

Operations update



International Federation
of Red Cross and Red Crescent Societies

Africa: Polio Outbreak

Emergency appeal n°:
MDR61004 (West & Central Africa);
MDR64005 (East Africa);
MDR63002 (Southern Africa)
Operations update n° 3
5 August 2009

Period covered by this Ops Update: 15 May to 03 August, 2009

Appeal target (current): CHF 2,475,768
(USD 2.2m or EUR 1.7)

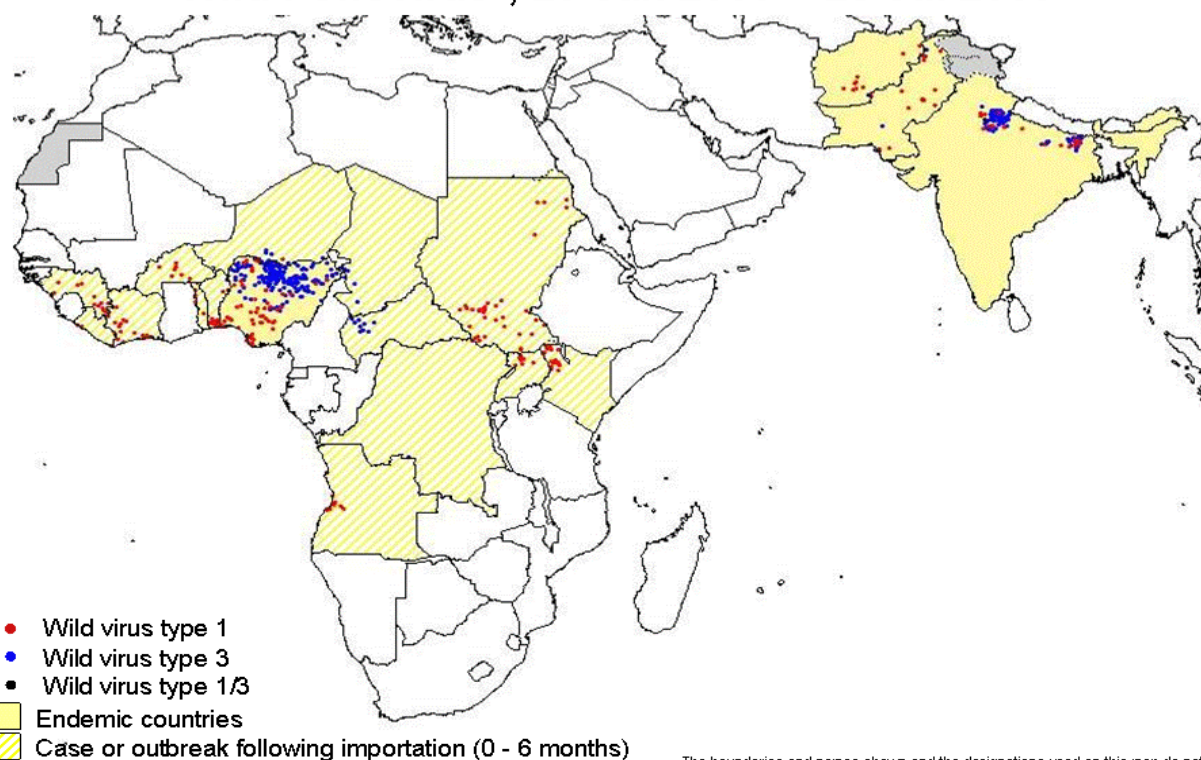
Appeal coverage: 56% [<click here to link to the financial status reports, or here to link to contact details >](#)

Appeal history:

- This Emergency Appeal was initially launched on 7 April 2009 to assist approximately 25 million children under 5 years of age in 14 countries affected by the polio outbreak for four months.
- Operations Update (no. 1) issued 14 May 2009 added emergency campaigns in Guinea, Liberia, and Sierra Leone to the Appeal, and the budget was provisionally revised to just over CHF 2.4m.
- Disaster Relief Emergency Fund (DREF): CHF 357,842 was initially allocated from the Federation's DREF to support emergency response campaigns in March (Benin, Cote d'Ivoire, Ghana, and Mali) and April (Central African Republic and Democratic Republic of the Congo). CHF 235,888 was allocated from the Federation's DREF to support the emergency response campaign in April in Kenya.
- Global Measles & Polio Initiative: CHF 160,000 was initially allocated from the Health and Care Department's Global Measles & Polio Initiative to support activities in four countries during February and March (Cote d'Ivoire, Burkina Faso, Niger, and Togo).
- Operations Update (no. 2) issued 24 June 2009 focussed specifically on the action in Togo carried out from 27-29 March 2009.
- This Operations Update (no. 3) provides details of campaigns occurring since Operations Update No. 1 on 14 May 2009.
- Due to the further spread of wild poliovirus (WPV) in affected countries in Africa, and Ministry of Health (MoH) changes to campaign dates, funds already secured by this Appeal will be used towards remaining campaigns in Côte d'Ivoire, Sudan and Angola. This update therefore seeks a no cost extension to:
 - Extend West and Central Africa Appeal (MDR61004) timeline until 31 August 2009.
 - Extend East Africa Appeal (MDR64005) timeline until 30 November 2009.
 - Extend Southern Africa Appeal (MDR63002) timeline until 31 August 2009.
- The final Appeal report will therefore be available three months after the completion of all Appeal funded activities.



Wild Poliovirus*, 29 Jan 2009 – 28 Jul 2009



*Excludes viruses detected from environmental surveillance and vaccine derived polioviruses

Data in WHO HQ as of 28 Jul 2009

The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.
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Source: Global Polio Eradication Initiative (<http://www.polioeradication.org/content/general/casemap.shtml>). Retrieved 29 July 2009

Summary: As of 29 July 2009, the Global Polio Eradication Initiative (GPEI) reported 730 cases of wild polio virus (WPV) globally; 540 of these cases were in Africa. In response to outbreaks, Ministries of Health with support of the GPEI organized multiple synchronized polio national immunization days (NIDs) in three regional blocks: West Africa (10 countries), Central Africa (4 countries) and the Horn of Africa (4 countries). National Societies to date have participated in vaccination rounds in Angola, Benin, Burkina Faso, Central African Republic (CAR), Côte d'Ivoire, Democratic Republic of the Congo (DRC), Ethiopia, Ghana, Kenya, Mali, Niger, Sierra Leone, Sudan, Togo and Uganda, mobilizing a total (for all rounds) of approximately 25,000 Red Cross Red Crescent volunteers to ensure that a minimum of 95% of children aged 0 – 59 months (5 years) are reached with oral polio vaccination (OPV). This response has been made possible by generous pledges to the Appeal from the American, British, Canadian, Icelandic, Irish, Japanese, Norwegian and Swedish Red Cross Societies, and private donors.

