

FINAL REPORT



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

INDIA: FLOODS

20 November
2002

This Final Report is intended for reporting on emergency appeals

The Federation's mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world's largest humanitarian organisation and its millions of volunteers are active in 178 countries. For more information: www.ifrc.org

Appeal No. 19/2000; Launched on: 11 August 2000 for three months for CHF 6 million to assist 200,000 beneficiaries. There were two budget revisions with the final total being CHF 3,480,157. The appeal was extended until April 2001

IN BRIEF

Appeal coverage: Covered

Related Appeals : South Asia regional programmes (01.24/2002)

In Summary: Donors responded well to the operation and significant relief was provided to those communities in need in a timely manner. The north and north east of India regularly suffers from disaster and the Indian Red Cross and Federation have been engaged in longer term preparedness capacity building.

The context

Over 30 million people were affected by floods in north and north eastern India between July and September 2000. The floods began in late July in the Northeast Indian state of Assam and worsened dramatically at the beginning of August when flash floods resulting from heavy rains in the Himalayas swept south, causing breaches in embankments along many parts of the Brahmaputra river and its tributaries, and inundating surrounding areas. The combined death toll due to floods, landslides and torrential rains in India, Bangladesh and Bhutan exceeded 1,500.

The situation became critical in the state of West Bengal in September 2000, when heavy monsoon rains caused a second wave of floods that swept across a vast and densely populated area. Local authorities report that over 17 million people were forced to flee their homes. The floods claimed 1,266 lives, and around 74,000 head of cattle perished. The northern state of Bihar was severely affected by another disastrous wave of floods in September. Three consecutive flood waves swept through a total of 31 districts and claimed 163 lives.

In addition to Assam and the states of West Bengal and Bihar, the states of Arunachal Pradesh, Andhra Pradesh, Uttar Pradesh, Himachal Pradesh and Maharashtra also experienced extensive flooding caused by seasonal monsoon rains and flash flooding. Thousands of people affected by last year's floods continued to live in a precarious situation. Many were living in makeshift shelters and experienced considerable difficulty in restoring their livelihoods. Their situation is still precarious, particularly in Assam where floods occur on an annual basis.

During the months of May and June 2001 pre-monsoon rains began lashing the region and some rivers were in full spate. The Assam state branch of the Indian Red Cross geared up to face the floods, with fresh stocks of relief goods being procured with money remaining from last year's relief operation.

As it appeared, the much feared monsoon season did not cause any major damages this year in Assam.

At the same time however, a new Federation appeal was launched on 25 July (Appeal no. 21.01) in response to new and continuing floods in the states of Bihar and Orissa, causing damage and disrupting the lives of millions of people.

As a result of a review of the past IFRC/IRCS health activities and the continuing needs in Assam, the MMUs (*Mobile Medical Units*) and health training part of the operation was extended to the end of December 2001.

Objectives, Achievements and Constraints

Objective 1 To provide relief to the population affected by flooding in north and north-eastern India in the form of health care, water purification tablets, tarpaulins, mosquito nets, kitchen sets and a limited amount of basic food commodities such as rice, oil and dal (lentils), in accordance with priorities.

Achievements: A total of 13 *New Health Emergency Kits (NHEKs)* were purchased by the Supplies and Logistics Service of the Federation's Secretariat in Geneva and flown from Europe to Calcutta. From the 13 kits, nine were dispatched to Assam while 4 remained in West Bengal.

In addition, some 24 *medical camps* were set up by the Red Cross district branches in West Bengal to provide relief health care and distribute medicines to flood victims in Murshidabad Birbhum, North 24 Parganas and Nadia. In the state of Bihar, a list of medicines requested by the State Branch was submitted to the Federation and procurement was done locally by the Branch with funds raised from the India Floods Appeal.

An initial total of seven and later five MMUs established in Assam operated in the remote communities during the period following the floods and until May 2001. The MMUs were active in the following district severely affected by the year 2000 floods: Kamrup, Mangaldoi, Dhubri, Dhemaji, Morigaon, Nalbari and Kokrajhar. The Mangaldoi and Kokrajhar districts were during latter months replaced by the new pilot area Darrang. The reason for this replacement was to co-ordinate the support evenly, including the one from DFID.

Each team saw approximately 200 patients per day and provided them with basic care and medicines, which most of the patients would be unable to afford. An estimated 150,000 out-patients were treated by these medical teams between November 2000 and April 2001. Each team consisted of one or two doctors, two nurses, one pharmacist and volunteers.

