

Annual report

 International Federation
of Red Cross and Red Crescent Societies

Ethiopia

MAAET002

30 June 2010

This report covers the period 01
January 2009 to 31 December 2009



Peer education training o HIV and AIDS prevention in Tigray region conducted by the Ethiopian Red Cross volunteers

In brief

Programme purpose: Ethiopia Red Cross Society's (ERCS) programmes are focused on responding to the humanitarian challenges in order to alleviate the suffering of the most vulnerable through contributing to the decline in deaths, injuries and impact from disasters, diseases and public health emergencies, as well as reducing intolerance and discrimination, while fostering respect for diversity and human dignity. ERCS aims to raise the capacity of staff and volunteers in disaster response and preparedness in order to effectively and efficiently deliver better services to disaster affected populations in line with the Federation's Global Agenda goals.

Programme(s) summary:

ERCS implemented a range of community-based programmes that addressed the needs of the vulnerable. ERCS responded to emergency situations by deploying assessment and relief teams, assisting people with relief materials and contributing to overall humanitarian efforts in Ethiopia. Rehabilitation and recovery activities were also undertaken in the affected areas. Due to the recurrence of floods and droughts in the country, the capacity of the National Society (NS) has been over-stretched.

The impact of disasters and diseases justified the need to mobilize and train more volunteers through strengthening existing and establishing new Red Cross committees throughout the country in order to increase outreach to the most vulnerable people.

The International Federation of the Red Cross and Red Crescent Societies (IFRC) provided technical and financial support to the ERCS to respond to the increasing humanitarian needs. The IFRC also supported the NS in mobilising international resources for its long-term programmes and emergency operations including the food insecurity and outbreak of acute water diarrhoea (AWD) experienced in 2009.

Financial situation: The total 2009 budget was CHF 2,885,230 (USD 2719329 or EUR1901367), of which 51 percent was covered.

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

See also emergency appeals operational during the reporting period:

[MDRET005](#) The appeal was initially launched in May 2008 for CHF 1,847,444 to assist 40,000 food insecure beneficiaries.

[MDR64003](#) The emergency appeal was revised to CHF 3.7 million to support the ERCS to assist more than 70,000 people affected by floods.

[MDRET007](#) An appeal for CHF 30,579,088 to support the ERCS in assisting some 330,621 beneficiaries with vital food assistance, emergency water and sanitation, and livelihoods recovery.

No. of people we have reached: A total of 500,000 people were reached mainly children below five years of age, pregnant and lactating mothers, youth and the elderly, people living with HIV as well as those affected by various emergencies.

Our partners: The NS partnered with the Swedish Red Cross who provided a large proportion of the funding for 2009 programmes and the IFRC for technical support. Partnerships were also developed with other Partner National Societies (PNS) in Ethiopia implementing bilateral and multilateral activities including the American, Austrian, British, Danish, Finnish, French, German, Netherlands and Spanish Red Cross Societies. The bilateral activities implemented complement each other thus ensuring overall coordinated service delivery in the field of health and care and food security. The International Committee of the Red Cross (ICRC) also played an important role in providing valuable support to the NS through its traditional activities, as well as in logistics.

ERCS also partnered with the government ministries – especially the federal ministries of health, agriculture and rural development (which are responsible for disaster preparedness and disaster risk reduction). There was also close cooperation with local and regional structures of government. These collaborations were found to be crucial in implementing community-based health and disaster management interventions.

Other partners outside the Movement include international donor agencies such as the USAID, EU and ECHO. There was also particular support for disaster management activities from DFID.

The NS also cooperated and coordinated its activities with various UN agencies such as OCHA, UNICEF, UNDP, WHO and WFP). Through its country-wide network of local branches, the NS also partnered with community-based women's associations, in addition to the associations of people living with HIV (PLHIV).

Context

Based on an assessment conducted in Ethiopia, the Government released the Humanitarian Requirements report in October 2009, which highlighted that 6.2 million were in need of food assistance and support to facilitate their recovery. The need for food assistance is at its lowest during the September to December harvest period contributes more than 85 percent of the country's annual cereal production. The higher than normal figure of 6.2 million people requiring food assistance is attributed to the failure of the May to June harvest. The situation was further worsened by the end of year rains that were well below the average for the season, particularly in the eastern part of the country, resulting in a below-normal harvest. The very unequal and often minimal rainfall has resulted in overall food production varying dramatically from one part of the country to another. ERCS requested the IFRC to assist in conducting a thorough assessment of the situation and identify areas of interventions. A Field Assessment and Coordination Team (FACT) were deployed in December 2009 to conduct an assessment in four severely affected zones in Oromiya, Amhara and Tigrey regions. More details are available in the Emergency Appeal document [MDRET007](#).