During the rounds covered by this Operations Update, approximately 12,640 volunteers and supervisors participated in mass polio vaccination campaigns.

These fifteen affected National Societies (NSs), working through their Ministries of Health (MoH) and in coordination with polio eradication partners, supported the second, third and fourth rounds of their national polio immunization activities. In West Africa, campaigns took place as part of a multi-country synchronized regional campaign involving eight countries in the sub region: Benin, Burkina Faso, Côte d'Ivoire, Ghana, Mali, Niger, Nigeria¹, and Togo; Guinea, Liberia and Sierra Leone were later added to respond to the persistent spread of WPV.

Details of the activities undertaken by each NS will be provided in the section 'Country Campaign Updates'.

¹ Nigeria is not part of the Emergency Appeal due to its endemic status. Polio immunization social mobilization activities in Nigeria have, however, been partially supported with funds provided through the Health & Care Department's Global Measles & Polio Initiative.

The situation



Red Cross Society of Côte d'Ivoire volunteers support the polio vaccination campaign

The ongoing circulation of wild polio virus (WPV) in Nigeria, and particularly the surge of cases last year (in 2008 there were 798 WPV cases in Nigeria) presents a serious re-infection threat to surrounding countries. As of 29 July, seventeen African countries had reported 191 cases of polio due to importations in 2009 (excluding Nigeria). Most of these importations are linked to the ongoing circulation in Nigeria, the only endemic country in Africa, which has reported 349 cases in 2009 (as of 29 July 2009). Polio exportations of a viral origin from Nigeria have been detected in countries to the west, north and east of the country. In addition to these exportations, a reservoir of circulating WPV thought to originate from Sudan had been traced to outbreaks in Uganda and Kenya, resulting in a total of eight (8) and seventeen (17) cases in 2009, respectively (as of 29 July 2009). In addition, of interest to international

communities is the detection of polio in the Port of Sudan - a significant development as it presents the opportunity for WPV to spread to other continents.

The recent expansion of wild poliovirus outbreaks in West and Central Africa, and the Horn of Africa, poses a high risk of further international spread and threatens progress towards global polio eradication unless stopped immediately. In order to assist in the international response, on 7 April 2009 the Federation launched a tri-zonal Africa Emergency Appeal to support National Societies as partners in emergency response campaigns in fourteen countries across Africa.² The Appeal aimed to assist approximately 25 million children under 5 years of age through *synchronized supplementary immunization activities* (SIAs) from 20 March to 31 July 2009. Fourteen countries were originally covered in the Appeal, namely in Central Africa (Angola, Central African Republic, and Democratic Republic of Congo), West Africa (Benin, Burkina Faso, Cote d'Ivoire, Ghana, Mali, Niger, and Togo) and the Horn of Africa (Ethiopia, Kenya, Uganda, Sudan - north and south). However, taking into account the traced spread of polio westward in Côte d'Ivoire, three additional countries (Guinea, Liberia, Sierra Leone) were added to the end-May West Africa synchronized round. The Appeal was revised to include these three countries in the first Operations Update on 14 May 2009. This Operations Update aims to provide details of activities occurring between 15 May 2009 and 31 July 2009 in all actively participating countries.

Coordination and partnerships

The seventeen National Societies within the Appeal, and the Federation (Africa Zones and Geneva) are coordinating with Ministries of Health, WHO and other Global Polio Eradication Initiative (GPEI) partners (particularly UNICEF and Rotary International) to ensure that our response is harmonized and aligned with national and international response plans. All National Society plans are developed within the inter-agency coordinating committee (ICC), the body responsible for national vaccination efforts, and thus delineate a clear role and geographical area of responsibility for each National Society. National Society social mobilization activities are being undertaken in coordination with other civil society partners working at the community level, such as Rotary International, World Vision, and CORE.

The Geneva Health and Care Department is facilitating planning across the three Federation Africa Zones to ensure a coordinated continental approach. Technical support is provided by the Health Coordinators within each Zone and Geneva, and is based upon frequent updates and WPV surveillance data made available by WHO. Where limited financial resources are available, prioritization for NS support was determined in consultation with the polio eradication team at WHO Headquarters.

² Chad, an outbreak country, is not included in this Appeal.

The purpose of the Federation's and National Society involvement in this operation is to complement outbreak response activities and fill gaps in national plans. Working within our existing structures, and using our experience in rapid mobilization of large numbers of volunteers, National Societies are scaling-up and intensifying the work that is routinely undertaken in the area of immunization. Of particular importance is the role that National Societies were asked to play in outbreak countries which have not seen polio cases in a number of years, and thus do not have recent experience organizing mass vaccination campaigns. Extra social mobilization and communications support, readily available with the mobilization of thousands of National Society volunteers, has helped to heighten campaign awareness, increase acceptance of vaccination, and maximize campaign results.

While acknowledging the emergency nature of this intervention, the Federation is working to balance urgent outbreak response activities with our longer-term work in polio eradication. Developmental health activities including the promotion of routine immunization and more scheduled participation in supplementary immunization activities will not be compromised by our involvement in this operation. Instead, by responding to WHO requests for our intensified contribution during these outbreak response measures, the Federation is reinforcing its contribution to the GPEI goal of achieving eradication.

National Society Capacity Building:

As a primary social mobilization partner in their national outbreak response activities, National Societies are building their capacity in the areas of new and reinforced partnerships, development of volunteer knowledge and skills, strengthened volunteer management systems, and heightening visibility as a key partner in polio eradication.

New partnerships at the country level, such as that with Rotary PolioPlus Committees, are helping to build longer-term alliances for polio eradication. Additionally, increased recognition by WHO and UNICEF country offices of the capacity of National Societies to mobilize large numbers of volunteers to reach the most vulnerable and hard-to-reach areas is resulting in expanded requests for National Society support.

As auxiliary to government, National Societies' role in the polio response has been recognized and appreciated by Ministries of Health. Where they had not previously been members, National Societies are receiving invitations to join the inter-agency coordinating committees (ICCs) – a key body for all national immunization planning. This will support longer term work in National Society health promotion activities, particularly in the area of immunization and child survival.

Red Cross and Red Crescent action

Summary

In order to appropriately respond to Ministry of Health requests to their National Societies for intensified and scaled-up support for national polio outbreak response campaigns, and a call from the GPEI partners for increased involvement in polio eradication in the context of recent outbreaks, the Federation launched this Africa Polio Outbreak Emergency Appeal.

