

Emergency appeal



International Federation
of Red Cross and Red Crescent Societies

Kenya: Drought

Emergency appeal n°MDRKE009

GLIDE n° DR-2009-000197-KEN

17 September 2009

This Emergency Appeal seeks CHF 8,680,692 (USD 8,427,856 or EUR 5,748,803) in cash, kind or services to support the Kenya Red Cross Society (KRCS) to assist 1,692,428 beneficiaries for 6 months, and will be completed by 15 March 2010. A Final Report will be made available by 15 June 2010 (three months after the end of the operation).

Based on the situation, this Emergency Appeal responds to a request from the Kenya Red Cross Society, and focuses on providing support to take an appropriate and timely response in delivering assistance and relief in the following sectors: food aid, emergency health and care, water, sanitation and hygiene promotion, and livelihoods.

Summary: This appeal is being launched to assist communities in Kenya affected by extreme drought caused by successive failure of rains. The actions proposed under this appeal specifically target the areas worst affected by the drought and aim to assist communities with early recovery during the coming rainy season through provision of seeds to marginal agricultural communities. The appeal is targeting areas not covered by the ongoing food aid by Government of Kenya and World Food Programme (WFP). It also seeks to expand and strengthen school feeding programme and support communities to have access to primary health care and safe water.



Drought affected communities in Turkana consuming dry carcasses and wild fruits

[<click here to view the attached Emergency Appeal Budget or here to view contact details>](#)

The Situation

Kenya has been undergoing a devastating drought since mid 2008. The cumulative effects of three consecutive failed rain seasons and the effects of the 2008 post election violence in the agriculturally productive Rift Valley have crippled food production. The Kenyan Government recently declared an overall 40 percent shortfall in national grain harvest for 2009.

The most severely affected areas include the pastoral livelihood regions of Northern Kenya, and the marginal agricultural regions of the eastern part of the country. Most of these areas received less than 50 per cent of normal rainfall characterized by a delayed start, early cessation, and poor temporal and spatial distribution. This affected the recharge of surface and ground water sources which resulted to depletion of surface reservoirs and drying up of harnessed underground sources.

According to the Kenya Food Security Steering Group (KFSSG), an estimated 3.8 million people comprised of pastoralists, agro pastoralists and marginal agricultural farm households are extremely food insecure and require urgent humanitarian food assistance. The populations include pastoralists in the northern part of Kenya and marginal agricultural farm households in the southern part of Eastern Province. In addition, 1.5 million primary school children in drought-affected areas have also been affected as demonstrated by a sharp drop in school enrolment in the drought affected districts.

For example, the dropout rate for schools in Mwingi district is 36.1 percent over the past year for male pupils and 32.2 percent for female pupils for the corresponding period (see table 1 below).

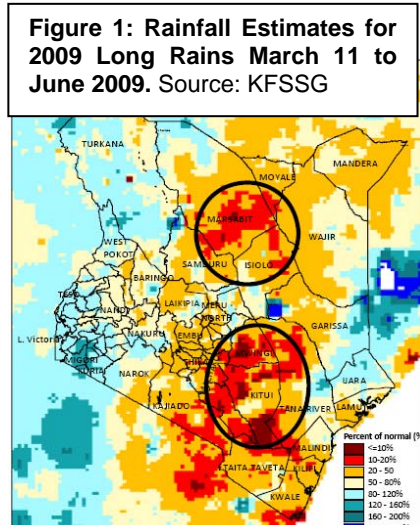


Table 1: Enrolment trends in primary schools, Mwingi District

2005		2006		2007		2008		2009	
Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
57,304	56,645	56,241	55,540	57,493	56,305	37,308	37,062	36,741	36,413

*Note the drop in enrolment from the time of drought onset (KFSSG 2009)

According to the survey conducted by the KFSSG between July to August 2009, there exists a huge gap between schools targeted by WFP and Government of Kenya in the school feeding programme and those not included. The KRCS intends to meet the identified gaps in Kitui, Makueni, Machakos and Mwingi districts. This is critical in achieving nutrition objectives while enhancing school enrolment.