The project reached a large population in remote rural areas of an impoverished region and helped to strengthen the image of the Assam Red Cross throughout the state. However at the end of May 2001, the MMUs were discontinued and in early August 2001, an experienced Federation Health Delegate

went to Assam to review past IFRC/IRCS health activities. She also looked at the possibilities for a longer term community based health programme. The review entailed visiting sites in two districts and holding a workshop in September to discuss with some MMU team members their past work experience. Two of the conclusions was that Mobile 'health camps' were a 'normal' way of providing ad hoc health services in the absence of routine health facilities and that there was a need for marketing the MMUs being provided by the IRCS as many beneficiaries were not aware of their existence.

As a result of the evaluation and in view of the continuing needs in Assam, it was decided to extend this Appeal. The Federation and IRCS decided to further support two MMUs from October until end of December 2001.

During a follow up visit to the area during late 2001, the Federation Regional Disaster Response Delegate noted that the rescue boat donated by the Spanish RC to facilitate a medical unit could be better utilised. The Assam State Branch has provided a proposal regarding equipment and maintenance of the boat which is under discussion (not within this appeal).

Health and relief training for staff and volunteers in the area continued apace, during the spring while rains had rivers flowing in full spate. Training provided to 300 volunteers of the Assam state branch in first aid, public health issues and disaster preparedness continued.

Early in 2001, the Federation health delegate for the operation completed an evaluation of "*the use of a sachet for the preparation of safe therapeutic milk, ORS and other drinks from contaminated water*". The sachets utilise a cellulose membrane which permits water to hydrate the sachet contents, while removing bacterial contamination. The aim of the field trial in Assam was to determine the efficiency of use of these sachets in the field and to test the general acceptability of the product among the local population. The evaluation was carried out by the Red Cross medical teams in the two flood-affected districts of Kamrup and Darrang.

Most flood related needs were fulfilled in the operation and the focus during the latter half of the operation was shifted to community based health activities using MMUs to attract community participation.

After this operation, the Assam State Branch had the curriculum and trainers and were in a position to continue training activities autonomously. In addition they had pre-positioned stocks in place which made the area less vulnerable during the next flood season. In view of further providing development support to Assam and other state branches in north eastern India, the IRCS HQ has officially posted one staff member in Assam.

Constraints: In the state of West Bengal, it was extremely difficult for the Federation to ensure the swift transfer of the funds from the IRCS National Headquarters to West Bengal State Branch and then further to the districts involved in the operation. As a result, four local branches were provided with one New Emergency Health Kit (NEHK) each but no financial support was made available to deploy any medical teams for prescribing and distributing these medicines. This caused considerable stress to already over-stretched branches and delayed what was planned to be a short-term health intervention during the immediate aftermath of the floods. The reassignment of the India floods health delegate in charge of West Bengal to Gujarat following the 26 January earthquake also undermined the implementation of health-related activities in the state.

The local Government was very positive towards the MMUs and would like to extend it to cover periods outside the flood season also. Due to limited security during night time, it was difficult to find

health workers to live and stay over night in the area. At the same time, the programme was not further fundable under the disaster response programme. However it could be part of a more comprehensive community outreach programme in the future, following the development activities carried out by the IRCS.

Water and Sanitation •

Achievements: Although funds were available for the purchase of chlorinating tablets and printing of instruction leaflets, these planned activities were excluded from the assistance programme when the Plan of Action was revised in November 2000. Large quantities of emergency relief goods, particularly water and sanitation-related items, were provided either by the IRCS or by other aid agencies operating in India during the emergency phase. Therefore a decision was taken to exclude the purchase and distribution of chlorine tablets from the initial Plan of Action. Lastly, beneficiary families were given one bucket each in stead of two as outlined in the Emergency Appeal, taking into consideration a request voiced by the state branches to reduce the quantity in order to speed up procurement and facilitate distributions.