WHO and partner agencies' overall objectives for these supplementary vaccination activities are to reach some 80 million children in the 18 countries to:

- Prevent the further spread of WPV through high quality vaccination rounds that reach all eligible children (under 5 years) with oral polio vaccine.
- Maximize vaccination coverage of emergency campaigns so as to prevent polio infection and possible polio paralysis.
- Increase immunity against polio across the targeted 18 affected countries.



A Red Cross volunteer announces campaign information in the local market

Ministries of Health in the affected countries will procure the vaccine and organize the emergency campaigns, however, achieving optimal coverage will require reaching the most remote and hard-to-reach communities. This

is the vital role that respective National Societies will play in delivering vaccination messages to communities and linking vaccination teams with beneficiaries. The Federation's strategy is to supplement these actions by leveraging the Movement's expertise in social mobilization, experience in mass immunization campaigns (as long time partners of the GPEI and Measles Initiative, as well as Child Health Days, etc.), and proven capability to increase quality of planning and preparedness efforts. The Movement's potential access to difficult or inaccessible areas may also be of assistance in particular countries (for example, DRC, Sudan, etc.). Funds generated by the Appeal have enabled National Societies to mobilize approximately 25,000 volunteers to help reach more than 2.5 million people with vaccination messages. More than 1.5 million households received a visit by a Red Cross Red Crescent volunteer to promote vaccination against polio.

A challenge has been the timely receipt of un-earmarked funds to ensure that all 17 National Societies in the Appeal can be active members of their national response. Additionally, select country campaigns were not held during the dates originally planned by the Ministry of Health due to unforeseen national events, including a health workers strike in Benin which forced postponement of the end-May round.

Progress towards objectives

Emergency health and care

Overall objective: To assist in ending the spread of wild polio virus (WPV) by supporting national polio vaccination campaigns in designated areas of the affected countries through social mobilization and door-to-door campaign sensitization by National Societies and their Red Cross and Red Crescent volunteers.

Specific objectives:

- 1. Conduct social mobilization and communications activities via Red Cross and Red Crescent volunteers in the 17 countries affected by the polio outbreak.**
- 2. Conduct effective capacity building within the implicated Red Cross Red and Crescent National Societies.**
- 3. Reinforce relationship building between National Societies and their Ministries of Health, and other polio eradication partners.**

Expected results	Activities planned
<ul style="list-style-type: none"> • Maximize coverage of the emergency response supplementary immunization activities (SIAs) of oral polio vaccine (OPV) in targeted populations. • Cessation of the wild polio virus (WPV) outbreaks in reinfected countries. • Completion of social mobilization and health education activities by Red Cross Red Crescent volunteers to raise awareness and acceptance of polio vaccination during campaigns, and for future routine immunization. • Reduction of non-compliant households. • Reinforcement of Red Cross Red Crescent National Societies as a key partner in polio eradication and new partnerships developed. • Raised public awareness of the role of Red Cross and Red Crescent Movement in health activities. 	<ul style="list-style-type: none"> • Coordination with Ministries of Health and campaign partners (within inter-agency coordinating committees and social mobilization subcommittees) to determine geographic and social mobilization role of Red Cross Red Crescent National Society. • Training of supervisors and volunteer leaders/coaches on key messages for the specific campaign, management of volunteers pre-, during- and post-campaign, assignment of volunteer activities as outlined in microplans, etc. • Training of volunteers on key messages for polio prevention (including promotion of routine immunization), specifics of vaccination campaign, and possible symptoms of polio infection. • Mobilization of volunteers in assigned districts of affected countries. • Mobilization of other Red Cross Red Crescent National Society resources as requested by coordinating partners (including physical resources, such as vehicles, human resources, supervision services, etc.) • Mobilization of vaccinators, where requested by the Ministry of Health and properly trained and supervised. • Dissemination of key messages at household and community level before and during campaign. • Promotion of vaccination acceptance to reduce non-compliant households by dispelling vaccine-related myths, and reducing social and cultural resistance. • Promotion of other health and hygiene education, early case detection and referral to health facilities. • Mobilization of volunteers for active surveillance as requested by coordinating partners. • Mobilization of volunteers for any relevant post-campaign activities, including necessary mop-up rounds or evaluations.

