

# ANNUAL REPORT



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

## SIERRA LEONE

31 May 2006

### In Brief

Appeal No. 05AA023; Appeal target: CHF 3,274,955 (USD 2,598, 804, 139 or EUR 2,074,069); Appeal coverage: 53.3%. [Click here to go directly to the attached Financial Report.](#)

Annual Appeal :- <http://www.ifrc.org/docs/appeals/annual05/05AA023.pdf>

Programme Update no. 1: <http://www.ifrc.org/docs/appeals/annual05/05AA02301.pdf>

Programme Update no. 2: <http://www.ifrc.org/docs/appeals/annual05/05AA02302.pdf>

Related Emergency Appeals: Appeal no. 05EA018- [http://www.ifrc.org/cgi/pdf\\_appeals.pl?05/05EA018.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?05/05EA018.pdf) (Sierra Leone: Floods).

*This Annual Report reflects activities implemented over a one-year period; they form part of, and are based on, longer-term, multi-year planning.*

*All International Federation assistance seeks to adhere to the Code of Conduct and is committed to the Humanitarian Charter and Minimum Standards in Disaster Response in delivering assistance to the most vulnerable. For support to or for further information concerning Federation programmes or operations in this or other countries, please access the Federation's website at <http://www.ifrc.org>*

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### Operational context

The planned programmes have been heavily constrained by the shortage of resources. Only 53.3 per cent of the funds appealed for were received which inevitably affected progress. Many of the planned activities that would have benefited the society emerging from an 11-year long war were hence not implemented. In the face of such financial problems, the achievements of the Sierra Leone Red Cross Society are impressive. Through its countrywide network of volunteers and dedicated staff the national society has done a remarkable work to respond to the humanitarian challenges that face the people in Sierra Leone. The focus has been on reducing vulnerability to preventable diseases such as Malaria and HIV/AIDS; empowering the population to drive the development of their own future; offering skills training opportunities to women and former combatants to allow them to find a job and sustain themselves and their families; helping war-affected children to reintegrate into their home communities; and encouraging a divided society to reconcile with the traumatic experiences of the past.

The war in Sierra Leone has been officially over for almost four years. The country has seen significant transformations: guns have been silenced and mass killings ended an official disarmament, demobilization and rehabilitation (DDR) process has been completed. The truth and reconciliation commission heard the experiences of victims, witnesses and perpetrators to establish a historical record of human rights as origin and international

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humanitarian law during the war. A special court is in session to prosecute those who bore the greatest responsibility. A sense of normality is returning to Sierra Leone. Schools are being built and many more children are now attending school. For all that, though, the achievements remain the first tentative step on a long road to a complete and lasting recovery. An array of seemingly intractable problems, that gave rise to the war, has yet to be addressed. There is still widespread corruption, poverty, hunger and lack of access to safe drinking water. Some 75 percent of the population live on less than two dollars a day, and one in four cannot afford a basic diet. Two thirds of the population is illiterate and unemployment hovers at 70 percent, with two million jobless young people. These include a large pool of ex-combatants, including women and children, who could take up arms again. With no skills and little or no education, they are at risk of being driven into misery, crime, violence and the sex trade.

The Sierra Leone Red Cross Society, with financial and technical support of the Red Cross and Red Crescent Movement partners, has played an important role in contributing to the collective effort to build a sustainable peace in Sierra Leone. Thousands of people have already been assisted. The section below describes the progress made and the main lessons learned by the Society in 2005 in the four core areas – health and care, promotion of humanitarian values, disaster management and organizational development. The progress would not have been possible without few committed partners – British, Canadian, Danish, Finnish, Icelandic and Swiss Red Cross Societies and their governments - whose contributions are greatly appreciated.

### **Analysis of 2005 programmes**

#### **Health and care**

##### **Community based health project (CBHP)**

**Goal: The morbidity and mortality rate of under-fives and women of childbearing age has been reduced and the health status of the most vulnerable improved while the HIV/AIDS/STI prevalence has stabilized.**

**Objective – Community Based Health: The morbidity and mortality rate of under-fives and women of childbearing age has been reduced and the health status of the most vulnerable improved.**

##### **Achievements, impact and lessons learned**

Throughout the year, Red Cross volunteers continuously engaged with their communities to raise awareness of the most acute health issues, including malaria, HIV/AIDS and Tuberculosis (TB). The importance of breastfeeding, immunization and personal as well as environmental hygiene were also promoted. Through the efforts of its volunteers, the Sierra Leone Red Cross Society reached some 189,696 people in 2005; 74,651 people more compared to 113,045 people reached in 2004. The health messages were spread via individual or group talks, role plays, and regular radio programmes.