Food and non-food supplies •

Achievements: A large quantity of food and basic relief supplies, totalling 660 MT of rice, 33,000 tarpaulins and kitchen sets (including one bucket), 66,000 mosquito nets, garments and 99,000 blankets were purchased in India and distributed to some 33,000 families in 35 flood-affected districts in Assam, Bihar and West Bengal. Distributions were carried out between October 2000 and April 2001 and each selected family received one tarpaulin, two mosquito nets, one kitchen set, one bucket, three blankets, two pieces of garments and a basic food ration. The needs of the beneficiaries and the impact of the relief goods provided was evident during several assessments at distributions and during monitoring. Field assessments confirmed that there was no shortage of food in flood-affected areas, and therefore the emergency food ration distributed to flood victims was limited to 20 kg of rice per family only. However, when the operation’s Plan of Action was revised in November 2000, provisions were made for the addition of 3 blankets and 2 pieces of garments to the family relief package. Beneficiaries continuously expressed their gratitude for the assistance provided. During the field trips undertaken by Red Cross teams, delegates and National Society officers observed that the items funded by the Federation were being used.

In preparedness of possible floods during 2001, the Federation and IRCS procured and pre-positioned relief stocks for 10,000 families (50,000 persons). The state branch was provided with 20,000 blankets, 10,000 kitchen utensil sets, 20,000 mosquito nets and 10,000 tarpaulin sheets in Assam. Besides these a total of 118,392 rations of high energy biscuits were transported from IRCS warehouses in Chennai and Mumbai. Following the seasonal flooding period during 2002, the impact of these preparedness measures are being carefully assessed and lessons learned applied to future programmes.

Objective	Output	Outcome
To provide relief to populations affected by flooding in north and north-eastern India in the form of health care, water purification tablets, tarpaulins, mosquito nets, kitchen sets, garments, blankets and a limited amount of basic food	<ul style="list-style-type: none"> • mobile clinics and medical camps set up in Assam and West Bengal; • medical supplies distributed; • mosquito nets, tarpaulins, kitchen sets, garments, blankets and basic food ration distributed. 	<ul style="list-style-type: none"> • a total of 33,000 families were assisted with the provision of food and basic relief goods including 660 MT of rice; 33,000 tarpaulins and kitchen sets; 99,000 blankets and 66,000 pieces of garments and mosquito nets; • 13 New Health Emergency Kits were distributed by 6 mobile clinics and 24 medical camps in

<p>commodities in accordance with priorities.</p>		<p>10 flood-affected districts of Assam and West Bengal;</p> <ul style="list-style-type: none"> • an estimated number of over 100,000 outpatients were treated by Red Cross medical teams from November 2000 to April 2001. • Pre-positioned basic relief stocks were put in place to reduce vulnerability during coming flood seasons.
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Number of beneficiaries per state:

State	Assam	Bihar	West Bengal
No. of beneficiary families	14'000	10'000	9'000

Breakdown of beneficiaries by states and districts:

State	District	Number of families
Assam	Nalbari	700
	Rangia	1'500
	Morigaon	500
	Dhubri	700
	Bijni	500
	Mangaldai	500
	Goalpara	1'000
	Dhemaji	1'500
	Jonai	500
	Karimganj	1'000
	Sonitpur	300
	Lakhimpur	500
	Kokrajhar	1'000
	Majuli	1'000
	Nowgaon	500
	Barpeta	500
	Dhakuakhana	500
	Udalguri	300
	Dhansiri	500
	Bajali	250
Boko	250	
Bihar	Purina	1'000
	Khagaria	1'000
	Munger	2'000
	Begusarai	1'000
	Samastipur	1'000
	Darbhanga	1'000
	Sahibganj	1'000
	Muzaffarpur	1'000
	Sitamarhi	1'000

West Bengal	Birbhum	2'000
	Murshidabad	2'000
	Nadia	2'000
	North 24 Parganas	1'500
	Hoogly	1'500
Total		33'000

As an integral part of the broader Disaster Preparedness and Response programme for India for 2001 to 2004, a separately funded disaster preparedness and Response programme for Assam is currently building upon the measures already initiated under this operation. In particular the new programme will utilise the volunteers already trained. The programme has its emphasis on disaster response preparedness, community based disaster preparedness and mitigation as well as lessons learning.

Constraints: All Federation/IRCS procurement procedures for the local purchase of food and relief goods were followed, ensuring that funds were utilised in the most economical and efficient manner. Regrettably, these procedures were too lengthy, causing long delays to distributions and hampering efforts to meet the acute needs of beneficiaries in the emergency phase.

While a first round of relief distributions was carried out in West Bengal in October and November 2000, followed by Assam starting in December, no distributions were carried out in Bihar before March 2001, almost seven months after the state was ravaged by successive waves of severe floods. Unlike the two other state branches assisted in the operation, the Bihar Branch took the decision to carry out only one round of distributions, which could not start until the last consignment of relief supplies reached each district branch.