Country campaign updates

WHO regional blocks	Activities completed and forthcoming campaign plans																																				
<p>West Africa</p> <ul style="list-style-type: none"> • Benin • Burkina Faso • Côte d'Ivoire • Ghana • Guinea • Liberia • Mali • Niger • Sierra Leone • Togo 	<p>In West Africa, a total of four synchronized rounds involving 10 countries (plus Nigeria, not included in this Appeal) were planned to respond to the polio outbreak. These mass campaigns took place at the end of February, end-March, end-May/June. Future campaigns are planned to further try and end transmission in the region. Synchronized SIA campaigns are planned for Côte d'Ivoire, Guinea, Liberia, Sierra Leone and parts of Niger plan campaigns beginning on 7 August 2009. Ghana plans a further round in November 2009.</p> <p>During each of the three West Africa synchronized rounds, more than 74 million children were targeted for vaccination against polio, with more than 95,000 vaccinators mobilized between the countries.</p> <p>Red Cross National Societies in Burkina Faso, Côte d'Ivoire, Ghana, Mali and Sierra Leone were active in the 29 May – 1 June synchronized round. The Red Cross Society of Benin participated in a campaign from 26 – 28 June 2009, while the Red Cross Society of Niger participated in a campaign from 24 – 27 May 2009. Approximately 2,740 volunteers were mobilized across these National Societies. Highlights of the activities undertaken include:</p> <p>Benin</p> <p>From the 26 – 28 June 2009 the Red Cross of Benin (CRB) participated in the third polio vaccination round in the 7 districts of: Bassila, Ouidah, Bembèrèkè, Lokossa, Pobè, Zagnanado and Ouèssè. CRB mobilized 221 volunteers who helped to vaccinate 234,197 children aged 0 – 59 months. Please see the table below for a breakdown of vaccination coverage per district. There are currently no further campaigns planned for Benin in 2009.</p> <table border="1" data-bbox="312 1041 1520 1458"> <thead> <tr> <th>District</th> <th>Target population</th> <th>Children vaccinated</th> <th>Vaccination coverage</th> </tr> </thead> <tbody> <tr> <td>Bassila</td> <td>28,334</td> <td>27,200</td> <td>96.00</td> </tr> <tr> <td>Ouidah</td> <td>28,854</td> <td>27,988</td> <td>97.00</td> </tr> <tr> <td>Bembèrèkè</td> <td>48,846</td> <td>50,311</td> <td>103.00</td> </tr> <tr> <td>Lokossa</td> <td>26,282</td> <td>24,968</td> <td>95.00</td> </tr> <tr> <td>Pobè</td> <td>24,641</td> <td>24,148</td> <td>98.00</td> </tr> <tr> <td>Zagnanado</td> <td>19,931</td> <td>21,326</td> <td>107.00</td> </tr> <tr> <td>Ouèssè</td> <td>28,975</td> <td>29,554</td> <td>102.00</td> </tr> <tr> <td>Total</td> <td>205,863</td> <td>205,495</td> <td></td> </tr> </tbody> </table> <p>Burkina Faso</p> <p>The Burkinabe Red Cross Society (BRCS) participated in the third polio vaccination round from 29 May – 01 June 2009. BRCS mobilized 500 volunteers and 50 supervisors in seven of the thirteen health regions, focusing on 24 districts. Collectively, these districts had a target population (children aged 0 – 59 months) of approximately 1,358,353.</p> <p>BRCS partnered with the MoH, WHO, UNICEF, Japan International Cooperation Agency (JICA) and Plan Burkina Faso to coordinate a successful campaign. The table on the following page shows the vaccination coverage across all health districts in which the BRCS was active, for all three 2009 polio vaccination rounds.</p> <p>Social mobilization activities conducted by BRCS during the third round reached 739,838 caretakers with vaccination messages through 67,258 household visits. Community focus group discussions sensitized 122,145 people to the campaign.</p>	District	Target population	Children vaccinated	Vaccination coverage	Bassila	28,334	27,200	96.00	Ouidah	28,854	27,988	97.00	Bembèrèkè	48,846	50,311	103.00	Lokossa	26,282	24,968	95.00	Pobè	24,641	24,148	98.00	Zagnanado	19,931	21,326	107.00	Ouèssè	28,975	29,554	102.00	Total	205,863	205,495	
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Province	District	Vaccination coverage – first round (%)	Vaccination coverage – second round (%)	Vaccination coverage – third round (%)
Comoé	Banfora	101.52	103.80	100.00
Léraba	Sindou	100.63	103.79	96.30
Boulkiemdé	Koudougou	103.29	108.27	
Sissili	Léo	107.42	112.49	105.98
Oubritenga	Ziniaré	100.58	103.51	101.85
Sanmatenga	Kaya			109.1
Houet	Dafra	102.32	106.87	
	Dô	107.77	112.94	
	Lena	114.05	116.91	
	Karangasso V	125.51	131.35	
Tuy	Houndé	108.03	110.84	108.32
Kenedougou	Orodara	108.24	108.51	100.46
Ballés	Boromo	100.74	103.67	100.11
Mouhoun	Dédougou	105.82	108.51	
Kossi	Nouna	107.54	111.88	105.16
Banwa	Solenzo	104.86	106.08	101.30
Nayala	Toma	103.94	104.60	102.00
Sourou	Tougan	103.56	106.81	102.70
Zandoma	Gourcy	104.18	106.51	102.14
Yatenga	Ouahigouya	99.51	102.45	
	Séguenega	103.55	104.92	
Loroum	Titao	101.79	105.41	104.88
Passoré	Yako	103.52	103.69	103.94
Ioba	Dano	103.20	105.37	100.39
Bougouriba	Diébougou	100.91	103.71	103.42
Poni	Gaoua	101.45	104.39	

Source : *Rapports d'activités des Comités Provinciaux*

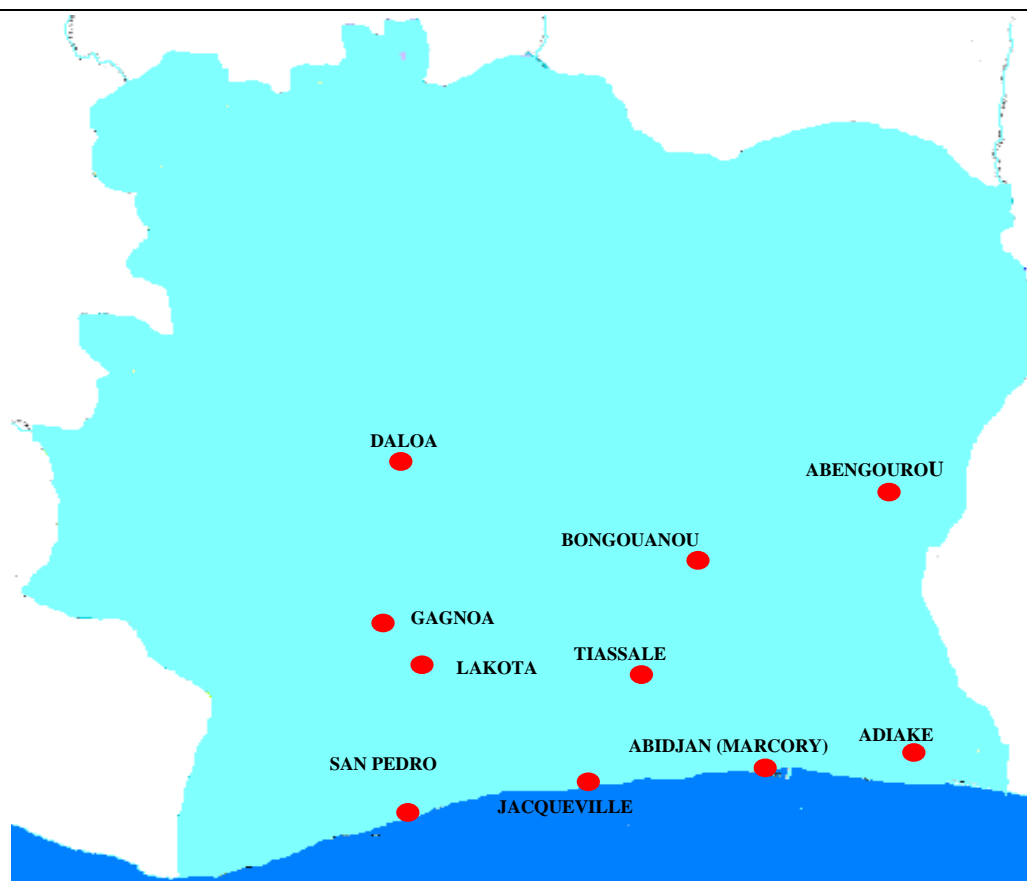
There was an additional polio round scheduled for 24 – 29 July, but due to lack of funding the BRCS was unable to participate.