Thousands of education materials were distributed. An important element of the project was empowering local communities to be able to take care of their own health and wellbeing. People were encouraged to participate in the cleaning of public places, protection of water sources, as well as cleaning and chlorination of traditional wells. Many families, for instance, use rain water for cleaning, washing and cooking. They were advised to boil it and were given some useful tips on how to store safe and clean water to reduce the recurrence of diarrhoeal and other water borne diseases.

People were assisted in building plate racks and hang lines for laundry as opposed to drying clothes on the ground which is a common practice in Sierra Leone. Efforts were also made to improve access to safe drinking water and improve sanitation conditions in 146 communities. The Sierra Leone Red Cross Society built 653 VIP latrines and chlorinated 653 wells.

A number of training opportunities were offered to Red Cross volunteers and staff members to help them improve their capacity and hence, the quality of their services to people the Red Cross works with. This included training on cholera preparedness, Lassa fever prevention and control, as well as Hygiene and Sanitation Transformation (PHAST). PHAST is an innovative approach designed to promote hygiene behaviours, sanitation improvements and community management of water and sanitation facilities using specifically developed participatory techniques.

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A total of 23 staff members involved in health and community animation and peace support (CAPS) programmes attended the training facilitated by a Federation consultant. Other 180 community volunteers were trained as trainers in community-based first aid. The training was conducted according to a recently updated manual. 791 volunteers were provided with a refresher course. The Sierra Leone Red Cross Society now has some 1,810 first aid volunteers working in 391 communities. These volunteers have engaged with their communities and trained a total of 547,400 people; a remarkable effort in the country where health services are inadequate as a result of uneven geographic distribution of health facilities, high cost of health care, lack of equipment, and an insufficient supply of drugs.

In addition to the volunteer work, the Sierra Leone Red Cross Society also offered medical consultations, treatment, essential drugs, immunization, and growth monitoring services from its country-wide network of clinics. The focus was on maternal and child health care. With financial support of the British Red Cross, the Sierra Leone Red Cross Society established a new clinic in Koinadugu and refurbished two others in Bo and Bonthe. The national society now operates a total of 12 static clinics. Each clinic attended to an average of 671 people every month.

Medical consultations were provided to a total of 88,633 patients including pregnant and nursing women, and children under-five. Complicated cases were referred to government hospitals. All women seen by the Red Cross clinic staff were advised on family planning. 1,378,318 children under five years old were immunized against tuberculosis, polio, diphtheria, whooping cough, tetanus, measles and yellow fever. They were also provided with vitamin A supplement. 37,413 under five children had their growth monitored. Health education talks on the importance of breastfeeding, malaria and cholera control, HIV/AIDS prevention, environmental and personal hygiene proceeded the clinic sessions. Through health promotion efforts of the clinics, the Red Cross reached 87,584 women.

Throughout the year, the Red Cross clinics collected and analysed epidemiological data. The disease pattern shows malaria ranks the highest with a total number of 61,868 reported cases followed by acute respiratory tract Infection (42,554 people), worm infestation and anaemia.

Red Cross volunteers disseminated to women the importance of sleeping under the insecticide treated bed nets as a precaution against this preventable disease that nevertheless accounts for 40.3% of all morbidity and 38% of all hospital admissions every year in Sierra Leone, according to Ministry of Health. Pregnancy related deaths are also common in the country. To address the latter, the Sierra Leone Red Cross Society rains and provides supervision to traditional birth attendants (TBAs). Currently, the national society oversees 860 TBAs in 11 out of 13 Red Cross branches. In 2005, they assisted in 3,070 deliveries and provided ante- and post-natal care to 16,978 women. The women also received advice on family planning. In partnership with the UN's World Food Programme (WFP), the Sierra Leon Red Cross provided 161 malnourished children under five with supplementary feeding – corn-soya blend, sugar and vegetable oil. In an effort to improve their nutritional statues, the Sierra Leone Red Cross Society has been supporting mothers to grow their own food.