The number of AWD cases reported increased rapidly between July-August 2009. There were a total of 11,667 cases reported in the regions of Oromiya, Amhara, Addis Ababa, Southern Nations Nationalities and People's Region (SNNPR), Afar and Somali during the reporting period. According to the Federal Ministry of Health (FMoH) 617 new cases with eight deaths were reported from 35 districts in the six regions as of August 2009.

The outbreak of AWD mostly affected women of child bearing age and children under five years of age. In response to the outbreak, the FMoH and the regional and zonal health structures requested humanitarian assistance in the form of technical experts, drugs, medical supplies and Cholera Treatment Centre equipment in order to support the implementation of response activities to mitigate the effects of the outbreak. In order to address the urgency of the situation, the FMoH along with its partners conducted a joint field assessment. FMoH projected that the number of AWD cases would reach 130,000 by November 2009 if adequate response operations were not implemented. ERCS supported the response operations through a DREF allocation from the IFRC amounting to CHF 226,225.

The country also experienced internal population displacements during 2009 affecting people in Oromiya, Gambella and Somali regions. Internal conflicts between pastoralists, local communities, and cross border conflicts between people from Gambella region and southern Sudan, resulted in a displacement of thousands of people from their homes. Some of the conflicts were triggered by competition on the use of limited water resources and grazing land. In addition Gambella is a region prone to natural disasters such as floods and epidemics that require additional preparedness and risk reduction activities by the humanitarian sector.

ERCS also continued the emergency health response operations in Moyale in Somali region and Borena, Negele and Oromiya in the Horn of Africa (HoA) regions. ERCS also put in place plans to scale up water and sanitation activities in the affected areas to prevent and reduce the effects of AWD. ERCS was active in responding to seasonal influenza outbreaks, particularly for H2P and H1N1. The NS was actively involved in awareness raising activities and coordinating national influenza pandemic preparedness activities.

Progress towards outcomes

The ERCS programmes in 2009 were tailored towards making a difference on the lives of targeted communities through lessening the burdens of chronic disasters, diseases and lack of access to safe water among vulnerable populations in Ethiopia. The programme components were aligned to the Federation Global Agenda Goals and followed the policies, principles and initiatives of the IFRC as well as the priorities of the ERCS Governing Board. All the NS activities were also based on the priority needs in the country.

Disaster Management

Programme Component: Disaster Preparedness

Outcome 1: Improved NS ability to predict and plan for disaster.

Outcome 2: The impact of disasters on people's lives is reduced.

Achievements

Given that the Horn of Africa region, is one of the most hit by the climate change, ERCS put special emphasis on scaling up its climate change and adaptation activities. Activities started in 2008 when ERCS conducted the first awareness raising workshop in East Hararghe for 200 school teachers. Activities continued in 2009 with bilateral support from the Netherlands Red Cross.

Programme Component: Disaster Response

Outcome 1: The ERCS' disaster response capacities are improved

Outcome 2: Sustainable livelihood of the population affected by disaster is restored through effective disaster recovery programme

Achievements

In order to strengthen logistics capacity of the ERCS in the field for pre-positioning of relief stocks in strategic locations, construction of a mini-warehouse started at Nekemet in the East Wollega zone. Approximately 20 percent of allocated funds were utilised for the construction of a foundation and masonry work for the mini-warehouse.

ERCS disaster management department was actively participating in various assessments including food security in Guji/Borena zone of Oromiya region in January 2009 and in four locations where the FACT was deployed prior to preparing an emergency appeal for food shortages in Ethiopia. Details about the assessments and operations can be found in the documents related to Horn of Africa (MDR64003) and Ethiopia (MDRET007) emergency appeals.

ERCS also purchased non-food items for contingency stocks and participated in various harvest and food security assessments together with Government of Ethiopia and RC/RC partners. The detail of the contingency stocks purchased is as follows: 2,000 jerry cans, 1,000 blankets, 2,775 sleeping mats and 100 plastic sheeting.