Côte d'Ivoire

The Red Cross Society of Côte d'Ivoire (CRCI) participated in the third polio vaccination round from 29 May - 01 June 2009. CRCI mobilized 300 volunteers and 33 supervisors in the 10 districts of: Adiaké, Marcory, Tiassalé, San Pédro, Lakota, Gagnoa, Jacqueline, Bongouanou, Daloa and Abengourou.



CRCI volunteers preparing to undertake social mobilization activities



Districts covered by CIRC during the 29 May – 01 June 2009 campaign

CIRC social mobilization activities helped to vaccinate 973,337 children against polio during this campaign round. Over 24,600 households were visited by CIRC volunteers during campaign activities and more than 55,000 people sensitized.

As highlighted in the table and graph below, vaccination coverage from round one to round three in Côte d'Ivoire increased in all of the 10 districts where the CIRC was active. This is a significant achievement, and demonstrates the added value of CIRC social mobilization during the three rounds.

District	Vaccination coverage (as a %) in CIRC intervention districts		
	Round 1 27 Feb. – 02 March 2009	Round 2 27 – 30 March 2009	Round 3 28 May – 01 June 2009
Adiaké	96.00	95.00	99.00
Marcory	59.00	88.00	99.00
Tiassalé	93.00	93.00	99.00
Aan pédro	96.00	91.00	101.00
Lakota	96.00	93.00	104.00
Gagnoa	88.00	92.00	101.00
Jacqueville	92.00	93.00	99.00
Bongouanou	85.00	95.00	95.00
Daloa	92.00	91.00	99.00
Abengourou	89.00	94.00	99.00

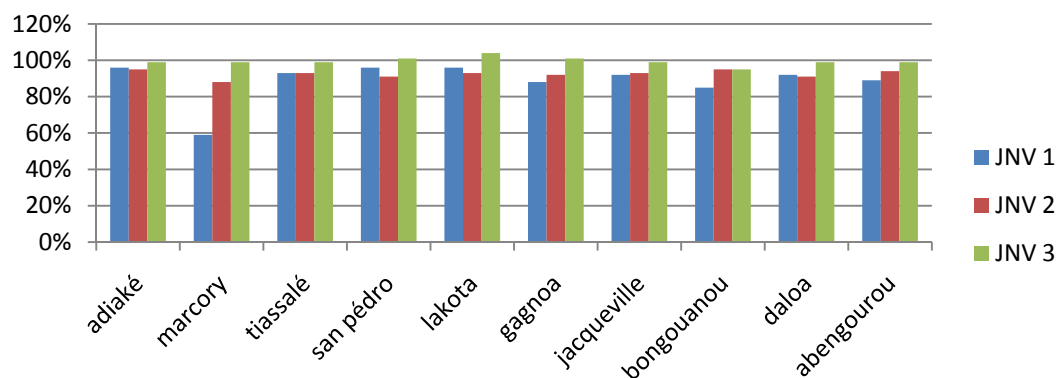


Figure represents the increase in polio vaccination coverage during all three rounds in 2009
JNV: Journée nationale de vaccination

Guinea

Due to postponement of the planned May 2009 polio vaccination round by the MoH the Red Cross Society of Guinea (RCSG) was unable to participate in polio vaccination campaigns.

Ghana

Ghana Red Cross Society (GRCS) participated in the third polio vaccination round from 28 – 30 May 2009. GRCS mobilized 400 volunteers in the 10 districts of: Ashanti, Brong-Ahafo, Central, Eastern, Greater Accra, Northern, Upper East, Upper West, Volta and Western, vaccinating an estimated 5,087,152 children.

Region	Round 3 (May 2009)		
	Target population	Children vaccinated	Vaccination coverage (as a %)
Ashanti	939,588	964,864	102.70
Brong-Ahafo	459,946	470,808	102.40
Central	389,252	424,136	109.00
Eastern	512,946	530,730	103.50
Greater Accra	744,146	753,464	101.30
Northern	585,162	629,393	107.60
Upper East	227,354	230,289	101.30
Upper West	145,589	148,509	102.00
Volta	384,081	403,347	105.00
Western	498,622	531,612	106.60
National Total	4,886,623	5,087,152	

Mali

From 29 May – 01 June 2009, the Mali Red Cross (CRM) participated in the third synchronised polio vaccination campaign. CRM mobilized 600 volunteers and 61 supervisors in two regions (Sikasso and Mopti), covering 13 districts. An estimated 20,139 households were visited through door-to-door social mobilization activities.

In the Sikasso region the following districts were covered by CRM activities: Yorosso, Koutiala, Sikasso, Kadiolo, Kolondieba, Yanfolila, and Bougouni. Below please find a table highlighting the number of children aged 0 – 59 months reached by CRM volunteers in the Sikasso region.

District	Round 3 results		
	Target population	Children vaccinated	Vaccination coverage (as a %)
Bougouni	155,303	163,534	105.30
Yanfolila	47,174	49,014	103.90
Kolondieba	60,538	61,628	101.80
Sikasso	256,097	266,341	104.00

Kadiolo	59,978	69,634	116.10
Yorosso	73,414	79,874	108.80
Koutiala	198,956	223,626	112.40
TOTAL	851,460	913,651	

In the Mopti region the following six districts were covered by CRM activities: Bandiagara, Bankass, Koro, Douentza, Djenné, and Mopti. Below please find a table highlighting the number of children aged 0 – 59 months reached by CRM volunteers in the Mopti region.

Region	Round 3 results		
	Target population	Children vaccinated	Vaccination coverage (as a %)
Bandiagara	99,628	102,427	102.80
Bankass	81,645	86,543	106.00
Koro	114,113	125,612	110.10
Douentza	79,525	82,386	102.30
Djenné	63,175	67,026	106.10
Mopti	120,245	131,247	109.10
TOTAL	558,331	595,241	

Niger

Red Cross Society of Niger (CRN) participated in the third polio vaccination round from 24 – 27 May. CRN mobilized 250 volunteers and 25 supervisors in two regions: Maradi and Zinder. In the Maradi region four districts were covered: Maradi commune, Guidan-Roundji, Madarounfa and Aguié. In the Zinder region, activities took place in two districts: Zinder commune and Mirriah. These districts have a total population of over 2 million. Through its 250 volunteers, CRN was able to facilitate community mobilization amongst approximately 252,743 people.

The table below outlines the total numbers reached by CRN during the campaign in the two different regions, and their districts.

