

# Appeal 2005



International Federation  
of Red Cross and Red Crescent Societies

## HORN OF AFRICA SUB-REGIONAL PROGRAMMES

[Djibouti, Ethiopia, Horn of Africa sub-regional office]

### Appeal no. 05AA005

*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, objectives, and related activities to be implemented in 2005, and the corresponding funding requirements. These are based upon the broader, multi-year framework of the Federation's Project Planning Process (PPP). The PPP products are either available through hyperlinks in the text, or can be requested through the respective regional department.*

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*Click on the title below to go to the relevant text; click on the figure to go to the programme budget*

	2005
Programme title	in CHF
<b>Strengthening the national society</b>	
Health and care <a href="#">[Djibouti]</a> - <a href="#">[Ethiopia]</a>	77,326
Disaster management <a href="#">[Ethiopia]</a> – <a href="#">[Horn of Africa sub-region]</a>	165,317
Organizational development <a href="#">[Djibouti]</a> - <a href="#">[Ethiopia]</a>	253,700
<b>Coordination and implementation</b> <a href="#">[Horn of Africa sub-region]</a>	162,192
<b>Total</b>	<b>658,535<sup>1</sup></b>

*The following programmes are included in this Appeal narrative; however, their associated budgets are integrated within other programme budgets. Click the title to go to the narrative text:*

*[Djibouti Humanitarian Values](#) – [Ethiopia Humanitarian Values](#)*

*Please note that the above table presents the total Appeal budget per sector. The budget breakdown by country or office is shown at the end of each section.*

<sup>1</sup> USD 523,100 or EUR 424,200.

### **Sub-Regional Context**

The Horn of Africa is a region susceptible to the vagaries of harsh climate conditions and beset by the unfinished business of regenerating conflicts and peacemaking: the demarcation of the Eritrea-Ethiopia border remains at a stalemate while the signing of a 'breakthrough agreement' and the opening of the new parliament in Mogadishu during 2004 have marked the beginning of modest hope and progress in the 13-year old search for lasting peace and a government in Somalia. The signing of a peace deal by the Government of Sudan and the Sudanese Peoples Liberation Army/Movement (SPLA/M) signals a major breakthrough although is bound to present many challenges; the humanitarian crisis in Sudan's western region of Darfur is but among the many obstacles to come.

Food insecurity remains the major humanitarian problem of the region with a total estimated population of 28 million people at risk. Adverse weather conditions continue to plague the southern part of the region. Rains failed in Eritrea in four successive years, straining the coping mechanisms of millions of people. Two thirds of its population continue to live below the poverty line. The unprecedented drought in Ethiopia, with a peak in 2003, is affecting 13.5 million people, although it has abated. However, questions on how to find long term and sustainable solutions to the problem of perennial food shortages remain.

Djibouti and Somalia are classified as least developed, low-income and food-deficit countries. Pastoralists make up the majority of the countries. Djibouti has been for the past decades the refuge for hundreds of thousands of nationals from Ethiopia, Somalia and Eritrea, straining the already weak socio-economic fabric of the country. Somalia remains a divided country without a proper nationwide government in control. Frequent inter-clan clashes prevent the stability for any sustainable development, in particular in the middle and south of the country.

Sudan and Djibouti are prone to flooding that has led to massive destruction of property and loss of lives over the past 12 months.

Poverty and lack of access to social services serves to further compound the adversities facing the countries in the horn of Africa. The high prevalence of communicable diseases, e.g. HIV/AIDS, tuberculosis, malaria, cholera, typhoid, and diarrhoeal diseases has placed a huge burden on the health care service delivery in the whole Horn of Africa. Vaccine-preventable diseases such as measles continue to be a major cause of infant mortality. In most parts of the sub-region, poor sanitation and lack of access to safe water is of great concern as an ever increasing number of geographic areas become endemic to water borne and water related diseases.

The frequency and impact of the risk and disasters that beset the Horn of Africa are on the increase and require a holistic approach. Threats caused by climatic hazards necessitate further development of readiness measures as well as interventions to address the long term causes of food insecurity. Towards this end, a sub-regional food security programme for the Horn of Africa has been developed and is included in this Appeal, to cover all the five countries (Somalia, Sudan, Ethiopia, Eritrea and Djibouti)

Key human development indicators are presented for Djibouti and Ethiopia on the following page.

**Horn of Africa sub-regional programmes; Annual Appeal no. 05AA005  
(includes Djibouti, Ethiopia and sub-regional office)**

**Human Development Indicators at a Glance**

Category	Djibouti	Ethiopia	Sub-Saharan Africa	World
Total population (millions)	0.7	69.0	641.0	6,225.0
GDP per capita (USD)	861	90	469	5,174
Life expectancy at birth (years) - Female - Male	47.0 - 44.8	46.4 - 44.6	n.a.	n.a.
Infant mortality rate, per 1,000 live births	100	114	108	56
Maternal mortality per 100,000 live births (adjusted ratio)(2000)	730	850	n.a	n.a
Population (%) with sustainable access to an improved water source (2000)	100	24	57	82
HIV prevalence (% , ages 15-49) 2003)	n.a	8.5	7.7	01.1
Adult literacy rate (% , ages 15 and above): Female - Male	55.5 - 76.1	33.8 - 49.2	n.a	n.a

Source: UNDP Human Development Report, July 2004: Human Development Index (pages 139-250). Refer to [http://hdr.undp.org/reports/global/2004/pdf/hdr04\\_HDI.pdf](http://hdr.undp.org/reports/global/2004/pdf/hdr04_HDI.pdf) Note: Data is 2002 unless noted above.

For ease of reference, the table below lists the standard abbreviations and references used in this Appeal.

CAS – Cooperation Agreement Strategies	PHAST – Participatory Hygiene and Sanitation Transformation
CBFA – Community-based first aid	PLWHA - Persons living with HIV/AIDS
HBC – Home-based care	PNS - Partner National Society(ies)
IDP – Internally-displaced persons	RC-Net – Red Cross Red Crescent Network for East Africa
IEC – Information, Education, Communication	RDRT – Regional Disaster Response Team(s)
ITN – Insecticide-treated mosquito bed nets	VCA – Vulnerability and Capacity Assessment
Movement - International Red Cross and Red Crescent Movement.	VCT – Voluntary counselling and testing
ARCHI 2010 – refer to <a href="http://www.ifrc.org/what/health/archi/">http://www.ifrc.org/what/health/archi/</a>	
ERU – Emergency Response Unit(s) Refer to <a href="http://www.ifrc.org/what/disasters/eru/">http://www.ifrc.org/what/disasters/eru/</a>	
FACT – Field Assessment and Coordination Team(s). Refer to <a href="http://www.ifrc.org/what/disasters/fact/">http://www.ifrc.org/what/disasters/fact/</a>	
Strategy 2010 – refer to <a href="http://www.ifrc.org/who/strategy.asp">http://www.ifrc.org/who/strategy.asp</a>	
Ouagadougou Declaration – refer to <a href="http://www.ifrc.org/meetings/regional/africa/5thpac/5thpacde.asp">http://www.ifrc.org/meetings/regional/africa/5thpac/5thpacde.asp</a>	
Seville Agreement – refer to <a href="http://www.ifrc.org/meetings/statutory/ga/ga97/ga_97_8.asp">http://www.ifrc.org/meetings/statutory/ga/ga97/ga_97_8.asp</a>	

## **Djibouti**

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### **National Context**

Djibouti, the former French territory of Afars and Issas is a volcanic country of 23,000 square kilometres with an estimated population of 740,000. Almost 25% of the people are nomads; the land is among the least productive in Africa with low agricultural output. The scarcity of cultivable land has forced almost 75% of the population to move to urban areas where they live in shanty towns around the Capital, Djibouti Ville. There is a limited amount of manufacturing and the main economic activity derives from Djibouti port which contributes more than one third of the national income; 60% of trade through the port continues to be with Ethiopia, though this is expected to decline in forthcoming years. Long term plans aim at developing relations with Gulf States.