ERCS was also actively involved in emergency response activities related to the population displacements caused by internal conflicts between ethnic groups in close cooperation with ICRC in Ethiopia. ERCS, supported by ICRC through its branch in Bench Maji Zone of SNNPR was one of the first actors to reach beneficiaries affected by internal conflict.

Some 630 families (5,123 people) were displaced from villages. ERCS assisted 452 of the internally displaced families with tents, blankets, soap, plastic mats, jerry cans, cooking pots and maize at a temporary camp established at a school compound in Bachuma. Most of the items were provided by the ICRC. A total of 30 ERCS volunteers were involved in providing relief assistance to internally displaced persons and organising temporary shelter for the affected families.

Constraints or Challenges:

- There was limited support from donors, which affected implementation of all planned disaster management activities.
- The ERCS disaster management department's capacity was also limited to scale up activities. Mobilising additional staff is a challenge due to lack of resources.
- The heavy involvement of senior disaster management staff in operational matters prevented them from building sustainable partnerships with external partners such as EU, USAID, DFID, UN Agencies and various other donors.

Programme Component: Disaster Risk Reduction

Outcome 1: Improved mitigation mechanisms at the community level.

Outcome 2: Improved community awareness on the impact of environmental degradation.

Outcome 3: Increased food production, availability and utilisation at community level.

Achievements:

The ERCS continued supporting vulnerable people with a number of activities addressing disaster risk reduction (DRR), food security and community preparedness in 2009. Most of the activities had been planned during previous years and activities in 2009 were part of NS long-term commitments to address these issues.

DRR activities were funded by DFID through a global partnership between IFRC and DFID. Some activities started in 2008 and continued in 2009, particularly the establishment of nurseries and vegetable gardens. ERCS supported vulnerable people in strengthening their capacities in coping with disasters and improving their food security levels by developing nursery, planting trees and distributing vegetable seeds.

A total of 288,300 tree seedlings of different varieties were distributed to 516 families (approximately 3,000 people) in East Hararghe zone and to 3,000 families (approximately 15,000 people) in Wolayita zone in 2009. In addition, a total of 98,500 different varieties fruit tree and forest tree seedlings were planted in a nursery garden at Gursum in East Hararghe. These seedlings will be ready for distribution in July 2010. The table below shows some of the activities carried out in the establishment of nursery gardens.

Table 2: Nursery gardens development works

Activities	Unit	Planned	Achieved
Potting	Pots	50,000	98,500
Bed preparation	Seed bed	25	55
Seed sowing	Unit	58	58
Shading	Unit	20	55
Watering	Unit	25	55

ERCS also assisted selected communities with the establishment of vegetable nurseries and gardens in Boloso Sore Woreda, Wolayita and SNNPR. Most of the targeted beneficiaries of the vegetable gardens were from female headed households. The gardens will provide the beneficiaries with additional nutrition and also help them to generate income by selling their produce on the local market. A total of 27 vegetable beds producing 20,000 seedlings were established on 0.9 hectare of land as shown in the table.

Table 2: Vegetable gardening/seedlings

Vegetable type	Planned	Achieved
Carrot seedlings	2,000	4,000
Cabbage seedlings	2,000	3,000
Tomato seedlings	1,000	2,000
Onion seedlings	1,000	5,000
Garlic seedlings	1,000	2,000
Red root seedlings	3,000	4,000
Total	10,000	20,000

In response to the Food Security initiative and as a result of the launching of a five-year strategic framework for food security in Africa initially focusing on 15 sub-Saharan NS implementing food security activities, a FS project was initiated by the ERCS supported by the Swedish Red Cross. A Vulnerability and Capacity Assessment (VCA) was conducted in December 2007, which resulted in initiating a four year (2009-2012) Integrated Food Security project. The focus of the project was to build the capacity of communities affected by food insecurity in Dedba, Dergajen and Shibta in Tigrey region. The objectives of the project are: to improve the income of 2,259 vulnerable families; to improve health conditions of 10,000 people; to improve environmental protection and; building capacity of ERCS Tigrey branch in implementing long-term food security programmes. The Swedish Red Cross provided CHF 423,450 in 2009 as initial funding towards the project.

The activities planned for 2009 were on developing income generating projects, water development and rehabilitation, community-based First Aid, health extension services and community capacity building. A number of income generating and management related training was provided to 60 families in 2009. These included training on dairy cows management for 20 people and cattle fattening training for 200 people. At the end of the training some 20 cross breed cows and 200 cattle for fattening were distributed to beneficiaries.