The impacts of prolonged drought include unprecedented rise in food prices (maize prices are at least 80 per cent higher than normal in most pastoral areas), escalating conflict, related to limited pastures and water resources, and massive loss of livestock resulting to loss of livelihoods in livestock dependent communities, increase in community vulnerability and increase in levels of absolute poverty due to loss of livestock and decline in livestock prices due to general wasting.

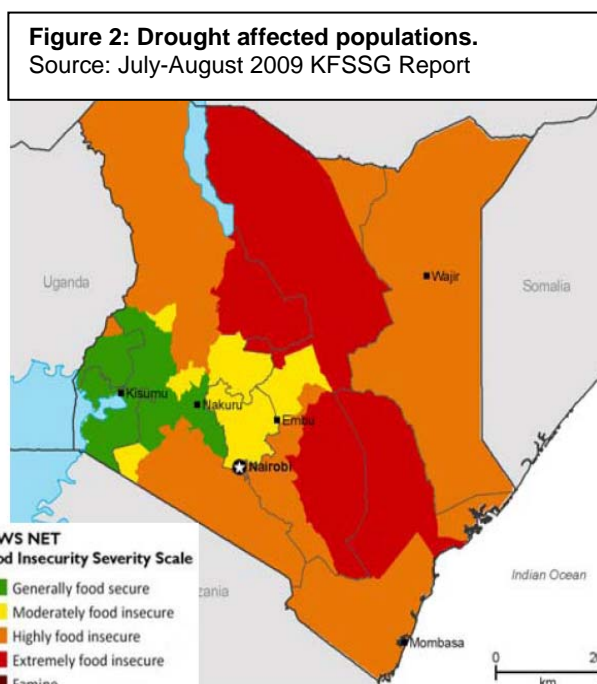


Figure 3: Drought Affected population in need of Emergency Humanitarian Assistance	
Pastoralists, agro pastoralists and marginal agricultural farm households.	3.8 million
Primary school children in drought affected areas.	1.5 million
Figure 4: Food Insecure Population Affected by other Factors	
Persons in urban areas unable to meet 50 percent of their daily food requirements.	2.5 million
Vulnerable poor in rural areas, who are affected by HIV and AIDS.	2 million
Persons displaced by the post election violence whose livelihoods have not fully recovered.	100,000

Figure 5: Food Security Phase Classification by KFSSG	
Districts under Acute Food and Livelihood Crisis (AFLC) and at high risk of falling into humanitarian emergency.	Marsabit, Isiolo, Mandera, Wajir, most parts of Tana River, Baringo, Laikipia, Turkana, Samburu, northern parts of Garissa, Mwingi, Kitui, Makueni, Mbeere, Tharaka, parts of Machakos, Kilifi and Kwale.
Districts that are borderline food insecure with a moderate or high risk of sliding into acute food and livelihood crisis.	Kajiado, Narok, Ijara, west of Malindi, parts of Garissa, Baringo, Samburu, Laikipia, Moyale and West Pokot.
Areas at low risk of falling into acute food and livelihood crisis.	Lamu and other areas along the coastal strip have reported marginal improvement in food security.

Health and Nutrition

Diarrhoeal diseases, including outbreaks of cholera and dysentery, have remained major causes of morbidity and mortality and a public health burden in the drought ravaged communities. There has also been a recorded increase in skin diseases among children, all linked to low levels of immunity as a result of malnutrition. Over the past year, cholera epidemics have been reported in five of the eight provinces and demonstrate a close correlation between the current drought and the occurrence of epidemics due to current acute water shortage. The current levels of malnutrition in the drought affected areas presents a major risk of measles and other vaccine preventable diseases epidemics. This is already indicated in the increasing number of confirmed measles cases and the recent polio epidemic in north-western Kenya.