Added to the delays in procurement, further delays by some of the New Delhi suppliers to delivery the goods to the states made it virtually impossible for the local Red Cross branches to conduct distributions in a timely manner. Therefore, relief distributions were only completed in the three states at the end of March/beginning of April 2001. In Assam, following up on a request of the State Relief and Disaster Committee, the Assam Branch decided to distribute only two blankets to each one of the state's 14,000 beneficiary families. The remaining blankets funded by the Federation *were* distributed among the victims of ethnic violence in the district of Kokrajhar and kept as disaster preparedness buffer stock.

Another constraint was that the existing warehouse was affected by land slides. An assessment has recently been made by the Regional Disaster Response Delegate and the Logistics Delegate at the India Operation Centre. A relocation of the warehouse is under discussion. Buffer stocks are now temporarily stored in an orphanage.

Objective two: To build the capacities of the National Society, particularly at state level.

Achievements: *Community Based First Aid (CBFA)* training was provided to Red Cross volunteers in Assam with 300 community health workers, including 60 traditional birth attendants, trained in first aid, public health issues and disaster preparedness. The Federation Community First Aid training manual was translated into Assamese and distributed to the trained volunteers. On completion of the training the volunteers were given basic First Aid Kits.

The participants came from over 20 different disaster-prone districts of Assam. The training programme was designed as a mix of lectures, practical demonstrations, simulation exercises, field

visits, group work and discussions, all of which proved to be very popular amongst the highly motivated students.

As a direct result of the IRCS/Federation training programme, some of the local branches which sent participants to the training course in Guwahati initiated their own First Aid courses for young Red Cross volunteers in schools and communities, utilising the guidelines provided by the Federation health delegate and deploying their already trained volunteers as instructors. In addition, the ICRC conducted a “first-aid master training course”, targeting Red Cross volunteers from districts in Assam.

The CBFA courses were continued until end of December 2001 in the two pilot districts of the DP programme, according to a Assam State Branch proposal. The plan also allowed for replenishment of the Red Cross Dispensary and primary health centre (PHC) medical stocks (medicines and consumables) as identified by the Assam State Branch.

In addition, Federation delegates worked closely with IRCS counterparts at national, state and district levels, supporting the National Society to carry out its relief activities and helping to build the Society’s capacity. Training sessions were held for National Society staff, particularly in Assam.

Lastly, 3 four-wheel vehicles, 2 boats (one was utilised as floating clinic during the operation and the other is a small fibre glass boat for rescue and relief purpose), office, communications and training equipment were purchased for the state branches, improving their basic infrastructure and enhancing the IRCS disaster response capacity at state level.

Objective	Outputs	Outcome
To build the capacities of the National Society, particularly at state level.	<ul style="list-style-type: none"> • training sessions held for Red Cross volunteers, community health workers and traditional birth attendants; • Federation delegates worked closely with IRCS counterparts at national, state and district levels; • training session held for National Society staff in Assam; • vehicles, boats, office and training equipment were purchased for the National Society. 	<ul style="list-style-type: none"> • 300 volunteers, community health workers and traditional birth attendants were trained; • a large number of senior and junior National Society staff and volunteers were directly involved in the planning and implementation of the assistance programme; • three vehicles, 2 boats, a wide range of equipment including one fax machine, four mobile phones, three computers and printers, four mobile phones training materials and photocopy machine were purchased by the Federation and donated to IRCS.

Federation Delegation: All the members of the India floods team have ended their missions. A health delegate, a relief delegate and the logistics delegate attached to the India floods team were assigned to the Gujarat earthquake operation in the immediate aftermath of the earthquake.

Constraints: The capacity of Assam State Red Cross Branch needs to be improved in order to make sustainable intervention. Lack of funds for further training and to provide means to mobilise the trained volunteers in Red Cross activities may undermine the sustainability of programmes in the future.

Contributions

See Annex 1 for details.

Conclusion

The distribution of food and basic relief goods and provision of health care met some of the most acute needs of beneficiaries. However, in such a disaster-prone areas like north and north-eastern India, the humanitarian impact of successive floods is enormous and coping mechanism are over-stretched. The threat of new floods this year causes fear and concern among the local population, still extremely vulnerable and bearing the brunt of a long and arduous recovery process.