The training and distribution of cattle was done in close cooperation with local authorities, particularly with animal health and reproduction experts from the Woreda Rural District Development and Agriculture department. Twelve cows, from the 20 that were distributed, gave a birth to calves during the reporting period.



Nursery development activity within the Integrated Food Security Project

In order to improve the livelihoods of targeted beneficiaries, beehive management training using modern beekeeping technologies was also conducted. The training improved indigenous knowledge of beneficiaries by adopting new technologies. A total of 132 beneficiaries were trained and 164 modern beehives distributed to 82 beneficiaries.

One of the components of the integrated food security project was nursery development. The local authorities allocated 2 hectares of land to the target communities for planting of seedlings and establishment of nursery gardens. The communities were involved in land clearing/preparation, bed preparation, and potting, purchasing of material for fencing and tools necessary for their work

Constraints or Challenges:

- Distribution of beehives did not meet initial plan of having 400 beehives distributed to 200 beneficiaries. A total of 164 modern beehives distributed to 82 beneficiaries.
- Due to severe drought problems in some areas, people did not want to take a risk of taking up bee-keeping.
- There was also an initial plan of distributing 1,750 chickens to 350 people, but availability of poultry in the market was a challenge.
- A decision was made to replace poultry with sheep and goats, which benefitted 25 people.

Health and Care

Health and Care immunization activities, water and sanitation, and community based health services have been executed in order to complement the efforts of the government in improving the health status of the rural community. Activities were carried out in targeted branches and supported of multilateral funds channelled through the Country Plan 2009-2010.

Programme purpose: Community Based Health Care

Outcome 1: Increased healthy communities which are able to cope with health and disaster challenges

Outcome 2: Vulnerability to HIV and its impact reduced through preventing further infection, expanding care, treatment and support, and reducing stigma and discrimination

Outcome 3: Curative and preventive health services is promoted and thus the access to them is improved in the target areas.

Achievements:

ERCS conducted community-based health First Aid (CBHFA) training in collaboration with the Swedish Red Cross in 16 branches with total budget allocation of SEK 700,000. Training of trainers (ToT) in CBHFA was conducted at headquarters level. Thirty one volunteers from 16 selected branches participated in the nine day training. All integrated health issues such as basic First Aid training, Water and Sanitation, HIV and AIDS, integrated health approach and intervention, gender and health and family planning were addressed. Trainees are equipped with the Amharic version of the CBHFA manual and tool kit. The training was cascaded to the branches where 320 CBHFA facilitators were trained at branch level and 320 First Aid kits were distributed.

ERCS also continued with strengthening capacities of its branches and communities in addressing health related challenges. In collaboration with the FMOH and WHO a workshop on Malaria, TB, child growth and polio was organised by the ERCS. The participants were drawn from all 38 ERCS branches.

Programme purpose: Health in emergencies

Outcome 1: Increased healthy communities which are able to cope with health and disaster challenges

Achievements

Community-based First Aid training of trainers (ToT) was organised by the ERCS for 26 volunteers from targeted communities to teach them with basics of First Aid and conflict preparedness related activities. ERCS, also contributed to the overall efforts of reducing impact of HIV and AIDS on communities, organised specialised training for six home-based carers and 14 peer educators to strengthen capacities in implementation of rapid HIV testing in combination with child counselling, HIV and AIDS prevention, care and treatment. Trained volunteers will cascade knowledge down to their respective communities thus creating awareness, advocating for behavioural changes and encouraging counselling and testing.

The Swedish Red Cross provided funding for HIV prevention activities in Tigray region. During the reporting period, 50 home-based care clients were targeted with prevention activities. Peer-to-peer education was also provided to 74 selected beneficiaries.

A high level meeting organised by InterAction within the framework of USAID supported an integrated programme to address preparedness for H2P influenza pandemic. Over 100 people including government officials, UN agencies, USAID, nongovernmental organisation (NGOs) and Red Cross/Red Crescent Societies participated. The first three cases of H1N1 influenza were confirmed by the Ministry of Health during the reporting period.

The NS with support from the ICRC 65 out of 77 planned ambulances and is in the process of transferring these to the branches. Memoranda of understanding were signed between the NS and 37 municipalities. Under the agreements the municipalities committed to cover running costs of the ambulances and contribute to a fund to be used for the replacement of aging fleet.

Programme purpose: Water and Sanitation

Outcome 1: Access to safe water and sanitation services improved in the target areas.