Mothers clubs, formed with the Red Cross encouragement, operate in 11 branches. In total, some 7,820 women are involved. The Red Cross provided them with seeds and agricultural equipment to plant cassava, yam, potato, rice, green leafy vegetables and pepper. The harvest this year was good and the profit from sales has contributed to improving the women's diet. In addition to static clinics the national society also runs two mobile clinics on the Bonthe Island. They travel to hard-to-reach areas and provide basic health care services to women and children there.

In 2005, the mobile clinics attended to 4,908 people. Twice during the year, the Sierra Leone Red Cross Society mobilized its staff and volunteers – hygiene promoters, peer educators, first aid workers, traditional birth attendants and community supporters to respond to cholera outbreaks that killed 59 people in Freetown and Kambia. The anti-cholera campaign mounted by the national society reached some 874,000 people.

The health care project was only 51 per cent covered which meant that t only a part of the originally planned activities work was done. More wells could have been rehabilitated and chlorinated to ensure more people have access to safe water. More children could have been immunised. More patients could have been treated if more funding was available. Nevertheless, the impact of the activities that *were* undertaken has been remarkable. As a direct result of the Sierra Leone Red Cross Society efforts, 1,432,500 people now have access to safe drinking water and live in an improved sanitation conditions. 3,070 women had healthy babies were assisted during birth and other

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1,463,795 women are better prepared to protect themselves and their children from preventable diseases. Red Cross volunteers observed positive behavioural changes in the areas they worked. For example, food handlers at markets take greater caution and their stalls are cleaner now. People are now making an effort to clean their latrines too. The analysis of the epidemiological data collected by the Red Cross disease surveillance teams shows a decrease in diarrhoeal incidences and other water-born diseases. Nutritional practices have changed too. People consume more vegetables and make an effort to cook in cleaner conditions. The observations are encouraging. They indicate that the messages spread by Red Cross volunteers do get across and make a difference. A lesson learned is to invest more efforts and resources into supporting volunteer work. Volunteers play an important role in reducing vulnerability to health risks. They are a driving force of the national society and need better support, acknowledgment and guidance from the Society. The Sierra Leone Red Cross Society has opted to increase the focus on preventive health as opposed to clinical, curative services, although the latter will still continue on a cost-recovery basis. As of January 2006, the Federation will withdraw salary support for the clinic staff. It was also observed that community participation was higher when seasonal calendar was considered during the planning and implementation.

### **HIV/AIDS**

**Objective: HIV/AIDS/STI prevalence has been stabilized, stigma and discrimination is reduced and support to people infected and affected by HIV/AIDS is provided in Sierra Leone.**

#### **Achievements, impact and lessons learned**

To reduce the spread of HIV/AIDS and discrimination of people living with the disease, the Sierra Leone Red Cross Society has been working to undermine one of the main factors namely – lack of awareness. Via a network of trained peer educators, it promoted a safe behaviour.

The national society has a total of 520 peer educators working throughout the country. The project, however, was only 32 per cent funded and many of the planned activities were not implemented. Red Cross peer educators had sensitisation talks with 10,952 people. The focus was on schoolchildren and their teachers and other groups, such as commercial sex workers, who are most at risk of being infected. Information about prevention and transmission of the virus was spread via regular radio talk shows. Five such shows were aired for the population in Bo, Kenema, Bombali and Kono and Western Area. Prejudices against people living with HIV/AIDS were challenged via drama performances. Via songs, dancing and art, Red Cross volunteers reached both literate and even larger illiterate communities. In total, 240 various performances were conducted for 101,615 people. As part of the efforts, the interschool quiz competition, as well as volleyball and football matches were held with the participation of some 2,500 children. Red Cross peer educators observed behavioural changes in the communities where they work. Demand for condoms is increasing. Cautious of HIV/AIDS, women, young girls and boys now take their own clean razor blades and needles to hairdressers and barbers. More people decide voluntarily to test for HIV. In partnership with the Global Fund, the national society also provided home care to 28 people living with HIV/AIDS in Bombali as a pilot initiative that has incorporated prevention, stigma reduction and care for HIV/AIDS infected people. The Red Cross branch worked closely with the voluntary counselling and testing (VCT) centre. Such centres have been set up by the government throughout the country and the Sierra Leone Red Cross Society believes the integrated approach to HIV/AIDS needs to be introduced to all Red Cross branches to augment the impact of the project.