Djibouti's unemployment rate is over 50%. Almost 40% of the population lives in extreme poverty. Poor sanitary conditions, lack of access to water and an intolerably hot climate encourage the spread of communicable diseases; cholera and malaria are endemic. The high number of prostitutes operating around the port area has resulted in an increased incidence of sexually transmitted diseases (STI); UNAIDS statistics cite a prevalence of HIV/AIDS amongst upwards of 11% of the population in the 15-49 age group.

Djiboutians are major consumers of qat, a mild intoxicant imported daily from Ethiopia that is estimated to consume up to 40% of household expenditure, thereby further compounding the critical health and economic conditions of most families and leading to decreased productivity.

The current focus on combating international terrorism is having a positive impact on the economy of Djibouti. The country's strategic location between the Somali and the Arabian coasts is bringing financial and political rewards. A German naval base was established in January 2002 to monitor sea traffic between Somalia and the Arabian Peninsula. The U.S. Government followed shortly afterwards with the establishment of its base of 1,500 troops for anti-terrorist action in the Horn of Africa. Closer relations with the U.S. will assist the government in its negotiations with international financial institutions which are becoming increasingly frustrated with Djibouti's inability to apply fiscal disciplinary measures, particularly the lack of progress in the area of privatization.

There is an increasing interest from international humanitarian organizations to respond to the enormous needs in the country. The Red Crescent Society of Djibouti, the only humanitarian organization with a network throughout the country, is well-placed to partner with some of these organizations. The national society continued to make progress in re-establishing itself in 2004 being dormant for a number of years; volunteers have been trained and are carrying out activities in the areas community health and dissemination activities. The focus of support from the Movement is to increase the national society's visibility through building strong and active structures at central and branch level.

A flash flood swept through parts of the Capital, Djibouti Ville, in April 2004, killing around 50 people and rendering at least 600 people homeless in the slum areas. Over 100 mm of rain - nearly the total for the whole year - fell in a two-day period.

## **Red Cross and Red Crescent Priorities**

### **National Society Strategy / Programme Priorities**

The Board of the Red Crescent Society of Djibouti<sup>2</sup> is keen to see the national society make some impact on the growing poverty and deteriorating health conditions of the population. Prevention and control of cholera, malaria and HIV/AIDS will remain a priority. It is planned to extend a pilot water and sanitation (WatSan) project based on the PHAST to other sectors of the country. A second priority will be the setting up of an effective structure at headquarters that can provide regular support to the development of branches.

### **Movement Context**

The International Federation will continue to support activities to strengthen the capacity of the Red Crescent Society of Djibouti to implement effective programmes at community level. This will mean assisting the national society to adapt a number of Movement policies to its environment and to put the necessary systems in place to implement these. Facilitation will be assured through the expertise from neighbouring national societies as well as the Federation Regional Delegation.

The first ever General Assembly is still scheduled before end 2004 and will be supported by both the Federation and the ICRC. A strategic planning process will begin once a new governing board is in place to enable the national society to produce a marketing tool for presentation to new local and international partners. The ICRC will contribute to the development of branch structures by supporting first aid activities as well as the costs of three personnel at the headquarters. Support from the French Red Cross to health activities which ended in 2002 has not resumed. The Red Crescent Society of Djibouti is expected to further develop its cooperation with Islamic national societies who support ad-hoc initiatives.

## **Strengthening the National Society**

### **Health and Care**

#### **Background and Achievements**

The community health information programme initiated in the three southern districts of the country at the end of 2002 was extended to the northern districts in the first half of 2003. A facilitator from the Sudanese Red Crescent was deployed for five months in 2003 to assist the Red Crescent Society of Djibouti in the design and implementation of training programmes in the area of malaria and HIV/AIDS prevention, and in the preparation of subsequent community information campaigns. More than 20 volunteers recruited and trained in five districts and equipped with IEC materials including T-shirts and caps are carrying out community awareness campaigns on a regular basis. The volunteers now feel more comfortable in discussing HIV/AIDS with their peers. The fact that most districts managed to recruit almost equal numbers of male and female volunteers to assist in the health information activities means that malaria and HIV/AIDS prevention information is being passed on to women who would normally have very little access to this. Women are reporting fewer incidences of illnesses amongst their children in some districts. The visibility of the Red Crescent Society of Djibouti has increased due to its closer contact with communities.

The integrated health project initiated in May 2004 in Belbela Secteur 9 in Djibouti city is scaling up its activities through funding from DFID for which a Health Officer will be hired to give technical support to the Project Co-ordinator. Activities to be scaled up include PHAST/ARCHI refresher courses for volunteers; intensification and consolidation of health promotion activities such as HIV/AIDS peer education; diversification of IEC promotional materials to harness volunteers' skills in community health promotion activities; intensification of advocacy against female genital mutilation (FGM) for improved reproductive health campaigns; and promotion of the use of insecticide-treated mosquito bed nets (ITN) by pregnant women and children aged below five years. A clear monitoring and evaluation system for integrated health will be designed and streamlined into the project and key lessons documented and shared within the region. Partnerships with other stakeholders will be strengthened including engagement in policy development and streamlining of health and HIV/AIDS operations through joint community mobilization and development of IEC materials.

<sup>2</sup>The Red Crescent Society of Djibouti - <http://www.ifrc.org/where/country/check.asp?countryid=57>

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The evaluation of a joint HIV/AIDS prevention programme along the Ethiopian corridor initiated in June 2003 between the Red Crescent Society of Djibouti and SCF/US is scheduled for November/December 2004. The evaluation results will provide key pointers towards the development of an HIV/AIDS strategy for the national society and also feed into the scaling up of the integrated health project.

**Goal: Red Crescent Society of Djibouti has a sustainable impact upon the general health of targeted communities through its health programming.**

**Objective: The national society's capacity in community health and care programming is facilitated through Federation support.**

**Expected Results:**

1. The profile of the Red Crescent Society of Djibouti as a key actor in solving community health problems has been raised by 2005.
2. Integrated health and care pilot projects within the ARCHI framework have been expanded by 2005.
3. Strategic partnerships to address the challenges in public health and technical input for the same have been developed and promoted particularly with Save the Children, UNAIDS, UNICEF, UNFPA and the Government.
4. HIV/AIDS prevention activities have been expanded and the national society staff and volunteers have access to treatment.

*<Refer to the Logical Framework Planning Matrix: Djibouti Health and Care>*  
[http://www.ifrc.org/cgi/pdf\\_appeals.pl?/annual05/logframes/africa/05AA005HC1.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?/annual05/logframes/africa/05AA005HC1.pdf)

**Humanitarian Values**

A task-force meeting of the communications forum of the Regional Red Cross Red Crescent Network for Eastern Africa (RC-NET) held in Nairobi in August 2003 requested closer support from the regional information unit in developing the capacity of the information units of national societies. The forum met in February 2004 where issues such as harmonization and standardization of communications practices as well as the opportunity to design regional or sub-regional promotion of humanitarian values campaigns were addressed.