Outcome 2: Improved community awareness and understanding of the importance of proper hygiene and sanitation measures.

Achievements

ERCS supported by the Swedish Red Cross started implementation of an integrated health project focusing on water and sanitation and hygiene promotion activities in four branches. The project was designed to be integrated with other health programme components such as CBHFA, HIV prevention, community and branch capacity building activities.

All four targeted branches of West Wollega and West Shoa in Oromiya region and Wolaita and Guraghe in SNNP region carried out the planned activities. A total of 55 and 72 volunteers were trained in Participatory Hygiene and Sanitation Transformation (PHAST) methodology and Community Based Health and First Aid (CBHFA) respectively. Almost 93 percent of the planned activities were achieved and other activities such as the construction of sanitary platform slabs production and the training of water management committees are planned for 2010.

Some activities related to rehabilitation of boreholes and funded under the Food Security emergency appeal (MDRET005) were implemented through the Country Plan for 2009. A total of three deep wells were rehabilitated in Wolayta zone in SNNPR region. Health and water related issues have been addressed within the project by organising a Training of trainers' workshop on PHAST for six people selected by communities, who will cascade the training to local communities. A total of 50 community members were trained on hygiene promotion and the management of water and sanitation facilities at community level.

Programme purpose: Immunisation

Outcome 1: Improved Mother and Child Health (MCH) services through NS community-based activities, including safe motherhood and child health initiatives, vaccination and nutrition activities.

Outcome 2: Increased MCH service attendance within the targeted communities.

Outcome 3: Improved public awareness on importance of MCH services and immunization.

ERCS has been actively involved in social mobilisation activities to fight malaria, polio, measles and TB. Social mobilisation campaigns were conducted upon request from and in coordination with Federal Ministry of Health (FMoH) and local health structures.

In Afar region, ERCS participated in a measles campaign by deploying 790 volunteers and contributed to vaccinating 29,606 children under the age of five. In Beneshangul-Gumuz and SNNP region, ERCS reached 27,111 and 26,180 families with polio campaigns. Activities carried out under this polio campaign are shown in the table below:

Table 3: Participation in Polio campaign

#	Region	ERCS Volunteers	No of Villages	HH visited	Children <5 eligible	Children < 5 vaccinated
1	Beneshangul-Gumuz	1,000	100	27,111	33,297	33,359**
2	SNNP	1,060	106	26,180	33,523	33,443
Total		2,060	206	53,291	66,820	66,802

**initial no of targeted population, provided by local authorities, was not accurate

ERCS targeted women with the polio social mobilisation campaign in Somali region. The approach was highly appreciated by the regional MoH office. ERCS identified 168 villages to target with the social mobilisation activities. ERCS branches worked closely with the Women Association (WA) in Somali who facilitated the selection of 840 women for TOT on polio social mobilisation. The trained woman cascaded the training to 168 villages reaching 93,652 families. Various IEC material were used during the campaign such as banners in local language and the use of 10,000 descriptive pictures on polio prepared jointly with UNICEF/WHO which were distributed to the communities through the trained women.

ERCS continued with active interventions in the field of MCH. The main goal of these interventions is to reduce under five child mortality by two-thirds by 2015. A ToT on MCH interventions at community level was organised by the ERCS pulling together 72 ERCS Zonal MOH staff members. Training was cascading down at community level by training 2,500 ERCS volunteers from 23 branches in 69 sessions. A total of 23 ERCS branches participated in MCH community level interventions and the trained volunteers cascaded the training to 250,000 beneficiaries.

Constraints or Challenges:

- Low coverage of the Country Plan does not allow the ERCS to implement all planned activities and there was frequent need for re-arranging operational plans.

- Challenges in securing the funds and re-planning process affected transfer of funds and consequently causing delays in implementation.
- More efforts are to be made in strengthening capacities at branch and community levels to deliver better and quality services to vulnerable people.
- Volunteer network at lowest community level (village) should be strengthened to improve service delivery and cover more areas, especially with dissemination, awareness and social mobilisation.

National Society Development

ERCS activities in 2009 focussed on organisational development with funding from the Swedish Red Cross. The activities included branch capacity assessments, revision of youth policy, dissemination of membership cards and membership guidelines to ERCS branches, strengthening membership and volunteer database of the ERCS. Special emphasis was also made on induction to newly elected Governing board members at regional and zonal levels.