### **Disaster management**

**Goal: The effects of disasters in Sierra Leone are mitigated through efficient interventions of the Sierra Leone Red Cross Society and enhanced collaboration with government and partners.**

**Objective 2: The capacity of the Sierra Leone Red Cross Society to provide timely and effective response to disaster victims is strengthened**

#### **Achievements, impact and lessons learned**

To be better prepared to respond to emergencies, the Sierra Leone Red Cross Society developed a contingency plan. The plan identifies potential humanitarian crises, encourages preparedness and establishes priorities for quick, coordinated and effective response to the crises

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An important factor in achieving the latter is the quality of logistics that ensures speedy delivery of aid to people affected by disaster. To improve the handling of the logistics, the Sierra Leone Red Cross Society updated its logistics manual. It also identified and negotiated with local suppliers the terms and conditions for the procurement and delivery of emergency relief items for 53,000 people if such need arises. Efforts were made to standardise the national society's VHF radios and handsets to facilitate better communication between the headquarters and the branches. Sierra Leone Red Cross Society was also part of the regional Red Cross and Red Crescent contingency relief planning facilitated by the Federation's regional delegation in Dakar. The exercise was to ensure that there is sufficient preparedness and coordination between the national societies in the region in case of massive cross-border population movement triggered by political instability in West Africa.



*Youth has a greater potential to become self-reliant in the future*

Overall, the Sierra Leone Red Cross Society is better equipped now to respond to recurring emergencies. The Society has 11 vehicles, one truck, 28 motorbikes and one boat. Each branch has volunteers trained in disaster management, including first aid (a total of 5,070 trained volunteers countrywide); some also are members of the Field Assessment Coordination Team (FACT) and the Regional Disaster Response Team (RDRT). The volunteers were visible at major outdoor functions such as soccer matches, concerts and the like, where they readily provided first aid services to the injured. They were quick to respond to larger emergencies as well. Shortly after an alert was received about a landslide in one of the villages in Freetown, the Red Cross search and rescue teams were on the site helping extract bodies from under the debris and offering psychological support to those who survived. The national society was also quick to respond to the floods in the Kono district as well. The floods were triggered by heavy rainfalls injuring some 22 people, removing the roofing

from over 200 houses and causing displacement of 3,759 people (537 households). More severe flash floods were experienced by people in Pujehun District in southern Sierra Leone. The floods rendered over 15,000 people homeless, destroyed hundreds of houses, contaminated wells and destroyed many acres of farmlands. Supported by the Movement partners, the Sierra Leone Red Cross Society assisted some 500 families (3,656 people) with basic relief items - clothing, blankets, plastic sheeting, kitchen sets and jerry cans.

However challenges remain. Capacities in branches vary. Some are better organized than others. Efforts need to continue to achieve better coordination within the Red Cross. There is a need to raise the understanding of disaster management in communities and the government as well as among the national society staff as the mechanism to prevent, prepare for and respond to disasters in a timely and coordinated manner have yet to be established. Sierra Leone Red Cross Society is planning to scale up its sensitisation work with its staff and volunteers, the population and the authorities to raise awareness. A greater focus is needed to strengthen community-based disaster preparedness, develop early warning systems and improve disaster management planning. The national disaster response plan has not yet been finalised. The disaster response plan of the Sierra Leone Red Cross Society also needs to be updated. A good plan can save lives, time and money. This will be a priority in 2006.

## Humanitarian Values

**Goal A culture of non-violence and sustainable development is promoted in communities.**

### Job aid for amputees (JAWA)

#### Objective

**The self-reliance of 680 war-affected amputees is improved through JAWA.**

#### Achievements, impact and lessons learned

The Humanitarian Values project was seriously under-funded. The original target was to assist some 686 war amputees to achieve a level of economic self-sufficiency. However the lack of funds has meant that the Sierra Leone Red Cross Society could only support 40 people in Kailahun and Koinadugu. Specifically, 40 war amputees were sponsored to attend a training course in tailoring and were provided with sewing machines. Four of them were assisted to find a job. The remaining balance of the available funds was used to procure 150 goats for 150 amputees.

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No support could be offered to farming groups. The plan was to assist 230 amputees with seeds and agricultural equipment. In 2006, the Sierra Leone Red Cross Society is planning to expand the project. It would go beyond the job aid for war amputees and incorporate other elements such as psycho-social support, advocacy and schooling for children of amputees.

