	32,400	0	17,680	16,680	0	82,940
Programme Support	31,386	27,098	0	64,238	47,156	0	169,878
PROGRAMME SUPPORT	31,386	27,098	0	64,238	47,156	0	169,878
Personnel-delegates	96,000	71,999	0	78,000	234,000	0	479,999
Personnel-national staff	34,650	104,200	0	151,560	154,976	0	445,386
Consultants	0	50,000	0	70,600	6,500	0	127,100
PERSONNEL	130,650	226,199	0	300,160	395,476	0	1,052,485
W/shops & Training	156,450	85,000	0	252,000	39,000	0	532,450
WORKSHOPS & TRAINING	156,450	85,000	0	252,000	39,000	0	532,450
Travel & related expenses	61,000	18,000	0	74,599	46,250	0	199,849
Information	77,000	0	0	33,200	37,954	0	148,154
Other General costs	10,200	28,200	0	36,400	142,960	0	217,760
GENERAL EXPENSES	148,200	46,200	0	144,199	227,164	0	565,763
TOTAL BUDGET:	482,866	416,897	0	988,277	725,476	0	2,613,516