Region	District	Number of villages visited	Number of households visited	Number of people reached
Maradi	Guidan-Roundji	157	4,675	25,587
	Maradi commune	8	8,602	84,046
	Madarounfa	120	6,376	20,978
Zinder	Zinder commune	7	5,183	70,465
	Mirriah	106	5,027	51,667
Total		398	29,863	252,743

Sierra Leone

Sierra Leone Red Cross Society (SLRCS) participated in the integrated synchronized polio and vitamin A immunization round from 29 May – 1 June 2009. SLRCS mobilized 300 volunteers across 13 regions. The campaign was integrated into the Maternal and Child Health Week (MCHW), which is a twice yearly activity that seeks to promote the health and wellbeing of children aged 0-59 months, and mothers in Sierra Leone. It is estimated that nearly 100,000 people were reached through different radio campaigns and door-to-door activities.



The 'Second Lady of the Nation' cutting the tape to launch the campaign in Sierra Leone

Togo

The update on Togo vaccination rounds was covered in Operations Update n° 2, published on 24 June 2009. For a detailed account of activities undertaken and campaign results, please go to:

<http://www.ifrc.org/docs/appeals/09/MDR61004-64005-63002-02.pdf>



Volunteers talk to the community about the importance of polio vaccination

Central Africa

- Angola
- Central African Republic (CAR)
- Democratic Republic of the Congo (DRC)

In Central Africa, a series of staggered national immunization days (NIDs) and sub-national immunization days (SNIDs) were scheduled during May, June and July. Interrupting transmission of WPV in Angola is the priority, as it has recurrently exported virus to countries in the region.

Red Cross National Societies in Angola, Central African Republic and the Democratic Republic of the Congo were active in the May and June rounds. **Approximately 2,900 volunteers were mobilized across these National Societies.** Highlights of this activity include:

Angola

Angola Red Cross (ARC) participated in the 14 – 28 June 2009 integrated measles and polio campaign. ARC mobilized 510 volunteers in twelve provinces (Bengo, Benguela, Bie, Cunene, Huila, Kuando Kubango, Kuanza Sul, Luanda, Lunda Sul, Moxico, Uige and Zaire), reaching an estimated 481,500 people with vaccination promotion messages. WHO data, outlined in the below table, highlights the vaccination coverage achieved in Angola during the integrated immunization round.

Target population	N° doses administrated	Vaccination coverage (as a %)
2,997,746	3,012,606	100.00

*Note: Preliminary data from 4 provinces

Central African Republic

Central African Red Cross Society (CARCS) participated in the immunization round from 5 – 12 June 2009 in 17 health districts. The National Society mobilized 550 volunteers, 58 local supervisors and 17 central supervisors for the campaign. Over 450,120 children between aged 0 – 59 months were reached by CARCS volunteers and successfully vaccinated.

Number of households visited	Number of people reached	N° of children 0-59 months identified	N° of children 0-59 months vaccinated	Vaccination coverage (as a %)
50,395	880,450	575,020	450,120	78.30*

*Coverage based upon CARCS volunteer monitoring data. Official MoH data not yet available.



It was noted in the National Society report that insecurity in some regions was in part responsible for the lower than expected vaccination coverage.

Identifiable Red Cross volunteers provide social mobilization support for polio vaccination campaigns

Democratic Republic of the Congo

Red Cross of the Democratic Republic of the Congo (RCDRC) mobilized 1,800 volunteers in 45 'zones santé' of 3 provinces (Bandundu, West Kasai and Eastern province) during the second round of a two-phase campaign from 7-9 May 2009. National Society activities included house-to-house visits to promote vaccination, pre-and post-campaign community social mobilization, active surveillance for acute flaccid paralysis (AFP), and participation in provincial assessment meetings. Overall, the campaign targeted more than 3.3 million children aged 0-59 months for vaccination in 4 provinces.

Province	Number of 'zones santé'	Target population	Total children 0-59 months vaccinated	Vaccination coverage (as a %)
Kasai Occidental	32	996,785	1,095,161	109.9
Bandundu	3	83,713	81,882	98.00
Providence Orientale	56	1,152,799	1,329,744	115.00
North Kivu	24	885,028	1,062,072	95.00
Total	115	3,118,325	3,568,859	

The involvement of RCDRC volunteers helped to achieve overall vaccination coverage of 114% as opposed to the 87% coverage in the same 'zones santé' during last year's campaign. The National Society contribution was highly appreciated by partners with further requests made for the NS to be more involved in routine immunization activities within those hard-to-reach areas.

Horn of Africa

- Ethiopia
- Kenya
- Sudan
- Uganda

In the Horn of Africa, synchronized sub-national and national rounds took place between May and July.

Red Cross Red Crescent National Societies in Ethiopia, Kenya, Uganda and Sudan were active. **Approximately 7,000 volunteers were mobilized across these National Societies.** Highlights of the campaigns include:

Ethiopia

Ethiopian Red Cross Society (ERCS) supported both the May and June sub-national vaccination rounds in East and West Harrarghe and the Somali region, respectively. During the 22 – 25 May 2009 round in East and West Harrarghe, ERCS was prepared to conduct activities but due to a change in MoH requirements additional social mobilization activities were not needed. Instead, ERCS purchased megaphones for mass communication activities, transported of ice packs and vaccine to campaign sites, participated in the intra-campaign survey and financially supported other MoH activities.

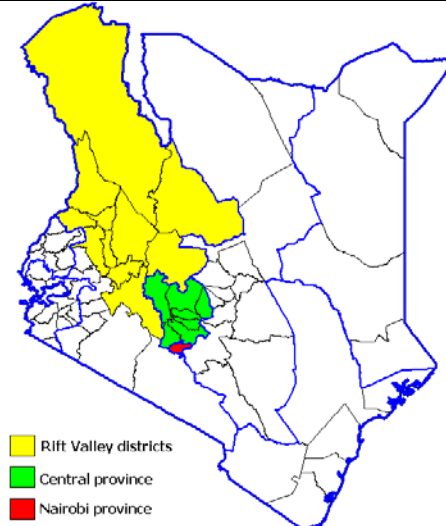
During the first sub-national campaign round held in the Somali region from 12 – 15 June 2009, ERCS conducted a range of social mobilization activities in 168 kebeles of two woredas (Jijjiga and KeberayBayha). Activities included working with women's associations to promote vaccination, deploying youth volunteers in public areas, printing banners in the local language and distributing 10,000 campaign leaflets via trained female volunteers. Between the 1,176 ERCS volunteers mobilized, approximately 93,652 children and their families/carers were reached with vaccination messages.

The table below outlines the total numbers reached by ERCS during the campaign in the two woredas of the Somali region.