### **Community animation and peace support (CAPS)**

**Objective: War-torn communities' capacity for poverty reduction and post-war reconstruction and development is strengthened through CAPS.**

#### **Achievements, impact and lessons learned**

This project also experienced serious financial constraints. Only 26 per cent of the funds appealed for were received, as a result of which many of the planned activities were not implemented. Of the originally targeted 96 communities, only 48 communities were reached. The focus was on helping the villages to improve harvest management to minimise the loss. Efforts were also made to improve sanitation conditions i.e., communities were mobilize to clean their compounds. People were encouraged to use latrines and hang their clothes on lines as opposed to drying laundry on the ground. The animators also facilitated group discussions on various issues of concern to the communities. For instance, one of such discussions was to clarify the responsibilities of the recently re-established local councils. At the end of the year, the national society withdrew from the communities it had been working with although some refresher training in conflict transformation and participatory development will still be provided to the Community Peace Consolidation Committees in 2006 to enhance their capacity to take responsibility from the Red Cross animators and continue the engagement with their co-villagers independently, as needs arise. In 2006, the Sierra Leone Red Cross Society is planning to start the project in new communities, provided there are sufficient funds available.

### **Child advocacy and rehabilitation (CAR)**

**Objective: War-affected children are rehabilitated and integrated into child friendly communities through the CAR.**

#### **Achievements, impact and lessons learned**

Via its child advocacy and rehabilitation centres in Kambia, Waterloo, Port Loko, Kabala and Kailahun, the Sierra Leone Red Cross Society worked with child ex-combatants of 10 to 18 years old helping them to come to terms with their experiences during the war, to catch up on basic schooling, learn some new skills, such as traditional gara tie dyeing, soap making, construction or tailoring, and resume normal life in their communities. The project was 78 per cent covered and reached some 750 children. Many had never been to a school before, either due to their family's economic circumstances, displacement, or abduction. All children now learn to read and write. Some have enrolled in formal institutions and continue their education. The 14 to 18 year olds were also trained in a specific trade. The acquisition of skills is crucial for their future self-reliance and recovery of their self-esteem. Upon graduation, each child was given a start up kit to help them establish themselves in their chosen trade. Twice a week, children were provided with basic health care. The clinical services focused on treating the most common ailments such as cough, cold, skin diseases, malaria and sexually transmitted infections. The treatment was complemented by health talks with emphasis on safe sexual behaviour and HIV/AIDS prevention. Regular individual and groups sessions were held to help children address their traumatic experiences and emerging issues and concerns. All centres organised different sport games and competitions. Every day from Monday to Friday, children were served one meal. For many it was their only meal for the day.

The total dedication of the Red Cross staff, the drive and enthusiasm of the children, and the encouragement given to girls, particularly child mothers, have contributed to the success of the project. Equally crucial was support of local communities and their chiefs. Red Cross activists went to great lengths to explain to local villagers the aims of the project and to advocate on behalf of the children in order to meet the eventual aim of reintegrating them back into their communities. This was particularly relevant because of the hostility many of the communities were feeling towards the children for their roles during the war and their behaviour after it. People were encouraged to see the children as useful members of the community rather than as problems. A number of sessions were held by Red Cross activists to raise awareness on child rights. Community responsibility towards enhancing the welfare of the children was also emphasised. On occasion, key community figures advocated on behalf of the Red Cross with the village population, particularly where there was initial resistance and hostility.

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There are many problems which former child soldiers returned are confronted with in the community. People need safe water, better sanitation, buildings for primary schools, good roads and bridges. They need opportunities to start earning the living and fend for themselves and their children. In an attempt to alleviate their plight and contribute to creating a child-friendly environment, the Sierra Leone Red Cross Society offered support in developing small-scale income generation initiatives. 21 communities were helped to start up small farms; other five communities were provided with sheep or goat.