The unique geo-climatic conditions of the Indian sub continent place this country among the most vulnerable to disasters in the world. At the same time it is widely acknowledged in India that foreign assistance is usually forthcoming only after a major disaster. Historically it has been difficult to focus international efforts on appropriate disaster preparedness and response measures which require investments prior to a visible emergency taking place. This could help to mitigate the impact of annual floods and other disasters, provide long-term benefit in the most disaster-prone states and enhance the capacity of the IRCS. There was an overwhelming consensus amongst Red Cross officials at all levels that measures must be taken immediately, taking advantage of the momentum created by year 2000 floods and more recently by the Gujarat earthquake, to put more emphasis on disaster preparedness and capacity building rather than on costly reactive responses. The training programme implemented by the IRCS/Federation in Assam addressed real needs of the National Society, helping to develop the capacity of the state branch, mobilising volunteers and giving positive visibility to the Red Cross. This cost-effective project could now be continued and expanded to other disaster-prone states in India, with the support of the IRCS National Headquarters and active involvement of the Federation's regional health, disaster preparedness and institutional development delegates.

The problems faced in the India floods operation confirmed the need to improve the disaster response capacity of IRCS at all levels. Adequate measures have started to take place to increase the national Society's efficiency and ability to respond to natural disasters within the following areas: improving co-ordination and political development mechanisms between the IRCS National Headquarters and state branches; formulating rules of operation, authorities and decision making process at different levels of the National Society for emergency situations, training managers and volunteers in disaster management issues and developing the infrastructure at state and district branch levels.

As already mentioned, a DFID funded disaster preparedness and response programme is currently building upon the measures already initiated under this appeal programme and in particular will utilise volunteers already trained. The programme has its emphasis on disaster response and preparedness, community based disaster preparedness and mitigation as well as lessons learning.

At IRCS HQ level progress has been made in financial development including financial reporting. One immediate result is that 90 per cent of previous working advances have been cleared during 2001. Other parts of disaster management are also being addressed within the areas of ID, DR, DP and health in an integrated manner.

The relief operation received wide publicity in the Assam media. Press conferences held in the state capital were attended by a large number of journalists from both local and national media. This provided Federation delegates and the local IRCS officers an opportunity to provide both an overview of the floods relief operation and address several issues related mostly to earthquake preparedness.

The IRCS Assam State branch has taken the opportunity, after the recent earthquake in Gujarat, to promote a wider debate about the vulnerability of Assam to disasters such as earthquakes, floods and droughts, making a general call for more disaster preparedness and mitigation in north-eastern India. A government-run oil refinery, and some schools approached the Assam state branch and the Federation delegates to hold disaster preparedness training programmes for their staff and schoolchildren.

The health programme in Assam has helped to raise the knowledge of the volunteers of the Assam State Branch. The profile of the Red Cross has improved to be an active organisation providing crucial and highly visible health assistance in some remote areas neglected by other humanitarian organisations and by an over-stretched public health system. At the same time a base has been laid for further organisational development.

The Assam government has proposed that all civil servants in the state undergo a first aid training course to be provided by the Red Cross. The modalities of running such a course are being addressed.

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All International Federation Operations seek to adhere to the Code of Conduct and are committed to the Humanitarian Charter and Minimum Standards in Disaster Response (SPHERE Project) in delivering assistance to the most vulnerable. The procurement for this operation was carried out in full compliance and conformity with the Federation's standard for international and local procurement.

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

This operation sought to administer to the immediate requirements of the victims of this disaster. Subsequent operations to promote sustainable development or long-term capacity building will require additional support, and these programmes are outlined on the Federation's website.

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INTERNATIONAL FEDERATION OF RED CROSS AND RED CRESCENT SOCIETIES

Interim report	
Annual report	
Final report	X

Appeal No & title: 19/2000 India floods
 Period: years 2000, 2001, 2002 (up to 08)
 Project(s): PIN504
 Currency: CHF