The proposed activities for health and nutrition are aimed at strengthening community based surveillance for early outbreak detection and reporting, minimising the number of vulnerable children to vaccine preventable diseases through accelerated increase in vaccination coverage for enhanced immunity, and increasing access to basic health care through integrated Primary Health Care based mobile clinics especially in hard to reach communities. This will have a health promotion component to empower communities on practices that safeguard good health.

The ongoing School Feeding Programme (SFP) by the KRCS will be strengthened and expanded to cover more schools, to address cases of acute malnutrition in communities not chronically food insecure, and increasing levels of school enrolment. The accelerated mobile outreach programme will provide screening at the community level and provide referral to organizations such as Médecins Sans Frontières (MSF) and Save the Children providing supplementary and therapeutic feeding for children under the age of five.

Water and Sanitation

The failure of rains for three consecutive seasons in the country has severely affected recharge of surface water bodies particularly earth dams, subsurface dams, earth pans, ponds, streams and seasonal rivers, as well as recharge of aquifers for underground water. This has led to depletion of surface water which is the major domestic and livestock water sources for most communities in the arid and semi arid lands (ASALs), mostly in the pastoralist communities. This has increased patterns of migration and triggered conflicts over the scarce water and pasture resources.

This has also exerted pressure on the existing water systems, particularly ground water systems leading to frequent breakdowns, low yield and unsustainable use of resources. Assessments indicate that walking distances to water sources have increased significantly, currently ranging from 15 to 40km in the districts assessed by KFSSG.

The drought affected population are susceptible to illness and death from disease due to inadequate water supplies and poor hygiene. The most significant of these diseases are diarrhoeal diseases and infectious diseases transmitted by the faecal-oral route, and sanitation-related diseases including those carried by vectors associated with solid waste and water.

Water and Sanitation (WatSan) interventions thus aims to provide safe water in line with the Humanitarian Charter and Minimum Standards in Disaster Response (SPHERE) and/or World Health Organization (WHO), especially in the areas that are most vulnerable to water borne diseases. A total of 897,277 people overall are targeted by this component. A main component of this sector is to provide key hygiene messages and to conduct information campaigns to raise the awareness of people towards the risks of contaminated water and encourage good hygiene practices to prevent the spread of communicable diseases.

Coordination and partnerships

The Kenya Red Cross Society is a member of KFSSG, which is the main organ for coordination of food security matters. The National Society co-chairs the Rapid-Onset Disaster Committee with the Office of the President. The Committee is a body that also comprises international non-governmental organizations (NGOs), United Nations agencies and Government ministries. The Government has food stocks that will be mobilized to assist people in the affected areas, while the Kenya Red Cross Society may seek additional local donor support to meet the needs of the displaced and affected people.

The KRCS, in partnership with Government of Kenya (GoK) and the World Food Programme, is providing food aid under the Protracted Relief and Recovery Operation (PRRO) targeting 2.6 Million people. The KRCS is serving 13 districts under PRRO programme with 797,141 beneficiaries in the unified food pipeline which is 31 percent of the total food aid beneficiaries of the GoK/WFP pipeline. In addition, KRCS has a Memorandum of Understanding with the United Nations Children's Fund (UNICEF), WHO and United Nations Population Fund (UNFPA) which addresses the needs of communities in emergencies.

During emergencies the KRCS holds regular briefings and updates with Red Cross Red Crescent Movement partners including Partner National Societies, the International Committee of the Red Cross (ICRC) and the International Federation of the Red Cross and Red Crescent Societies. In addition, the Eastern African Zone office provides technical support.