**Background and Achievements**

Just like the national society itself, the information unit of the Red Crescent Society of Djibouti has been rather dormant over the past years. However, its visibility increased at national level thanks especially to the HIV/AIDS programme. The involvement of the Red Crescent Society of Djibouti information counterpart in regional activities will be encouraged through participation in the regional communications forum. The regional information unit will provide technical support and coaching to increase the visibility of the national society particularly within the health and HIV/AIDS prevention activities.

**Goal: Movement principles and humanitarian values are known and respected throughout the region; discrimination against vulnerable groups is reduced.**

**Objective: The Information Unit of the Red Crescent Society of Djibouti is an active member of the regional communications forum, has developed its potential to respond to humanitarian emergencies, and has increased the capacity of the national society to promote Movement principles and humanitarian values in the Eastern African region**

**Expected Result:**

1. The development and capacity building of the national society's information unit to meet minimum technical, professional and human resource standards - as approved by RC-NET - has been completed.

*<Refer to the Logical Framework Planning Matrix: Djibouti Humanitarian Values>*  
[http://www.ifrc.org/cgi/pdf\\_appeals.pl?/annual05/logframes/africa/05AA005HV1.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?/annual05/logframes/africa/05AA005HV1.pdf)

## **Organizational Development**

### **Background and Achievements**

The re-launching of activities by the Red Crescent Society of Djibouti continued in 2004 through the facilitation of the regional delegation and national societies in the region; Red Crescent structures were in place in all six regions by early 2004. Steering committees constituted in regional branches were expected to hold regional assemblies in the last quarter of 2004 with a view to organizing the national society's first-ever General Assembly and the election of a new National Committee by end 2004 or early 2005.

The acquisition of a vehicle in early 2004 allowed the national society to maintain more regular contact with and to provide follow up to branch activities during the year.

Good relations with local authorities through the restructuring process have resulted in offices being allocated to the national society committees in most regions. The programme has funded minor repairs and provided basic furniture to these offices which are proving to be an important community resource, attracting new volunteers as well as increasing numbers of community members seeking health information. The appointment of an administrator and coordinators in disaster preparedness and information/dissemination with the support of ICRC has helped to ensure that headquarters structures are put in place to provide support and coordination of regional committees as they develop their activities. Volunteer management issues need to be addressed to ensure that the newly-recruited and well-motivated community members implementing health information activities remain loyal to the national society.

**Goal: Implementation of the characteristics of a well functioning national society has improved in the Red Crescent Society of Djibouti in the three areas: foundation, capacity and performance.**

**Objective: The national society's institutional capacity and its progress towards operating as a well-functioning national society is enhanced through Secretariat support.**

### **Expected Results:**

1. The Red Crescent Society of Djibouti has elected committees in each of the six regions by mid-2005.
2. The national society has elected a new National Committee at its first General Assembly by end-2005.
3. The Red Crescent Society of Djibouti has designed a Strategic Plan by end 2005.
4. Red Crescent Society of Djibouti has attracted new volunteers through the effective implementation of its volunteer management policy by 2007
5. An adequate management structure is in place to facilitate successful implementation of the national society's activities by 2007.

*<Refer to the Logical Framework Planning Matrix: Djibouti Organizational Development>  
<[http://www.ifrc.org/cgi/pdf\\_appeals.pl?annual05/logframes/afrika/05AA005OD1.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/logframes/afrika/05AA005OD1.pdf)>*

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<b>Djibouti – Budget breakdown</b>	<b>2005</b>
<b>Programme title</b>	<b>in CHF</b>
<b>Strengthening the National Societies</b>	
Health and Care	77,326
Organizational Development	79,000
<b>Total</b>	<b>156,326</b>

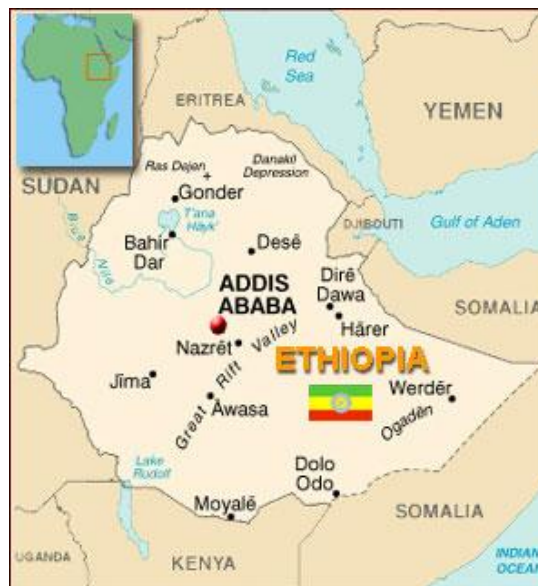
## Ethiopia

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### National Context

Ethiopia is one of the least urbanized and industrialized countries in the world; 85% of the population of 72 million people live in rural areas and are dependent on agriculture. Due to high population density in the highlands, deforestation and soil erosion are major problems. This in turn leads to a rapid deterioration of agricultural land and a decline in agricultural productivity; five to seven million Ethiopians suffer from chronic food insecurity. In years when rainfall fails, large groups of the population become completely dependent on emergency food assistance.

A worsening famine situation began developing in Amhara, Oromia, Afar, and Somali regions during the last quarter of 2002.



During the whole of 2003 the Federation supported the Ethiopian Red Cross Society in an emergency relief programme in two zones of South Wollo and West Harerghe. In South Wollo, 48,520 persons in Ambassel and Kutaber woredas were supported through a 'cash for work' programme between December and August while 10% received free distribution of food while. In Doba woreda of West Harerghe where the situation was more delicate, 87,975 persons received free food over 12 months.

The national society was also involved in a drought relief operation coordinated by the ICRC, reaching more than 800,000 people throughout the country.

Due to severe chronic food shortage, the government initiated a major resettlement program in 2004. However, increased vulnerability of the resettled populations to malnutrition and malaria outbreaks prompted the government to stop the programme in 2004 in order to address the problems.

There have been two wars between Ethiopia and Eritrea over border disputes since the latter gained independence in 1993. An April 2002 ruling by the boundary commission of the permanent court of arbitration in The Hague on the disputed border has not yet been implemented due to its perceived complexity and ambiguity; both sides claim to have the right to the town of Badme which was one of the causes of the last conflict. The region of Gambella on the border of Sudan has encountered several instances of internal conflict with devastating repercussions on security and sustainability of the region.

Currently about 50% of Ethiopians have access to health services, 24% has access to safe water, and 12% has access to adequate sanitation facilities. These factors all feature highly in the causes of morbidity and mortality. HIV/AIDS is a serious threat and has had devastating economic and social implications. The recently adopted poverty reduction strategy which is the main tool for the government to combat weaknesses of social structures and improve the situation of the vulnerable populations continues to receive support from international donors.