*Training helped children avoid the petty crime and the sex trade.*

The recently conducted evaluation of the CAR project found that the work that the Sierra Leone Red Cross Society had been undertaking with war-affected children was an important contribution to their rehabilitation and re-integration into society. It had already helped many not to fall into the trap of becoming directionless disaffected youth. The CAR centres also contributed enormously increasing the profile of the Red Cross in the communities where they operate. They helped to overcome a lot of initial mistrust and hostility towards the Red Cross which existed in many communities because of the perception that the Red Cross colluded with the rebels during the war. The evaluation attested it would not be appropriate to

consider pulling out in the short term as there is still a large unmet need. It raised, however, a number of questions which the Sierra Leone Red Cross Society will have to consider in consultation with the communities, the Federation, the International Committee of the Red Cross (ICRC), as well as with current and potential funders. So far, the CAR centres have been working with children up until the age of 18 years old. The project, however, may also have a role to play with the youth over the age of 18, who nonetheless were children at time of the war and affected by it. This would change the nature of the centres from being purely child-focussed to being child and youth focussed. Alternatively, the centres could be entirely youth focussed and become service providers for youths requiring skills training. Both of these changes can be seen as part of the long-term process of post war peace building but would require a change from the way the Red Cross is currently operating. The Sierra Leone Red Cross Society is planning a further assessment before deciding on a change to the project.

## Organizational development

**Goal The capacity of the Sierra Leone Red Cross Society to deliver sustainable and effective programmes that support the most vulnerable population is strengthened.**

### **Achievements, impact and lessons learned**

Sierra Leone Red Cross Society has a number of institutional challenges that must be addressed if they are to fulfil their mission of improving the situation of the most vulnerable. Since the beginning of 2005, the National Society commenced the implementation of a regionalisation policy and to this end has put in place regional field officers in the Northern, Eastern and the Southern regions. The next step is to establish a fourth region which will cover the three remaining districts of the Western Area, Port Loko and Kambia. When the regionalization process is complete, there will be a regional structure in place to handle the smooth running of the various districts in the regions.

With the technical support of the Federation delegation, the Sierra Leone Red Cross Society also finalized a plan of action to improve the financial management practices for the national society i.e., to achieve greater transparency, accountability and accuracy. The implementation of the plan will start in 2006. In the meantime, a memorandum of understanding was signed between the national society's president, the secretary general and the Federation head of delegation to underscore the responsibility of the national society to account for their action. To strengthen the internal control systems, the Sierra Leone Red Cross Society has also decided to recruit an internal auditor in 2006 and has started paying the salaries of its branch field officers from the national society's own resources. The latter has not been an easy task given limited capacities of the Sierra Leone Red Cross Society to raise funds locally as well as the difficult socio-economic condition in the country compounding the task of finding alternative internal resources.

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The resources needed by the Sierra Leone Red Cross Society to address the current vulnerabilities while rebuilding its own institution are significant. The national society has been encouraged to engage in more constructive and long term partnerships, while looking at internal opportunities for increasing their financial resource base. Currently, the Sierra Leone Red Cross Society relies almost entirely on funding from external sources. It acknowledges that this almost total reliance is not sustainable in the, medium or long term. It continues to build its own funds but realistically the locally raised resources will not be sufficient to enable the national society to take over the running of the projects; not for another four to five years. Funding from the Sierra Leone government is highly unlikely in this timeframe. The communities do support the work of the branches by giving land, buildings, and labour but their ability to give financial support is very limited. In an effort to address the issue, the national society has recruited a fundraising and resource development officer who has started consultations within and without the organization to seek ideas for the emerging resource development plan.

One aspect of the problem is also the absence of a strategic plan that would define the future directions and priorities of the national society. The Federation Secretariat, through its delegation in Sierra Leone, is currently engaged with the national society to develop such a plan. As an initial step, a joint needs and capacity assessment exercise was undertaken by the Sierra Leone Red Cross Society in partnerships with the Federation and the ICRC with an objective to assess the appropriateness of the current Sierra Leone Red Cross Society policies, programmes and activities and their impact on the most vulnerable in Sierra Leone; to map the current human, material and financial capacities of the national headquarters, branches and regional offices and recommend the way forward for the national society to meet the humanitarian challenges. The findings are quite revealing. The humanitarian challenges in Sierra Leone are so many and so diverse that the country, needs not only a strategy but must manifest strong will, conviction, courage, and strong organizations to move ahead.