I - CONSOLIDATED RESPONSE TO APPEAL

FUNDING	CASH		KIND & SERVICES		TOTAL INCOME
	Contributions		Goods/Services	Personnel	
Appeal budget	3,480,157				
less Cash brought forward					
TOTAL ASSISTANCE SOUGHT	3,480,157				
<u>Contributions from Donors</u>					
Australian Red Cross (DNAU)	5,865				5,865
Barbados Red Cross (DNBB)	1,938				1,938
Belgian Red Cross (DNBE)	634				634
British Govt.via British Red Cross (DGNGB)	640,931				640,931
British Red Cross (DNGB)	126,925				126,925
Canadian Govt. Red Cross Aid Trust (DGNCAA)	119,592				119,592
Danish Govt.via Danish Red Cross (DGNDK)	195,698				195,698
Danish Red Cross (DNDK)	54,386				54,386
ECHO - INDIA FLOODS 2000 (DEIND1)	622,768				622,768
Finnish Govt.via Finnish Red Cross (DGNFI)	203,776				203,776
Finnish Red Cross (DNFI)	182,417				182,417
German Govt.via German Red Cross (DGNDE)	229,033				229,033
German Red Cross (DNDE)	28,962				28,962
Hong Kong Red Cross (DNHK)	2,475				2,475
Icelandic Red Cross (DNIS)	4,171				4,171
Japanese Red Cross (DNJP)	165,639				165,639
Liechtenstein Red Cross (DNLI)	27,959				27,959
Monaco Red Cross (DNMC)	5,178				5,178
Netherlands Govt.via Netherlands RC (DGNNL)	273,811				273,811
Netherlands Red Cross (DNNL)	30,000				30,000
Norwegian Govt.via Norwegian Red Cro (DGNNO)	484,415				484,415
Norwegian Red Cross (DNNO)	29,917				29,917
Red Crescent of Islamic Rep. of Iran (DNIR)	27,386				27,386
Republic of Korea Red Cross (DNKR)	16,675				16,675
Spanish Red Cross (DNES)	46,317				46,317
Swedish Govt.via Swedish Red Cross (DGNSE)	136,125				136,125
Swedish Red Cross (DNSE)	25,221				25,221
United States - Private Donors (DPUS)	34				34
Finland				16,427	16,427
Japan				9,856	9,856
TOTAL	3,688,249			26,283	3,714,532

II - Balance of funds

Opening balance	
CASH INCOME Rcv'd	3,688,249
CASH EXPENDITURE	-3,688,248

CASH BALANCE	0

Appeal No & title: 19/2000 India floods

Period: years 2000, 2001, 2002 (up to 08)

Project(s): PIN504

Currency: CHF

III - Budget analysis / Breakdown of expenditures

Description	Appeal Budget	CASH Expenditures	KIND & SERVICES		TOTAL Expenditures	Variance
			Goods/services	Personnel		
<u>SUPPLIES</u>						
Shelter & Construction	264,000	261,446			261,446	2,554
Clothing & Textiles	1,039,500	1,022,049			1,022,049	17,451
Food/Seeds	272,580	249,002			249,002	23,578
Water						
Medical & First Aid	175,845	117,208			117,208	58,637
Teaching materials						
Utensils & Tools	495,000	506,698			506,698	-11,698
Other relief supplies		3,295			3,295	-3,295
Sub-Total	2,246,925	2,159,698			2,159,698	87,227
<u>CAPITAL EXPENSES</u>						
Land & Buildings						
Vehicles	40,000	51,034			51,034	-11,034
Computers & Telecom equip.	47,799	54,010			54,010	-6,211
Medical equipment						
Other capital expenditures	10,000	46,402			46,402	-36,402
Sub-Total	97,799	151,446			151,446	-53,647
<u>TRANSPORT & STORAGE</u>	155,831	232,499			232,499	-76,669
Sub-Total	155,831	232,499			232,499	-76,669
<u>PERSONNEL</u>						
Personnel (delegates)	188,200	277,865		26,283	304,148	-115,948
Personnel (local staff)	185,885	151,044			151,044	34,841
Training						
Sub-Total	374,085	428,908		26,283	455,191	-81,106
<u>GENERAL & ADMINISTRATION</u>						
Assessment/Monitoring/experts						
Travel & related expenses	35,000	73,832			73,832	-38,832
Information expenses	9,000	12,392			12,392	-3,392
Administrative expenses	171,000	216,997			216,997	-45,997
External workshops & Seminars						
Sub-Total	215,000	303,222			303,222	-88,222
<u>PROGRAMME SUPPORT</u>						
Programme management	239,387	252,814			252,814	-13,427
Technical services	71,660	75,693			75,693	-4,033
Professional services	79,470	83,967			83,967	-4,497
Sub-Total	390,517	412,475			412,475	-21,958
Operational provisions						
Transfers to National Societies						
TOTAL BUDGET	3,480,157	3,688,248		26,283	3,714,531	-234,374