## **Red Cross and Red Crescent Priorities**

### **National Society Strategy/Programme Priorities**

The Ethiopian Red Cross Society<sup>3</sup> faces many challenges in developing its structure to facilitate consistent response to the needs of the communities. The size of the country and the inaccessibility of much of the terrain strain the capacity of the headquarters to give structured support to many of its branches. Strong branches are essential if the national society is to maintain its profile in the areas of disaster preparedness, health and care, HIV/AIDS and respond to natural emergencies. One of the national society's main priorities for the period 2004-2007 will be to focus on streamlining its structure and human resource base to achieve higher efficiency and effectiveness in programme management. Capacity building of staff at headquarters and branches will be essential in this process to which the Federation will give its full support.

With its large network of branches, the national society is a key player in efforts to reverse the negative trends affecting an increasing number of vulnerable people. HIV/AIDS is a core theme in the national society's Strategy 2005. The national society has one of the largest and most ambitious WatSan projects in the region supported bilaterally by several PNS over the last three to four years. The community based health and care programme is continuously developing an active volunteer base which gives health advice and education to the population in the most remote areas of the country. The national society has a good track record in mobilizing the population at times of mass vaccination campaigns and in responding to food security crises. Within the framework of the global and regional disaster preparedness and response strategy of the Federation, national society disaster preparedness Strategy 2010 has recently been outlined, focusing on the reinforcement of disaster preparedness, disaster response and food security capacities of the national society. The following are structural and organizational achievements of the national society over the last three years:

- Elections for the executive boards at branch and national level in 2004, a governance code of conduct distributed to all branches (2000-2001) and a Cooperation Agreement Strategy (CAS) developed in 2003.
- Better management, information and financial systems have been developed but are not yet fully operational.
- Internet connections have been introduced for all key staff and a new system installed in 2004 will be made fully functional during 2005
- A branch development manual was drafted, regional branches initiated (2000) and regional and zonal branches strengthened (continuous). Some branches were involved in the emergency food relief assistance (2002-2003) and meningitis epidemic control operations, as well as measles immunization campaigns, from which they gained considerable experience.

Further priorities of the national society in the coming four years will be to:

- Further streamline its structure, systems and human resources capacities to fully respond to the needs of efficient and effective programme management
- Build strong disaster preparedness and food security capacities in the branches to enable it effectively respond to health and food security emergencies;
- Further develop its volunteer management system to ensure proper coaching and deployment of volunteers in development as well as emergency programmes
- Scale up the HIV/AIDS programme and other ARCHI 2010 activities, in particular WatSan,
- Increase efforts to promote and defend humanitarian values
- Further increase the profile of the national society as a valid partner in humanitarian and development assistance.

The national society will continue implementing the long-term programmes such as the essential drugs programme that operates 38 pharmacies, blood banks and ambulance services. This will be achieved by further strengthening headquarters and branch capacity through skills development in programme management, reporting, and volunteer management and mobilization.

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<sup>3</sup> Ethiopian Red Cross Society - <http://www.ifrc.org/where/country/check.asp?countryid=65>

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The Federation continues to provide technical support to the implementation of community based health and care, HIV/AIDS, WatSan, disaster preparedness, organizational development and initiatives on the promotion of human values.

**Movement Context**

The Movement has been present in Ethiopia for many years. The ICRC and the Federation work closely in supporting Ethiopian Red Cross Society in development as well as relief programmes and capacity building; the ICRC also maintains its traditional activities in conformity with its mandate.

The national society's development programmes are carried out throughout the country with support from partner national societies (PNS), the ICRC and the Federation. These programmes encompass areas such as humanitarian values, WatSan, community-based first aid (CBFA), HIV/AIDS and disaster preparedness. Others are the ambulance service, blood donor recruitment and the essential drugs programmes.

The Ethiopian Red Cross five-year strategic development plan (2001-2005) guides all activities of the national society. The Federation assists in the coordination of the support from PNS through a Cooperation Agreement Strategy (CAS). A third partnership meeting will be held in 2005 during which partners will extend their support to the national society in line with the CAS. These include:

- § The American Red Cross in HIV/AIDS, WatSan and emergency relief
- § The British Red Cross in WatSan, HIV/AIDS and disaster preparedness
- § Danish Red Cross in HIV/AIDS, essential drugs programme, and the North Wollo programme
- § The German Red Cross in branch development and health and care
- § The Netherlands Red Cross in health and care and HIV/AIDS
- § The Spanish Red Cross in WatSan and health and care
- § The Swedish Red Cross in organizational development and WatSan
- § The ICRC for mines action, HIV/AIDS, international humanitarian law and tracing

Through these programmes, emphasis is put on strengthening the national society's programme management capacity, and reinforcing the funding base at national, regional and branch levels. The national society initiated two major reviews of their reporting and human resources capacities in 2003 with support from the Movement. Most of the recommendations from the reporting review were implemented during 2004, and the process of implementation of the recommendations from the human resources review should start early in 2005. Together with the Federation and the ICRC, British Red Cross, Danish Red Cross, German Red Cross, Netherlands Red Cross, Spanish Red Cross, Swedish Red Cross and American Red Cross have indicated their willingness to continue supporting the national society's projects throughout the 2004-2007 planning period.

**Primary support to the Ethiopian Red Cross from the Movement in 2004-2005**

<b>Partner</b>	<b>Health</b>	<b>HIV/ AIDS</b>	<b>Relief</b>	<b>Disaster management</b>	<b>Humanitarian values</b>	<b>Organizational development</b>
ICRC	xx	xx		xx	xx	
Federation	xx	xx	xx	xx	xx	xx
American Red Cross	xx		xx			xx
British Red Cross	xx	xx		xx		xx
Danish Red Cross	xx	xx				xx
German Red Cross	xx					xx
Netherlands Red Cross	xx					xx
Norwegian Red Cross						xx
Spanish Red Cross	xx					xx
Swedish Red Cross	xx					xx

## **Strengthening the National Society**

### **Health and Care**

#### **Background and Achievements**

The national society focuses on preventive health services to the community through its social mobilization programmes for immunization, clean-up campaigns, and dissemination of health messages. Community based first aid (CBFA) and nutrition information provided by volunteers were an essential component of the drought relief operation in 2003; this initiative was further developed during 2004. The capacity of the CBFA programme will be further reinforced through the development of a volunteer management system and further training of the volunteers with an emphasis on close coaching and monitoring of volunteers working in and with the communities.

Many branches operate an ambulance service in a programme which has recently undergone a complete review within the framework of ICRC support to the CBFA programme. The blood transfusion service runs ten blood banks around the country and produces 80% of the nation's blood and blood products. The essential drugs programme has 38 pharmacies which provide affordable drugs to thousands of people every day.

The national society plays a crucial role in community mobilization for national measles campaigns; it deployed more than 300 volunteers in 2003 and 450 in 2004 during the vaccination campaigns. The national society is planning to broaden its contribution to measles control efforts in the country by mobilizing its volunteers to reach all eligible children. This will further enable it to contribute to the routine immunization programme.

#### **HIV/AIDS**

With only 1% of the world's population, Ethiopia has over 9% of the global HIV/AIDS cases. Globally, Ethiopia has the 16<sup>th</sup> highest HIV/AIDS prevalence and the second largest number of PLWHA in sub-Saharan Africa. The Ministry of Health predicts that the number of PLWHA will increase to 3.2 million by 2006, and that AIDS deaths will increase from about 350,000 to 6 million by 2014.