Red Cross and Red Crescent action

Following the onset of the current drought and its declaration as a national disaster by the Government of Kenya, the KRCS launched a national appeal in Kenya and also internationally through the International Federation consolidated appeal for the Horn of Africa (HoA). Against an appeal budget of CHF 28 million, the National Society raised CHF 1,072,040 from the general public and corporate organizations in Kenya. A total of CHF 666,741 was obtained from the poorly funded (10 percent) regional HoA appeal out of which CHF 242,741 was a direct contribution to the drought intervention while the remaining CHF 424,000 was provided in form of a Disaster Relief Emergency Fund (DREF) to support cholera outbreak interventions that affected five provinces in the country. The drought allocation has been used to move and distribute a total of 7,220 MT of locally sourced and government food to the drought ravaged communities across the country. The HoA appeal is planned to be closed by the end of December 2009. Further details on this will be communicated in a separate operations update.

The KRCS also received bilateral support from AusAID through the Australian Red Cross amounting to CHF 249,492. This donation has been used to support a School Feeding Programme in 66 primary schools in Mwingi and Kyuso districts, where Corn Soya Blend (CSB) Unimix has been supplied for a period of 3 months. As a result, enrollment has increased in the targeted schools. The programme is implemented in collaboration with Ministry of Education and School Management Committees.

The needs

Beneficiary selection

Beneficiaries have been identified and quantified as per the Long Rains Food Security Assessment report compiled by Kenya Food Security Steering Group (July to August 2009 KFSSG). The assessment method employed livelihoods approach, integrated phase classification (IPC) and household economy approach. The assessment method was comprised of household surveys using questionnaires, key informant interviews, focused group discussions and transect drives through affected areas as well as physical observation of the impacts of the drought. According to the KFSSG July to August report, there was a significant increase in the number of drought affected communities which are not included in the GoK/WFP targeting. The households targeted under this appeal are not included in the on-going PRRO programme by the Government of Kenya and the WFP. The targeting is also related to the on going PRRO target figures and recommendations of the KSSFG long rains food security assessment report 2009.

Figure 6: Target population per intervention in the drought affected districts

Districts	Health	WatSan	Seeds	SFP
Turkana	76,175			
West Pokot	35,607			
Baringo/East Pokot	28,529			
North Rift Valley Total	140,311			
Kajiado				
Laikipia				
South Rift Valley Total	-			
Mandera	62,576	53,636		
Wajir	77,860	66,737		
Garissa	80,538	69,032		
Ijara	15,301	13,116		
North Eastern Total	236,275	202,521		
Moyale	10,537	10,032		
Marsabit	23,935	66,293		
Isiolo	23,055	55,055		
Samburu	29,104	24,946		
Igembe - North and South				
Tharaka				
Tigania - East and West				
Mbeere				
Upper Eastern Total	86,630	156,326		
Nyeri				
Muranga				
Maragwa				
Central Total				
Mwingi	33,047	56,652	255,000	120,000
Kitui		94,231	200,000	99,000
Machakos		174,071	223,000	115,500
Makueni	42,629	146,156	222,000	165,500
Lower Eastern Total	75,676	471,110	900,000	500,000
Tana River	42,921			
Lamu	15,885			
Kilifi	31,477	35,973		
Malindi				
Kwale		31,347		
Coast Total	90,283	67,320		
Grand Total	629,174	897,277	900,000	500,000

*Populations targeted have overlapping needs including health care, water and sanitation, relief and nutrition.

Immediate needs

The needs relate to lack of access to safe water, lack of access to food, inadequate feeding in the community leading to increase in school drop out rates, poor access to preventive health services and lack of access to quality seeds.

Long-term needs

The inadequate capacity of communities to recover from the impact of the frequent natural disasters leads to increased vulnerability. There is an urgent need to support programmes aimed at livelihood recovery activities.

The Proposed Operation

Continuity of relief and expansion of the current School Feeding Programme (SFP)

The KRCS is targeting 500,000 school-going children in Mwingi, Kitui, Machakos and Makueni districts. These are children in communities that are not targeted by the on-going food aid under the Protracted Relief and Recovery Operation (PRRO) undertaken by GoK/World Food Programme (WFP).