'Woreda'	Total population	Target population	'Kebeles' covered by ERCS	Total volunteers mobilized
Jijjiga Woreda	293,105	58,621	104	728
KeberayBeyaha	175,157	35,031	64	448
Total	468,262	93,652	168	1,176

Kenya

Kenya Red Cross Society (KRCS) continued their involvement in the emergency polio response during the round which was held on 23 – 27 May 2009. The third synchronized round took place across three provinces: Central, Nairobi and Rift Valley; and targeted 42 districts for polio vaccination. With the support of 1,560 KRCS volunteers, the National Society conducted social mobilization in 26 of the 42

	 <p> ■ Rift Valley districts ■ Central province ■ Nairobi province </p>	<p>target districts and lent its vehicle fleet to the campaign effort. Due to insufficient funding, KRCS was unable to participate in subsequent rounds.</p> <p>The May campaign was able to successfully vaccinate over 95% of children aged 0-59 months.</p> <table border="1" data-bbox="821 403 1524 616"> <thead> <tr> <th>Province</th> <th>Vaccination coverage</th> </tr> </thead> <tbody> <tr> <td>Central</td> <td>104.9%</td> </tr> <tr> <td>Nairobi</td> <td>108%</td> </tr> <tr> <td>Rift Valley</td> <td>95% *NB Samburu, Naivasha and Trans Nzoia West did not achieve 80%</td> </tr> </tbody> </table> <p>Sudan Due to specific funding restrictions, funding secured for the Sudanese Red Crescent (SRC) was not available in time for the May, June or July campaign activities. However, with full collaboration of all partners, the SRC is planning to participate in the upcoming national immunization days scheduled for later this year. Areas to be covered are still being finalized, and further details will follow. This Appeal extension beyond the 31 July 2009 is to allow for these activities to be completed; otherwise, no additional National Society activities are planned after the originally planned Appeal conclusion.</p> <p>Uganda With bilateral support from the American Red Cross, the Uganda Red Cross Society (URCS) participated in the 6 – 8 June 2009 integrated measles and polio campaign. URCS mobilized 4,200 volunteers in 15 districts (Apac, Bushenyi, Iganga, Kampala, Kamuli, Kanungu, Kisoro, Lira, Masaka, Masindi, Mbarara, Mukono, Nebbi, Pallisa, and Soroti), successfully supporting the campaign which targeted approximately 1,940,373 children aged 0-59 months.</p> <p>Approximately 100,000 fliers and 70,000 posters were distributed using faith-based organizations, FM radio stations, television, newspapers, peer education, Rotary and URCS volunteers. Activities were supervised and monitored by officials from the MoH, WHO, UNICEF, URCS, Rotary Clubs, the Church of Jesus Christ for the Latter Day Saints, District Health Teams and some political leaders.</p> <p>June URCS social mobilization activities were not funded by the Appeal.</p>	Province	Vaccination coverage	Central	104.9%	Nairobi	108%	Rift Valley	95% *NB Samburu, Naivasha and Trans Nzoia West did not achieve 80%
Province	Vaccination coverage									
Central	104.9%									
Nairobi	108%									
Rift Valley	95% *NB Samburu, Naivasha and Trans Nzoia West did not achieve 80%									

Communications – Advocacy and Public Information

Mobilizing nearly 25,000 volunteers indicates the commitment these seventeen National Societies to eradicating polio and supporting the response efforts of their national Ministries of Health. Training of volunteers, volunteer coaches and supervisors builds National Society capacities, enabling them to respond more rapidly to other emergency health needs or mass vaccination activities in the future.

The Africa Polio Outbreak Emergency Appeal has received much media attention, particularly at the time of its launch. Information on the Appeal has been posted on the GPEI website (www.polioeradication.org) and recognition of the Federation's contribution to the outbreak response has been made through high level communications.

Frequent updates on National Society activities are being shared with GPEI partners at the global level, and through regional communications. At the national level, Red Cross Red Crescent National Society participation in campaigns has been commended through campaign bulletins and communications materials. The most meaningful recognition of the important social mobilization work conducted by National Societies, however, has come in repeated requests by Ministries of Health for additional and scaled up involvement in subsequent vaccination rounds. In order to meet these requests, and cease the spread of WPV in re-infected countries, the International Federation must remain a key social mobilization partner in the area of polio eradication.

How we work

All International Federation assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and is committed to the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.

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".

Global Agenda Goals:

- 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

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[<Interim financial reports below: click here to return to the title page>](#)

International Federation of Red Cross and Red Crescent Societies

MDR61004 - West & Central Africa - Polio Outbreak

Interim Financial Report

Selected Parameters	
Reporting Timeframe	2009/03-2009/06
Budget Timeframe	2009/03-2009/07
Appeal	MDR61004
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL
A. Budget	1,015,429					1,015,429
B. Opening Balance	0					0
Income						
<u>Cash contributions</u>						
<i>British Red Cross</i>	17,431					17,431
<i>Canadian Red Cross</i>	67,069					67,069
<i>Icelandic Red Cross</i>	40,000					40,000
<i>Irish Red Cross</i>	12,119					12,119
<i>Norwegian Red Cross</i>	21,000					21,000
<i>Unidentified donor</i>	60,000					60,000
C1. Cash contributions	217,619					217,619
<u>Outstanding pledges (Revalued)</u>						
<i>Japanese Red Cross</i>	81,700					81,700
C2. Outstanding pledges (Revalued)	81,700					81,700
<u>Other Income</u>						
<i>Voluntary Income</i>	357,842					357,842
C5. Other Income	357,842					357,842
C. Total Income = SUM(C1..C5)	657,161					657,161
D. Total Funding = B + C	657,161					657,161
Appeal Coverage	65%					65%

II. Balance of Funds

	Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL
B. Opening Balance	0					0
C. Income	657,161					657,161
E. Expenditure	-514,383					-514,383
F. Closing Balance = (B + C + E)	142,778					142,778