Ethiopian Red Cross has been implementing HIV/AIDS preventive activities in several branches since the early 1990s with the support of the Federation and bilateral donors in its efforts to the government and other actors in addressing this grave problem. The main objective of the intervention is to promote behavioral change, to build capacities of families and communities to provide care and support for PLWHA, to advocate against stigma and discrimination associated with HIV/AIDS, ensure the provision of safe blood and to promote voluntary counseling and testing services.

Following the development of a national five years HIV/AIDS prevention and care strategy with the assistance of the Federation in 2001, the second phase of the Ethiopian Red Cross HIV/AIDS prevention and care Programme was launched in ten branches in April 2002 and later expanded to 22 branches in 2003. The Federation assisted the national society carry out an evaluation of its ongoing HIV/AIDS activities; it also gave support in the establishment of a HIV/AIDS coordination unit at the national society' headquarters. The programme is implementing three major activities of peer education, community mobilization to reduce stigma and discrimination, and assisting the provision of comprehensive home based care (HBC) to AIDS patients through training of care providers, nutritional supplement, psycho social support, and referral services. In 2002 and 2003 alone more than 40,000 youth and other community members were reached though peer education, while over 500 patients and orphans were supported through the HBC activities. Five self support groups of PLWHA were established with technical and material assistance rendered through the advocacy actions of the programme. The national society has initiated a workplace programme on HIV/AIDS prevention both at headquarters and branches.

#### **Water and Sanitation (WatSan)**

In response to demand in Ethiopia, the national society undertook to address the very low WatSan coverage in rural areas (one of the lowest in the region) linked to the high population density. Ethiopian Red Cross presently implements a large WatSan project with bilateral support from several PNS. Positive results have been achieved but areas of concern relate to long term strategy development, better linkages

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with health, improved ‘software’<sup>4</sup> using the PHAST, strengthening national level coordination, and project support while improving disaster response in the WatSan sector. The national society has a long-term goal of having all branches active in WatSan throughout the country which will significantly impact on the health of the communities.

The Federation will continue supporting the reinforcement of a community based approach to the health activities through coordination of fundraising for volunteer training and coaching, as well as providing technical support to the national society during information campaigns. The Federation will promote the national society’s approach of using local personnel to implement water interventions by training WatSan staff and acquiring basic technical equipment to be centrally managed by the national society’s WatSan team. The expansion of WatSan activities in branches formerly not active in this sector will take a community based approach to ARCHI/PHAST methodology, resource mobilization, coaching, and monitoring and evaluation.

**Goal: The health and care for vulnerable households and communities - including those affected by conflict, epidemics (including HIV), and disasters - is improved while the vulnerability of the community is decreased.**

**Objective: The Federation facilitates the development of the national society’s capacity in community based health and care programming including HIV/AIDS and water and sanitation activities by strengthening the capacity of staff and volunteers to reach the most vulnerable communities and building their capacity and awareness on disease transmission and control.**

**Expected Results:**

1. The national society’s health programme has been strengthened to enable community participation in preventive health services to reduce their vulnerability like communicable diseases, epidemics, accidents, and injuries
2. The long-term WatSan policy and strategy of the national society has been established and endorsed and is fully implemented throughout the country
3. Ethiopian Red Cross HBC project for PLWHA has been expanded and gradually increased to reach at least 3,000 people annually
4. A national society HIV/AIDS workplace policy and educational programme for staff and volunteers has been implemented with 400 peer educators trained and 100 people put on anti retroviral (ARV) treatment by 2007
5. Training on HIV/AIDS prevention and adolescent reproductive health has been provided to 22,000 peer educators annually
6. More than 60,000 people have been referred to VCT services by 2007

*<Refer to the Logical Framework Planning Matrix: Ethiopia Health and Care>  
<[http://www.ifrc.org/cgi/pdf\\_appeals.pl?annual05/logframes/africa/05AA005HC2.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/logframes/africa/05AA005HC2.pdf)>*

## **Disaster Management**

### **Background and Achievements**

Drought has been the main hazard affecting the Ethiopian people for a long period of time; five to six million people face concomitant food shortages every year. The recurrent failure of rains, especially their late onset, erratic distribution and early cessation has been the major cause, coupled with socio-economic and structural factors that further complicate the picture. poor soil fertility, degradation of natural resource, poor agricultural practices associated with inadequate supply of agricultural inputs such as seeds, fertilizer, tools, improved varieties of livestock, poor market integration, poor health and education coverage and high population growth have also led the people into poverty.

Ethiopian Red Cross has been undertaking its humanitarian role in since 1935. In 2003 alone, with the support from PNS, the Federation and ICRC, the national society was involved in addressing the

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<sup>4</sup> ‘Software’ refers to the planning stage of a project where needs of a community are identified, defined and capacities built in order to promote self-sustainability, ownership.

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emergency needs of more than 850,000 people affected by drought through provision of food/cash and non-food items.

Relief on its own has proven not to be sufficient in preventing destitution and enabling households to recover after disasters. With this in mind, the national society formed a tripartite partnership with DFID and the Federation in 2001 which resulted into a number of achievements, including:

- § Revision of the disaster preparedness and response policy and the emergency operation procedures manual and the familiarization of these to Branch Secretaries, staff and volunteers
- § VCA have been undertaken in six woredas
- § Development of a national society food security strategy
- § Preparation of three food security and two emergency response proposals

The national society recognized the need to shift focus to address underlying vulnerabilities of households to droughts and other disasters. As a result, it continues to develop its capacity in terms of disaster/conflict preparedness and food security; a 2010 Strategic Plan<sup>5</sup> was elaborated in 2003 in order to support this ambition. The plan envisaged the expansion of the Ethiopian Red Cross disaster preparedness/response unit by two personnel, namely a Food Security Officer and Disaster Preparedness Officer; these have been successfully recruited.

As disaster preparedness requires the active involvement of other departments; two working groups on food security and disaster response were formed as part of the strategic plan; two branch disaster response teams were also established under the 2003 drought response programme; and a working group on conflict preparedness was developed at national level in the last quarter of 200 with the support of ICRC. These working groups will function as a resource for different disaster preparedness and response programmes and engage members of the Movement and other departments of the national society.

The national society has involved its staff and volunteers in multi-agency early warning assessments, data collection during nutrition assessments and VCA. Ethiopian Red cross attends emergency response and food security forums in the country e.g. National Early Warning Working Group, Technical Information Management Meeting of the Disaster Prevention and Preparedness Commission (DPPC) of the government, food aid and logistics meeting of WFP, agriculture and food security technical committee meeting of the European Union.

Ethiopian Red Cross recognizes the need to continue using VCA in order to develop programming in both disaster preparedness and food security. In this regard, five national society staff were trained in 2003 as part of the regional food security working group; these officers together with a Food Security Officer who trained in 2004 will apply their skills both in country and regionally. Further training is planned to expand the skills base on VCA and food security at headquarters and branches. The national society also plans to implement food security programmes based on proposals developed through the DFID partnership, Spanish Red Cross, German Red Cross and left over funds from the Federation Appeal 28/2002.

In addition to the continuing tension with Eritrea, intermittent tribal conflicts are experienced in the some peripheral regions of Ethiopia; in response, the national society in conjunction with ICRC has developed and implemented conflict preparedness and response plan focusing on ten branches. The plan for 2005 has been prepared separately and submitted to ICRC. Ethiopian Red Cross is considering integrating its disaster preparedness programme to capture both natural disaster preparedness and conflict preparedness. This will require the good cooperation and coordination of the three components of the Movement.