Programme Component: Well functioning organisation

Outcome 1: ERCS has functional and strengthened structures in branch development, governance, management and volunteer management according to the characteristics of a well functioning NS.

Achievements

An induction workshop was organised for newly elected governing board members covering various areas of the Red Cross including principles and values, ERCS history and current activities, roles and responsibilities of governing board members and the concept of volunteerism. A total of 148 (26 female and 122 male) board members from 38 ERCS branches participated in the workshops. Nine ERCS beneficiaries also attended the induction.

Constraints or Challenges:

- Lack funding affected governance and youth development activities and also impacted on monitoring and supervision of branch activities.

Programme Component: Branch Development and Volunteer Management

Outcome 1: ZRCS has vibrant branches and local units delivering quality services through their local volunteer and youth networks.

Outcome 2: ZRCS has well established systems and procedures for the systematic provision of technical support for branch development and volunteer management by the headquarters.

Achievements:

A two-day workshop was conducted in February 2009 as an induction platform of the volunteer and the membership on the new membership guidelines and the volunteer database system adopted by the ERCS General Assembly in December 2008. A total of 43 staff and board members, including two participants from the Red Cross attended the workshop to discuss implementation strategies for a volunteer database. The revised membership guidelines were adopted and 1,033,000 new membership cards were distributed to 20 branches. Special training was also provided to 17 branches (at least six people per branch) on membership and volunteer database implementation and maintenance. The training will be cascaded to all ERCS branches by June 2010.

Branch Capacity Assessment (BCA) tools developed by sister NS in East Africa with support from the Swedish Red Cross, was adapted to and modified to suit the ERCS context. Implementation of the tools started at the end of 2008. A BCA was carried out in 35 branches and the first draft report of the assessment was presented to the staff at headquarters and branch levels in October 2009. The BCA report will be an important tool to guide the development of integrated branch development programmes.

The ERCS also strengthened the existing youth network throughout all existing branches and established new youth networks for newly established branches. The emphasis of ERCS was on developing youth leadership capacities. A youth workshop was conducted attended by 32 participants (22 male and 10 female) from four branches. The commitment of ERCS on developing and strengthening youth units and networks within its branches was emphasised in the Intensified Capacity Building (ICB) proposal sent to the IFRC. The IFRC allocated an amount of CHF 39,000 to support ERCS in starting youth development activities.

ERCS attended a meeting held in Kenya in September 2009 to discuss youth development matters within East African NSs. In addition, two youth volunteers and one member of staff attended the youth meeting held in Italy, Solferino in June 2009. Nearly 600 youth volunteers, delegates from more than 150 National Societies participated in the meeting.

A number of exchange visits were organised between the ERCS and its partners, particularly the Swedish, Finnish and Hong Kong Red Cross Societies. ERCS continued addressing branch development through ongoing Health and DM programmes as part of overall efforts to strengthen branches for better service delivery to vulnerable people.

Constraints or Challenges:

- ERCS salary scale is not competitive compared to market rates and the NS has made a decision to conduct a review of the human resources management system.
- Some activities which were carried out at branch level were not always reflected in reports, thus there is a need to strengthen monitoring and reporting capacities at field level.

Working in partnership

The ERCS has been working with number of partners throughout 2009 to ensure effective and coordinated service delivery to vulnerable people. Partnerships included government agencies such as FMOH, Ministry of Agriculture and Rural Development (responsible for disaster management and risk reduction), various State Ministries and regional authorities. The NS as auxiliary to government in humanitarian activities is receiving financial support from local authorities in areas where ERCS is running the ambulance programme.

ERCS has been closely working with PNS including Austrian, British, Danish, German, Finnish, Netherlands, Swedish and Spanish Red Cross at both bilateral and multilateral levels. Close working relationships have been developed with the ICRC delegation in Ethiopia resulting in effective joint activities addressing conflict related vulnerabilities including displacements. The ERCS and the IFRC Country Office have re-established the practice of having monthly Movement cooperation meetings with formal terms of reference, which are agreed between the Movement partners.

Relationships with EU, UN Agencies (UNOCHA, WFP, UNICEF, WHO, UNHCR) and other International NGOs were further strengthened by participating in various coordination fora and bilateral meetings. The H2P project opened doors for new partnerships with external partners resulting in developing an integrated work plan to collectively address strengthening community resilience and developing preparedness plans for pandemic influenza.