### **Federation coordination, cooperation and strategic partnerships**

The Federation Secretariat through its delegation in Sierra Leon provided technical support to the Sierra Leone Red Cross. It offered guidance and on-the-job coaching on management as well as operational issues. The aim of the Federation Secretariat is to empower the Sierra Leone Red Cross Society so that it can deliver quality and sustainable services to the most vulnerable. To strengthen the capability of the Federation delegation to achieve the aim, the delegation, in pursuance with the recommendations of the internal audit, took measures to improve its financial management system including the mechanism that regulates the disbursement of working advances to the society. As the first step, a new finance and administration officer was identified. The recruitment, however, has been constrained by the lack of funds to support the position. The shortage of resources constrained other efforts too e.g., restructuring of the logistics unit, monitoring of financial as well as programme management as fewer visits could be made by the delegation to the provinces to engage with the branches.

An important role the Federation delegation undertook was to coordinate the work of the Movement partners in the country in support of the national society's priorities. A good working relationship has been maintained between all components of the Movement – the Sierra Leone Red Cross Society, the ICRC, the Spanish Red Cross that works bilaterally with the national society and the headquarters of other partner national societies. The delegation also participated in a number of meetings with the UN and other national as well as international organizations to represent the Sierra Leone Red Cross Society, to encourage partnerships with the national society and coordinate programmes while maintaining its neutral and independent role.

[Final financial report below; click here to return to title page and contact information.](#)

International Federation of Red Cross and Red Crescent Societies

SIERRA LEONE

Selected Parameters	
Year/Period	2005/1-2005/9998
Appeal	M05AA023
Budget	APPEAL

All figures are in Swiss Francs (CHF)

## I. Consolidated Response to Appeal

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
A. Budget	972'024	552'167	1'290'011	460'754	0	3'274'956
B. Opening Balance	18'344	-17'031	-24'634	-55'913	1'520	-77'714
Income						
Cash contributions						
British Red Cross	264'629	67'245	224'705	28'014	131'144	715'738
Canadian Red Cross Society			22'375	30'370		52'746
Danish Red Cross	221'855					221'855
Finnish Red Cross		21'725			3'114	24'839
Icelandic Red Cross			138'176	19'720		157'896
Netherlands Red Cross		-22'707		-34'086		-56'793
Swedish Red Cross	165'150		280'305	1'924	86'595	533'974
Swiss Red Cross			103'320			103'320
C1. Cash contributions	651'634	66'263	768'881	45'942	220'853	1'753'574
Outstanding pledges (Revalued)						
Swiss Red Cross			34'440			34'440
C2. Outstanding pledges (Revalued)			34'440			34'440
Reallocations (within appeal or from/to another appeal)						
Icelandic Red Cross				-9'860	9'860	0
C3. Reallocations (within appeal)				-9'860	9'860	0
Inkind Personnel						
Canadian Red Cross Society			11'617			11'617
Danish Red Cross	30'067					30'067
C5. Inkind Personnel	30'067		11'617			41'684
C. Total Income = SUM(C1..C6)	681'701	66'263	814'938	36'082	230'713	1'829'698
D. Total Funding = B + C	700'045	49'233	790'304	-19'831	232'234	1'751'984

## II. Balance of Funds

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
B. Opening Balance	18'344	-17'031	-24'634	-55'913	1'520	-77'714
C. Income	681'701	66'263	814'938	36'082	230'713	1'829'698
E. Expenditure	-557'032	-45'904	-581'957	-85'102	-170'971	-1'440'967
F. Closing Balance = (B + C + E)	143'013	3'329	208'346	-104'934	61'263	311'017

Selected Parameters	
Year/Period	2005/1-2005/9998
Appeal	M05AA023
Budget	APPEAL

All figures are in Swiss Francs (CHF)