The Federation has supported the national society in installing an efficient internet system within the framework of disaster management and organizational strengthening. Further monitoring and adjustments of the system to allow it to be fully functional and serve all officers at headquarters will be undertaken during 2005.

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<sup>5</sup> Ethiopian Red Cross Disaster Preparedness and Response 2010 Strategic Framework

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**Goal: The disaster preparedness and response capacity of Ethiopian Red Cross at headquarters and branches is strengthened and coherent responses provided to the vulnerability of communities**

**Objective: The preparedness and response capacity of the national society is strengthened through Federation support**

**Expected Results**

1. The preparedness and response capacity of the national society at headquarters and branches located in high-risk areas has been strengthened.
2. Ethiopian Red Cross has contributed to efforts of other stakeholders towards improving the food security situation of vulnerable communities through development interventions
3. Ethiopian Red Cross has contributed to efforts of other stakeholders towards building the disaster preparedness capacities of vulnerable communities.
4. Ethiopian Red Cross has provided timely and adequate response to the needs of people affected by natural disasters.
5. The capacity of the national society to mitigate and respond to conflict related humanitarian issues has been improved.
6. The internet system of the Federation has been integrated into the new system of the national society and serves all users efficiently.

*<Refer to the Logical Framework Planning Matrix: Ethiopia Disaster Management>  
<[http://www.ifrc.org/cgi/pdf\\_appeals.pl?/annual05/logframes/africa/05AA005DM2.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?/annual05/logframes/africa/05AA005DM2.pdf)>*

**Humanitarian Values**

**Background and Achievements**

The Ethiopian Red Cross has historically had a high profile in responding to natural and man-made disasters. The promotion of humanitarian values is a priority for the national society and to successfully achieve this, the information strategy was revised in 2003 with assistance from the Regional Information Delegate. The development of a partnership with the Norwegian Red Cross in 2004 facilitated by the Regional Information Delegate created a solid framework for the strengthening of the Ethiopian Red Cross information unit. This partnership was presented as a case study during the regional communications forum which led to the British and Ugandan counterparts establishing a similar partnership. The pilot model was also presented during a global information delegates meeting in Geneva in November 2004 (refer to the promotion of humanitarian values section in the Eastern Africa Regional programmes Appeal 2005 for more details)

The Ethiopian counterpart is a member of the regional communications forum which is a network of national society communications officers from the region supported by both the ICRC and the Federation. The regional information unit will continue to enhance coordination, assistance and coaching activities to strengthen the capacity of national societies to ensure professional activities at national level. The aim is also to provide a regular flow of information between national societies, the regional delegation and the strategic communications unit at the Secretariat in Geneva. The next regional communications forum will be held in Addis Ababa, Ethiopia in 2005. This provides a unique opportunity of exploring possibilities of creating links between International Red Cross/Red Crescent Movement and the African Union whose headquarters are in the Ethiopian capital.

The regional information unit continued to encourage national societies' counterparts to promote the Movement's values in order to become a catalyst for positive behaviour change in communities. As a result, Ethiopian Red Cross is positively advocating, assisting and protecting the most vulnerable (PLWHA, people affected by disasters, people lacking access to basic health and WatSan services etc) through influencing behavior in the community (governments, donors, private sector and other members of the civil society). Its image is promoted through regular dissemination and information activities. As part of the efforts to profile the national society, the Norwegian Red Cross will support the publication of 16,000 newsletters highlighting the work of the Ethiopian Red Cross to be distributed within the community in Ethiopia and to donors. The close to excellent co-operation with the ICRC has guaranteed a

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coordinated Movement approach in the field of information, dissemination and promotion of humanitarian values.

**Goal: Movement Principles and Humanitarian Values are known and respected throughout Ethiopia; discrimination against vulnerable groups is reduced.**

**Objective: The Information Unit of the Ethiopian Red Cross is an active member of the regional Communications Forum; has developed its potential to respond to humanitarian emergencies; and increased its capacity to promote Movement Principles and Humanitarian Values in the East African region.**

**Expected Results:**

1. The development and capacity building of the Ethiopian Red Cross information unit to meet minimum technical, professional and human resources standards, as approved by RC-NET, has been completed.
2. The capacity of Ethiopian Red Cross to advocate on behalf of the vulnerable groups and operations of the national society has been increased.
3. The fourth regional communications forum has been successfully conducted.

*<Refer to the Logical Framework Planning Matrix: Ethiopia Humanitarian Values>  
<[http://www.ifrc.org/cgi/pdf\\_appeals.pl?/annual05/logframes/afri/05AA005HV2.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?/annual05/logframes/afri/05AA005HV2.pdf)>*

## **Organizational Development**

### **Background and Achievements**

A review of the national society's strategic development plan in line with Strategy 2010 of the Movement was initiated in 2004 and will be finalized by mid 2005. The new plan is to be projected from 2006 to 2010. Consequently, a process of revising the CAS in 2005 will encourage a comprehensive approach to partner support, aiming at securing long-term funding commitments. A partnership meeting with this goal will be held at the end of 2005.

The national society embarked on the task of restructuring its headquarters and branches in 2004; implementation of the reform program will take much of the national society attention during 2005 and part of 2006 with the support of the Federation. It is expected that the national society's programme management capacities will be significantly enhanced at all levels and a greater degree of self reliance developed once a new organizational structure, more adequate staffing and revised policies and systems for human resource management, financial reporting and administration are established.

The vastness of the country and the ever demanding needs for community development emphasize the need for a well developed and adequately trained volunteer base. A volunteer management policy and strategy will be finalized during 2005 for a coordinated recruitment, training, deployment and retaining of volunteers.

The national society today relies to a large extent on external funding for both its activities and core costs. It is thus imperative to develop the external relations capacities, to profile the national society in the national and international sphere and to enhance capacities in the areas of income generation and fundraising.

The budgets for promotion of humanitarian values and delegation management are included in the organizational development budget.

**Goal: Implementation of characteristics of a well-functioning national society has improved Ethiopian Red Cross in the three key areas of foundation, capacity and performance.**

**Objective: Ethiopian Red Cross has strengthened its capacity at headquarters and branches to respond to humanitarian emergencies and development needs of the communities.**

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**Expected Results:**

1. The national society has an adequate organizational and staffing structure which responds to programme needs, promotes effective and efficient communication and coordination within headquarters' departments as well as between headquarters and branches, and encourages proactive planning, implementation, evaluation and reporting of activities.
2. The national society's capacities in financial and narrative reporting correspond to the requirements of efficient and effective programme management.
3. The revised strategic development plan 2006-2010 gives a clear profile to the national society and is the basis for its support to the most vulnerable populations.
4. A well coordinated CAS has ensured consistent support to national society by partner and reinforced its networking capacity.
5. The national society has developed a strategic direction for its organizational development (OD) work which has resulted in a clear OD policy and strategy for coordination of OD activities.
6. A strong and clearly defined relationship between national society governance and management has ensured efficient and effective fulfilment of the mandate of the Ethiopian Red Cross.
7. The involvement of volunteers in activities is based on a clearly defined policy for volunteer management, training and development.
8. A reliable and sustainable financial resource base has been established at all levels, reinforcing the funding base of the national society for core as well as program expenses.