International Federation of Red Cross and Red Crescent Societies

MDR61004 - West & Central Africa - Polio Outbreak

Interim Financial Report

Selected Parameters	
Reporting Timeframe	2009/03-2009/06
Budget Timeframe	2009/03-2009/07
Appeal	MDR61004
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination		
A							B	A - B
BUDGET (C)		1,015,429					1,015,429	
Supplies								
Teaching Materials	44,169	2,431				2,431	41,738	
Total Supplies	44,169	2,431				2,431	41,738	
Land, vehicles & equipment								
Computers & Telecom		1,547				1,547	-1,547	
Total Land, vehicles & equipment		1,547				1,547	-1,547	
Transport & Storage								
Transport & Vehicle Costs	68,724	5,309				5,309	63,415	
Total Transport & Storage	68,724	5,309				5,309	63,415	
Personnel								
National Staff	345,463	3,057				3,057	342,406	
National Society Staff	163,019	82,718				82,718	80,301	
Total Personnel	508,482	85,775				85,775	422,707	
Workshops & Training								
Workshops & Training	131,870	20,119				20,119	111,751	
Total Workshops & Training	131,870	20,119				20,119	111,751	
General Expenditure								
Travel	51,605	25,054				25,054	26,551	
Information & Public Relation	110,325	13,117				13,117	97,208	
Office Costs	24,103	3,961				3,961	20,142	
Communications	10,148	870				870	9,278	
Financial Charges		18,349				18,349	-18,349	
Other General Expenses		2,009				2,009	-2,009	
Total General Expenditure	196,181	63,360				63,360	132,820	
Programme Support								
Program Support	66,003	34,044				34,044	31,958	
Total Programme Support	66,003	34,044				34,044	31,958	
Operational Provisions								
Operational Provisions		301,798				301,798	-301,798	
Total Operational Provisions		301,798				301,798	-301,798	
TOTAL EXPENDITURE (D)	1,015,429	514,383				514,383	501,045	
VARIANCE (C - D)		501,045				501,045		

International Federation of Red Cross and Red Crescent Societies

MDR64005 - East Africa - Polio Outbreak

Interim Financial Report

Selected Parameters	
Reporting Timeframe	2009/04-2009/06
Budget Timeframe	2009/04-2009/07
Appeal	MDR64005
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL
A. Budget		1,263,921				1,263,921
B. Opening Balance		0				0
Income						
<u>Cash contributions</u>						
<i>British Red Cross</i>		119,670				119,670
<i>Sweden Red Cross</i>		239,946				239,946
<i>Unidentified donor</i>		20,000				20,000
C1. Cash contributions		379,616				379,616
<u>Other Income</u>						
<i>Voluntary Income</i>		235,888				235,888
C5. Other Income		235,888				235,888
C. Total Income = SUM(C1..C5)		615,504				615,504
D. Total Funding = B + C		615,504				615,504
Appeal Coverage		49%				49%

II. Balance of Funds

	Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL
B. Opening Balance		0				0
C. Income		615,504				615,504
E. Expenditure		-585,055				-585,055
F. Closing Balance = (B + C + E)		30,448				30,448

International Federation of Red Cross and Red Crescent Societies

MDR64005 - East Africa - Polio Outbreak

Interim Financial Report

Selected Parameters	
Reporting Timeframe	2009/04-2009/06
Budget Timeframe	2009/04-2009/07
Appeal	MDR64005
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination		
A							B	A - B
BUDGET (C)		1,263,921					1,263,921	
Supplies								
Teaching Materials	16,400						16,400	
Total Supplies	16,400						16,400	
Transport & Storage								
Storage	86,846						86,846	
Transport & Vehicle Costs	23,600		271			271	23,329	
Total Transport & Storage	110,446		271			271	110,175	
Personnel								
National Staff	38,729		7,173			7,173	31,556	
National Society Staff	41,400		37,408			37,408	3,992	
Total Personnel	80,129		44,580			44,580	35,549	
Workshops & Training								
Workshops & Training	543,576		840			840	542,736	
Total Workshops & Training	543,576		840			840	542,736	
General Expenditure								
Travel	11,733		1,993			1,993	9,740	
Information & Public Relation	295,552		162			162	295,390	
Office Costs	97,963		456			456	97,507	
Communications	3,360		397			397	2,963	
Financial Charges	340		3			3	337	
Other General Expenses	22,267		2,914			2,914	19,353	
Total General Expenditure	431,215		5,925			5,925	425,290	
Contributions & Transfers								
Cash Transfers National Societies			488,285			488,285	-488,285	
Total Contributions & Transfers			488,285			488,285	-488,285	
Programme Support								
Program Support	82,155		39,155			39,155	43,000	
Total Programme Support	82,155		39,155			39,155	43,000	
Services								
Shared Services			6,000			6,000	-6,000	
Total Services			6,000			6,000	-6,000	
TOTAL EXPENDITURE (D)	1,263,921		585,055			585,055	678,865	
VARIANCE (C - D)			678,865			678,865		

International Federation of Red Cross and Red Crescent Societies

MDR63002 - South Africa - Polio Outbreak

Interim Financial Report

Selected Parameters	
Reporting Timeframe	2009/04-2009/06
Budget Timeframe	2009/04-2009/07
Appeal	MDR63002
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL
A. Budget	119,999					119,999
B. Opening Balance	0					0
Income						
<u>Cash contributions</u>						
<i>Canadian Red Cross</i>	28,744					28,744
<i>Sweden Red Cross</i>	31,502					31,502
<i>Unidentified donor</i>	20,000					20,000
C1. Cash contributions	80,245					80,245
C. Total Income = SUM(C1..C5)	80,245					80,245
D. Total Funding = B + C	80,245					80,245
Appeal Coverage	67%					67%

II. Balance of Funds

	Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL
B. Opening Balance	0					0
C. Income	80,245					80,245
E. Expenditure	-61,006					-61,006
F. Closing Balance = (B + C + E)	19,240					19,240

International Federation of Red Cross and Red Crescent Societies

MDR63002 - South Africa - Polio Outbreak

Interim Financial Report

Selected Parameters	
Reporting Timeframe	2009/04-2009/06
Budget Timeframe	2009/04-2009/07
Appeal	MDR63002
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination		
A							B	A - B
BUDGET (C)		119,999					119,999	
Supplies								
Teaching Materials	1,206							1,206
Total Supplies	1,206							1,206
Transport & Storage								
Distribution & Monitoring	1,489							1,489
Total Transport & Storage	1,489							1,489
Personnel								
National Society Staff	86,786							86,786
Total Personnel	86,786							86,786
Workshops & Training								
Workshops & Training	5,855							5,855
Total Workshops & Training	5,855							5,855
General Expenditure								
Travel	2,605							2,605
Information & Public Relation	3,104							3,104
Financial Charges	1,191	-704					-704	1,895
Total General Expenditure	6,900	-704					-704	7,604
Depreciation								
Depreciation	9,963							9,963
Total Depreciation	9,963							9,963
Programme Support								
Program Support	7,800	3,965					3,965	3,835
Total Programme Support	7,800	3,965					3,965	3,835
Operational Provisions								
Operational Provisions		57,745					57,745	-57,745
Total Operational Provisions		57,745					57,745	-57,745
TOTAL EXPENDITURE (D)	119,999	61,006					61,006	58,993
VARIANCE (C - D)		58,993					58,993	