## III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation		
	A					B	A - B	
<b>BUDGET (C)</b>		972'024	552'167	1'290'011	460'754	0	3'274'956	
<b>Supplies</b>								
Shelter	39'188		995	4'502			5'497	33'691
Construction		-1'571		-15'716			-17'287	17'287
Clothing & textiles	27'490			781			781	26'710
Food	100'835			51'773			51'773	49'062
Seeds,Plants	74'713							74'713
Water & Sanitation	31'422							31'422
Medical & First Aid	36'297	27		3'839			3'866	32'430
Teaching Materials	300'435			73'182			73'182	227'253
Utensils & Tools	3'831			41'305			41'305	-37'474
Other Supplies & Services	102'395			21'631			21'631	80'764
<b>Total Supplies</b>	<b>716'606</b>	<b>-1'544</b>	<b>995</b>	<b>181'297</b>			<b>180'749</b>	<b>535'857</b>
<b>Land, vehicles &amp; equipment</b>								
Vehicles	37'375	18'241	46			2'283	20'570	16'806
Computers & Telecom	174'253	5'961		104		2'138	8'203	166'050
Office/Household Furniture & Ec	2'634			-10'803		11'515	711	1'923
<b>Total Land, vehicles &amp; equipme</b>	<b>214'262</b>	<b>24'201</b>	<b>46</b>	<b>-10'700</b>		<b>15'935</b>	<b>29'483</b>	<b>184'779</b>
<b>Transport &amp; Storage</b>								
Storage	20'886	2'581	11'166			113	13'860	7'026
Transport & Vehicle Costs	235'774	80'995	7'610	115'497	27'659	22'239	254'000	-18'226
<b>Total Transport &amp; Storage</b>	<b>256'660</b>	<b>83'576</b>	<b>18'776</b>	<b>115'497</b>	<b>27'659</b>	<b>22'352</b>	<b>267'860</b>	<b>-11'200</b>
<b>Personnel Expenditures</b>								
Delegates Payroll	257'414	210		5'006	209	68'223	73'648	183'766
Delegate Benefits		47'826		14'671	5'248	57'247	124'993	-124'993
Regionally Deployed Staff						5'012	5'012	-5'012
National Staff	752'171	28'557	586	55'084	13'731	-14'583	83'374	668'797
National Society Staff		249'596	11'147	122'096	41'368	4'954	429'162	-429'162
<b>Total Personnel Expenditures</b>	<b>1'009'585</b>	<b>326'189</b>	<b>11'733</b>	<b>196'858</b>	<b>60'556</b>	<b>120'853</b>	<b>716'189</b>	<b>293'396</b>
<b>Workshops &amp; Training</b>								
Workshops & Training	532'001	49'305	21'967	51'628	4'922	5'512	133'334	398'668
<b>Total Workshops &amp; Training</b>	<b>532'001</b>	<b>49'305</b>	<b>21'967</b>	<b>51'628</b>	<b>4'922</b>	<b>5'512</b>	<b>133'334</b>	<b>398'668</b>
<b>General Expenditure</b>								
Travel	21'466	8'127	2'894	11'823	7'861	11'374	42'079	-20'613
Information & Public Relation	68'174	1'089		3'365	1'725	-1'847	4'332	63'842
Office Costs	226'159	9'972		5'922	5'655	59'071	80'620	145'539
Communications	7'591	6'338	535	3'242	6'590	30'209	46'914	-39'323
Professional Fees	7'423	603		-12'611	234	24'058	12'283	-4'860
Financial Charges	2'155	2'099		-6'358	-37'593	-36'756	-78'608	80'764
Other General Expenses	-0	26'426	5'428	43'298	5'565	-101'707	-20'990	20'990
<b>Total General Expenditure</b>	<b>332'969</b>	<b>54'654</b>	<b>8'856</b>	<b>48'682</b>	<b>-9'963</b>	<b>-15'599</b>	<b>86'630</b>	<b>246'339</b>
<b>Depreciation</b>								
Depreciation						10'806	10'806	-10'806
<b>Total Depreciation</b>						<b>10'806</b>	<b>10'806</b>	<b>-10'806</b>
<b>Program Support</b>								
Program Support	212'872	36'080	2'984	37'778	5'532	11'113	93'487	119'385
<b>Total Program Support</b>	<b>212'872</b>	<b>36'080</b>	<b>2'984</b>	<b>37'778</b>	<b>5'532</b>	<b>11'113</b>	<b>93'487</b>	<b>119'385</b>
<b>Operational Provisions</b>								
Operational Provisions		-15'430	-19'453	-39'084	-3'603		-77'570	77'570
<b>Total Operational Provisions</b>		<b>-15'430</b>	<b>-19'453</b>	<b>-39'084</b>	<b>-3'603</b>		<b>-77'570</b>	<b>77'570</b>
<b>TOTAL EXPENDITURE (D)</b>	<b>3'274'956</b>	<b>557'032</b>	<b>45'904</b>	<b>581'957</b>	<b>85'102</b>	<b>170'971</b>	<b>1'440'967</b>	<b>1'833'988</b>
<b>VARIANCE (C - D)</b>		<b>414'992</b>	<b>506'263</b>	<b>708'053</b>	<b>375'651</b>	<b>-170'971</b>	<b>1'833'988</b>	