*<Refer to the Logical Framework Planning Matrix: Ethiopia Organizational Development>  
<[http://www.ifrc.org/cgi/pdf\\_appeals.pl?annual05/logframes/africa/OD2.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/logframes/africa/OD2.pdf)>*

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<b>Ethiopia – Budget breakdown</b>	<b>2005</b>
<b>Programme title</b>	<b>in CHF</b>
<b>Strengthening the National Societies</b>	
Disaster Management	68,282
Organizational Development	174,700
<b>Total</b>	<b>242,982</b>

## **Disaster Management**

The Horn of Africa is among the poorest regions in the world and comprises six food deficit countries with limited natural resources, chronic poverty, and low human development. The region faces many humanitarian crises borne out of recurrent natural and man made disasters such as droughts, floods, civil strife, inter-clan fighting as well as diseases and epidemics. Few governments and National Societies in the region have disaster management frameworks which specify roles, responsibilities and focus internal and external efforts to respond to and reduce risks.

Recurring droughts over the last 30 years have caused a series of severe crises in Africa mainly in the Horn (Ethiopia, Sudan, Kenya, Somalia, Djibouti etc). Widespread food insecurity predisposes the sub-region to food shortages and emergencies. Food security is declining in all the countries, and estimates of the food insecure are close to half of the population. The main food-insecure groups are resource-poor farmers, urban poor, poor pastoralists and refugees. Causes of food insecurity are interrelated with political factors and physical insecurity and include poor overall economic performance, poor agricultural performance, prevailing conflicts and insecurities, major droughts and long term environmental degradation.

### **Climate change emergencies**

Climatic hazard has caused much vulnerability in the Horn of Africa. Much of the region continues to be plagued by food insecurity and erosion of livelihoods as the result of drought or floods. In Ethiopia, persistent pressure on household coping mechanisms and a depletion of assets has left approximately seven million people food insecure. In Eritrea, 1.9 million people are dependent on food assistance as a result of the failure of rains, diminished coping capacity and declining economic activity. Flash flooding in Djibouti in April 2004 killed over 50 people and displaced between 60,000 and 100,000 people (20% of the population), highlighting the need for preparedness and contingency planning measures. The crisis in the contested Sool Plateau in Somalia is the result not only of unfavourable climatic factors but the long term pressure on normal coping strategies.

### **Desertification**

Much of the sub-region is highly prone to desertification. In some areas, land degradation is thought to be irreversible, such as parts of Djibouti where most of the vegetation has disappeared and sand dunes are forming. Given the population pressures and possible climatic changes resulting in increasing frequency of drought, the rate of growth of deserts areas will certainly increase.

### **Conflicts**

The conflict in the Horn of Africa has resulted into death, injury and displacement of millions of people. Cases of targeted and systematic use of sexual violence and sexual slavery have been reported in the backdrop of a continued lack of humanitarian access to some of the displaced populations.

### **Population movement/displacement**

The movement of large numbers of people due to conflict, drought or flooding continues to be a definitive feature of the humanitarian situation in the Horn of Africa. It is estimated that there are currently over five million displaced people in the region, a number that is expected to increase. Displacement from the crisis in Darfur is thought to be in excess of one million people; a large population movement is expected to follow the signing of the peace agreement in Sudan. Population displacement in Somalia as a result of crisis and resource shortfalls is widespread. An estimated 50,000 pastoralists are thought to have crossed over the Ethiopian border partly due to normal population movement but in the most part as the result of drought and food insecurity. In Eritrea drought and conflict induced displacement currently affects some 60,000 people. Regardless of the origins of displacement, the effects on both displaced and host populations are often profound. The adequate provision of protection and basic services for these vulnerable groups is a critical issue in humanitarian response.

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**HIV/AIDS**

The prevalence of HIV/AIDS continues to expand throughout the region propagated by cross border and internal population movement, the presence of armed groups, and human rights violations such as rape and forced prostitution. HIV/AIDS is a cross cutting issue affecting all areas of humanitarian response. Consideration is needed in all humanitarian intervention to ensure that actions do not facilitate the spread of infection and to ensure that the needs of affected people are met.

**Pest infestations**

The desert locust is the foremost pest threat to the region. Somalia is one of the major breeding grounds together with Ethiopia, Eritrea and Sudan. Swarms migrating after summer breeding in Sudan, Eritrea, Ethiopia and the Arabian Peninsula often invade the winter breeding areas of Somalia while swarms from the winter breeding in southern parts of Eastern Africa and northern coastal areas in Somalia can also invade the spring breeding areas of the country. Escapes from spring breeding are contained within the Horn of Africa but are exacerbated by invasions from outside the area. However, if preventative control measures are not taken, swarms escaping from the winter breeding areas in Somalia pose the potential threat of invading Kenya, Uganda, Tanzania, Djibouti, Ethiopia and Sudan as well as countries of the Arabian Peninsula.

Despite efforts to mitigate the risk of natural and man-made disasters, their frequency and impact are on the increase and require holistic approach. Threats caused by climatic hazards necessitate further development of readiness measures as well as interventions to address the long term causes of food insecurity.

**Food Security**

The Red Cross/Red Crescent national societies from Eastern Africa played major roles in drafting the food security component of the Ouagadougou Declaration in 2000, including chairing the Food Security Commission and presenting the position paper. Subsequently, national societies from the region developed a food security strategy in 2002 based on the Ouagadougou Declaration which entailed a food security research study on a sample of five national societies namely Kenya, Ethiopia, Uganda, Tanzania and Rwanda. They also committed themselves to exploring new innovative and alternative measures in handling food security problems in the region, by addressing some of the underlying causes (poverty, HIV/AIDS and conflict).

Food security is one of the major themes of the regional disaster preparedness and response Strategy 2010. A regional working group for food security was established in 2001 and reinforced in 2003, and has been involved in supporting national societies in response and mitigation to food insecurity crises across the region. The Federation's Food Security Advisor has been supporting these initiatives while PNS are increasingly assisting national societies to access funds for food security as well as funding national societies' technical officers' e.g the British Red Cross support to Ethiopian Red Cross. Greater focus was also given to food security during the 2004 training of the regional disaster response team in which the approach was widened to include the ICRC economic security approach.

The regional disaster management programme has focused increasingly on a sub-regional approach to maximize impact at country level and focus on the greater commonalities of neighbouring countries. Initiatives in this respect included the Indian Ocean Islands strategy for floods and cyclones supported by the French Red Cross; the Lake Victoria Initiative for the East Africa sub-region (Kenya, Rwanda and Uganda) supported by the Swedish Red Cross, and the latest being the Horn of Africa food security programme covering national societies from Somalia, Sudan, Ethiopia, Eritrea and Djibouti. Funding to support this initiative is still being sought.

In March 2004, the Regional Disaster management department organized a three days meeting in Djibouti for disaster preparedness and relief officers from Somalia, Sudan, Ethiopia, Eritrea and Djibouti to develop a joint sub-regional food security strategy for national societies in the Horn ([hyperlink the report](#)). The Horn of Africa food security programme has been developed from this strategy.