ERCS has also put special emphasis on building capacities of targeted communities in developing and/or improving their sustainable livelihood through exchange visits between the similar groups of people. Experience and knowledge sharing exercise involved community members, representatives of local administration, Rural and Agricultural office, development agents from the targeted areas, female representatives of communities and representatives from the ERCS. The group visited various income generating projects including Adimeskel dairy co-operative, silk worm production model farm, Sasun Saving and Credit Union, farmers training centre, fattening cooperatives of youth in Adigrat, Mytsedo beehive production (Wurko) and Messobo cooperative of cobble stone.

Contributing to longer-term impact

The ERCS long-term programmes are contributing to the Global Agenda goals of the IFRC as well as the Millennium Development Goals. By implementing community-based health and disaster management activities, the ERCS is contributing to enhancing the capacities of the targeted local communities to respond to emergency situations.

ERCS participated at peer review meeting together with the Ethiopian Evangelical Church Mekane Yesus - Development and Social Services Commission (EECMY-DASSC) and the Ethiopian Catholic Secretariat from 25 May to 09 June 2009. The exercise was conducted within the framework of the Steering Committee of Humanitarian Response (SCHR). SCHR is an alliance for voluntary action of eight major international humanitarian agencies and networks. SCHR functions as a forum where operational humanitarian agencies come together to exchange experiences and address issues of common concern. SCHR peer review findings and recommendations were shared with the ERCS and the IFRC for future considerations to increase accountability to beneficiaries in future programme implementations.

ERCS acknowledges that women are underrepresented in the governance of the NS and deliberate efforts were made to encourage and recruit women as board members in the local elections before the General Assembly later held in December 2008. The process continued through into 2009 to ensure that more female volunteers and staff are taking active role in programme implementation and decision making process.

ERCS continued conducting joint monitoring and evaluation exercises together with partners including Swedish British, Netherlands, German, Spanish, Danish, IFRC and other partners. Recommendations from these exercises were carefully analysed and implementation plans agreed with partners.

Looking ahead

Looking at past trends and development in the last 12 years, Ethiopia is likely to face a number of emergencies and disasters resulting from droughts and floods, which are exacerbated by climate change and the global economic slow-down. The food insecurity situation deteriorated towards the end of the year. The areas affected most by the low rains were eastern Orimiya, parts of Amhara, SNNP and Somali regions.

In order to be able to respond timely and effectively to future natural and manmade disasters, the ERCS will continue to focus on improving NS capacities mainly in disaster management and health and care. Efforts will be made to strengthen ERCS branch capacities in conducting rapid response activities immediately after disasters strike.

Logistics and procurement procedures will be modified to suit emergency situations given the tight operational timeframes. The NS took major efforts to take all necessary measures in preparing for possible pandemic influenza outbreak in close coordination and partnership with FMOH, WHO and other partners. The IFRC will continue to assist and support these initiatives with a special emphasis on capacity building at branch and community levels as well as strengthening institutional capacities at headquarters level.

How we work	
<p>The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".</p>	<p>Global Agenda Goals:</p> <ul style="list-style-type: none"> • Reduce the numbers of deaths, injuries and impact from disasters. • Reduce the number of deaths, illnesses and impact from diseases and public health emergencies. • Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability. • Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.
Contact information	
<p>For further information specifically related to this report, please contact:</p> <ul style="list-style-type: none"> • In Ethiopia: Fasika Kebede, Secretary General, Ethiopian Red Cross Society, Addis Ababa; phone: +251.11.515.38.53; fax: +251.11.551.26.43; email: ercs.sg@ethionet.et • In Ethiopia: George Gigiberia, Country Representative, IFRC, phone: +251.11.551.45.71; fax: +251.11.551.28.88; e-mail: george.gigiberia@ifrc.org • In IFRC Africa Zone: Dr Asha Mohammed, Head of Operations, Johannesburg, Email: asha.mohammed@ifrc.org, Phone: +27.11.303.9700, Fax: + 27.11.884.3809; +27.11.884.0230 	