## **Food Security Programme**

**Goal: To support national societies from the Horn of Africa to predict and prevent food security crises, to mitigate their impact and to respond and cope with their consequences at sub-regional, country and local levels.**

**Objective: To provide appropriate technical support to national societies to develop human resource capacities, policy and strategy frameworks, assessment and planning skills, food security programmes, contingency plans, a database of technical resources and partnerships with key stakeholders in the region.**

### **Expected Results:**

1. A food security unit has been established for the sub-region and is operating effectively.
2. The human resource capacity to support food security activities of national societies has been improved.
3. Food security policies and strategies have been developed at sub-regional and national level with clear links to HIV/AIDS.
4. The capacity of national societies to undertake VCA and food security programmes has been improved.
5. Partnerships with other food security stakeholders in the region have been strengthened.
6. A database of external human resources, technical material and lessons learned has been developed.
7. National societies' capacities in IT/Telecom and logistics for improved preparedness and response have been strengthened.
8. Contingency plans on food gaps, population movement, floods and epidemics have been developed.

*<Refer to the Logical Framework Planning Matrix: Horn of Africa Disaster Management>  
<[http://www.ifrc.org/cgi/pdf\\_appeals.pl?/annual05/logframes/africa/05AA005DM.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?/annual05/logframes/africa/05AA005DM.pdf)>*

## **Coordination, Cooperation and Strategic Partnerships**

### **Background and Achievements**

All the five national societies (Somalia, Ethiopia, Eritrea, Djibouti and Sudan) agreed on the establishment of the sub-regional Office for the Horn of Africa. They favoured a gradual and pragmatic approach taking into account the specific situation of each country and the end of the contracts for the Heads of Delegations/Federation Representatives in place. In view of this, the sub-regional office for the Horn of Africa will be established in Addis Ababa on 1 November 2004 to cover the national societies of Djibouti and Ethiopia. The next national society to be included will be Eritrea in 2005, followed by Sudan and Somalia.

The role of the sub-regional office is guided by the goals of the Federation and focus on strengthening the national societies, included support to Governance; coordination, cooperation and new partnerships; representation and advocacy; food security; and efficient and effective service provision. The sub-regional office will provide tailored and mutually agreed support to the initially two, and later five national Red Cross and Red Crescent Societies in the sub-region with a special component on sub-regional food security programme.

The other priorities this year will be to assist the Ethiopian Red Cross with its new strategic plan, the revision of its CAS as well as the implementation of the its organizational reform process, including the new volunteer management programme. In addition, support will be provided to better profile Ethiopian Red Cross and to enhance its income generation capacities. For the Djibouti Red Crescent Society, the Federation priorities are to continue to strengthen the national society's programme implementation capacity as well as the strategic planning process.

Food security is a major humanitarian problem in the sub-region. Food shortages have resulted in major Appeals for Eritrea and Ethiopia, but are imminent problems in Sudan and Somalia. Consequently, a sub-regional food security programme will be implemented and will form the base of the activities of a Food Security Officer to be recruited by the sub-regional office. The candidate will undergo an induction at the Federation Regional Delegation for familiarization with the programme and the regional disaster management department as a whole.

## **Effective Representation and advocacy**

### **Background and Achievements**

The Federation's continued presence in Addis Ababa will ensure regular representation with both international partners (UN, international agencies, NGO), national partners (government and other authorities, particularly with regard to the negotiations on the status of the sub-regional office) as well as the Federation's participation in joint meetings. Particular emphasis will be placed in re-established and reinforcing contact with the African Union (AU).

The sub-regional office will also greatly facilitate the establishment of effective representation with international and national authorities in Djibouti, and ensure regular participation in inter-agency and other important meetings.

## **Delegation Management**

### **Background and Achievements**

In 2005 the Head of the Federation's sub-regional office for the Horn of Africa will ensure general support and Federation representation of Djibouti Red Crescent and Ethiopian Red Cross. The special focus on the region's food security issues will be managed by a locally recruited Food Security Officer. Other technical support will be provided through the East Africa Regional Delegation in Nairobi.

The former office of the Ethiopia Delegation will be transformed into the Federation's sub-regional office for the Horn of Africa. It will comprise a small office for the Head of sub-region and local administrative staff.

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<b>Horn of Africa sub-regional office – Budget breakdown</b>	<b>2005</b>
<b>Programme title</b>	<b>in CHF</b>
<b>Strengthening the National Societies</b>	
Disaster Management	97,035
<b>Coordination and Implementation</b>	162,192
<b>Total</b>	<b>259,227</b>

[<Appeal budget below – click here to return to title page>](#)

# BUDGET 2005

## PROGRAMME BUDGETS SUMMARY

Appeal no.: 05AA005

Name: HORN OF AFRICA SUB-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	7,000	0	0	0	0	0	7,000
Food	0	0	0	0	0	0	0
Seeds & plants	0	0	0	0	0	0	0
Water & Sanitation	7,000	0	0	0	0	0	7,000
Medical & first aid	0	0	0	0	0	0	0
Teaching materials	1,500	0	0	0	0	0	1,500
Utensils & tools	0	0	0	0	0	0	0
Other relief supplies	0	0	0	0	0	0	0
<b>SUPPLIES</b>	<b>15,500</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>15,500</b>
Land & Buildings	0	0	0	0	0	0	0
Vehicles	0	0	0	0	0	0	0
Computers & telecom	0	6,000	0	0	0	0	6,000
Medical equipment	0	0	0	0	0	0	0
Other capital exp.	0	0	0	0	0	0	0
<b>CAPITAL EXPENSES</b>	<b>0</b>	<b>6,000</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>6,000</b>
Warehouse & Distribution	0	0	0	0	0	0	0
Transport & Vehicules	3,000	9,861	0	1,000	4,400	0	18,260
<b>TRANSPORT &amp; STORAGE</b>	<b>3,000</b>	<b>9,861</b>	<b>0</b>	<b>1,000</b>	<b>4,400</b>	<b>0</b>	<b>18,260</b>
Programme Support	5,026	10,746	0	16,490	10,543	0	42,804
<b>PROGRAMME SUPPORT</b>	<b>5,026</b>	<b>10,746</b>	<b>0</b>	<b>16,490</b>	<b>10,543</b>	<b>0</b>	<b>42,804</b>
Personnel-delegates	0	0	0	87,000	87,000	0	174,000
Personnel-national staff	33,600	40,948	0	18,408	21,600	0	114,556
Consultants	0	0	0	47,148	0	0	47,148
<b>PERSONNEL</b>	<b>33,600</b>	<b>40,948</b>	<b>0</b>	<b>152,556</b>	<b>108,600</b>	<b>0</b>	<b>335,704</b>
W/shops & Training	7,700	49,849	0	27,729	0	0	85,278
<b>WORKSHOPS &amp; TRAINING</b>	<b>7,700</b>	<b>49,849</b>	<b>0</b>	<b>27,729</b>	<b>0</b>	<b>0</b>	<b>85,278</b>
Travel & related expenses	12,500	23,000	0	33,128	8,650	0	77,278
Information	0	2,623	0	16,193	0	0	18,816
Other General costs	0	22,293	0	6,600	30,000	0	58,892
<b>GENERAL EXPENSES</b>	<b>12,500</b>	<b>47,916</b>	<b>0</b>	<b>55,921</b>	<b>38,650</b>	<b>0</b>	<b>154,987</b>
<b>TOTAL BUDGET:</b>	<b>77,326</b>	<b>165,320</b>	<b>0</b>	<b>253,696</b>	<b>162,193</b>	<b>0</b>	<b>658,535</b>