International Federation of Red Cross and Red Crescent Societies

MAAET002 - Ethiopia

Annual Report 2009

Selected Parameters	
Reporting Timeframe	2009/1-2009/12
Budget Timeframe	2009/1-2009/12
Appeal	MAAET002
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
A. Budget	1,157,047	1,154,639	424,549	68,248	80,748	2,885,230
B. Opening Balance	19,795	226,168	6,845	0	24,622	277,431
Income						
Cash contributions						
<i>Australian Red Cross</i>	1,499					1,499
<i>Belgium Red Cross (Flanders)</i>		3,603				3,603
<i>British Red Cross</i>		135,067				135,067
<i>DFID Partnership grant</i>	150,538					150,538
<i>On Line donations</i>					98	98
<i>Sweden Red Cross</i>	168,186					168,186
<i>Sweden Red Cross (from Swedish Government)</i>	168,186	391,829	113,413		55,617	729,045
<i>Unidentified donor</i>	305	-0	-65			240
C1. Cash contributions	488,714	530,499	113,348		55,715	1,188,276
C. Total Income = SUM(C1..C6)	488,714	530,499	113,348	0	55,715	1,188,276
D. Total Funding = B + C	508,509	756,668	120,193	0	80,337	1,465,707
Appeal Coverage	44%	66%	28%	0%	99%	51%

II. Balance of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
B. Opening Balance	19,795	226,168	6,845	0	24,622	277,431
C. Income	488,714	530,499	113,348	0	55,715	1,188,276
E. Expenditure	-493,157	-645,599	-120,189		-62,416	-1,321,361
F. Closing Balance = (B + C + E)	15,353	111,069	5	0	17,921	144,346

International Federation of Red Cross and Red Crescent Societies

MAAET002 - Ethiopia

Annual Report 2009

Selected Parameters	
Reporting Timeframe	2009/1-2009/12
Budget Timeframe	2009/1-2009/12
Appeal	MAAET002
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure						Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL	
A		B						A - B
BUDGET (C)		1,157,047	1,154,639	424,549	68,248	80,748	2,885,230	
Supplies								
Construction Materials	68,056							68,056
Clothing & textiles	52,776							52,776
Food	370,000							370,000
Seeds,Plants	9,724							9,724
Water & Sanitation	222,227							222,227
Teaching Materials	35,310							35,310
Utensils & Tools	36,711							36,711
Total Supplies	794,804							794,804
Land, vehicles & equipment								
Computers & Telecom	3,271							3,271
Office/Household Furniture & Equipm.						4,743	4,743	-4,743
Others Machinery & Equipment	-0					-4,743	-4,743	4,743
Total Land, vehicles & equipment	3,271					0	0	3,271
Transport & Storage								
Storage			977				977	-977
Transport & Vehicle Costs	26,630	1,046	3,193	76		2,563	6,879	19,752
Total Transport & Storage	26,630	1,046	4,170	76		2,563	7,856	18,775
Personnel								
International Staff	267,500	18,715	58,536	1,632		38,176	117,059	150,441
National Staff	118,080	1,932	7,314	137		6,919	16,303	101,777
National Society Staff	291,626	1,887	1,553	1,000			4,440	287,187
Consultants	17,500	587	587				1,174	16,326
Total Personnel	694,706	23,121	67,990	2,768		45,096	138,976	555,730
Workshops & Training								
Workshops & Training	725,879	378	7,009	2,627		-6,135	3,879	722,000
Total Workshops & Training	725,879	378	7,009	2,627		-6,135	3,879	722,000
General Expenditure								
Travel	36,714	4,044	6,433	3,370		5,473	19,321	17,393
Information & Public Relation	194,766	37	12,302	1		46	12,387	182,379
Office Costs	63,686					2,412	2,412	61,274
Communications	23,641	5	63			7,990	8,058	15,584
Professional Fees	3,000		187			7,585	7,772	-4,772
Financial Charges	10,515		21	60		-1,535	-1,454	11,969
Other General Expenses	120,078	1,392	6,136	111		-12,697	-5,059	125,136
Total General Expenditure	452,401	5,478	25,143	3,542		9,274	43,437	408,964
Contributions & Transfers								
Cash Transfers National Societies		431,103	498,914	103,303		7,562	1,040,882	-1,040,882
Total Contributions & Transfers		431,103	498,914	103,303		7,562	1,040,882	-1,040,882
Programme Support								
Program Support	187,540	32,055	42,373	7,873		4,057	86,358	101,182
Total Programme Support	187,540	32,055	42,373	7,873		4,057	86,358	101,182
Operational Provisions								
Operational Provisions		-25					-25	25
Total Operational Provisions		-25					-25	25
TOTAL EXPENDITURE (D)	2,885,230	493,157	645,599	120,189		62,416	1,321,361	1,563,870
VARIANCE (C - D)		663,890	509,040	304,360	68,248	18,332	1,563,870	