Accelerated preventive community health services

Interventions will target mostly the hard to reach pastoralist communities with poor coverage for health services occasioned by nomadic lifestyles which have been caused by lack of water and pasture. The proposed interventions will include rehabilitation of water facilities, hygiene promotion activities to prevent outbreak of diarrhoeal diseases and skin diseases in these communities with decreased immunity due to inadequate access to food and poor nutrition status.

Early recovery and mitigation of food insecurity in marginal agricultural areas

Based on information availed by the Climate Prediction and Application Centre (ICPAC) in the recently concluded Greater Horn of Africa Climate Outlook Forum (GHACOF), El Nino conditions have been developing in mid Pacific region since May 2009 with increasing sea surface temperatures (SSTs). The country is therefore expecting higher than normal rainfall in the period that corresponds to short rains (October to December).

Based on this prediction, the KRCS is putting in place early recovery mechanisms especially in the south eastern part of the country. This will be done through preparing farming communities to maximize on the predicted favourable weather conditions by providing seeds for food crops. The model is based on post El Nino harvest of 1998 as an indicative year where bumper harvest was realized in the targeted region.

If this strategy is applied well on time, the current trend can be reversed within 6 months to achieve early recovery and a good harvest. This will address food security needs without external intervention for at least one year in the southern part of Eastern Province.

Relief distributions (food)

Objective: To provide supplementary feeding to 500,000 school-going children in Mwingi, Makueni, Kitui and Machakos districts.	
Expected results	Activities planned
<ul style="list-style-type: none">Improved nutritional status of affected children and retention in schools.	<ul style="list-style-type: none">Provide supplementary food rations (CSB/Unimix) to the schools for 6 months (one distribution per month) 1.2 kg per child per month.

Emergency health and care	
Objective: To contribute to reduction of morbidities and mortalities in 629,174 people in drought affected areas with emphasis on pastoral areas through provision of basic community health care services.	
Expected results	Activities planned
<ul style="list-style-type: none"> Reduced morbidity and mortality due to communicable diseases among the affected population. Increased disease awareness, prevention and control in addition to other health issues amongst the affected population. Improved disease surveillance systems that enhance regular reporting and feedback. 	<ul style="list-style-type: none"> Accelerated mobile outreach services to: <ol style="list-style-type: none"> Increase vaccination coverage to reduce on number of children vulnerable to vaccine preventable diseases; Strengthen community based surveillance for early outbreak detection; Support referral services and linkages; Treatment of common ailments and screening for malnutrition; Increase coverage in distribution of household water treatment chemicals; Carry out health promotion and education among the affected population for disease prevention especially diarrhoeal diseases. Support existing Ministry of Health integrated surveillance systems. Support monitoring, evaluation and supervision of emergency health activities.

Water, sanitation and hygiene promotion	
Objective (a): To provide access to safe water, in line with WHO/SPHERE standards for an estimated 897,277 individuals in pastoral and marginal agricultural areas affected by drought in north eastern, upper eastern and lower eastern regions.	
Expected results	Activities planned
<ul style="list-style-type: none"> Improved access to safe water (15 litres per person per day) provided to 897,277 persons as damaged systems are restored. 	<ul style="list-style-type: none"> Support to rapid response teams by providing fast moving spare parts for 24 boreholes and servicing 11 generator sets. Lay 20 KMs of pipeline to enhance water supply to drought stricken areas. Increase storage capacity at distribution points through provision of 11 bladder tanks and 50 UPVC water tanks. Identify and rehabilitate 20 boreholes/shallow wells at selected sites (institutions and community centres). Form and train 38 water management committees to manage the constructed and/or rehabilitated water facilities. Distribute water treatment products to 30,000 vulnerable households.
Objective (b): To promote hygiene and sanitation in line with WHO/SPHERE standards for an estimated 897,277 individuals in pastoral and marginal agricultural areas affected by drought in north eastern, upper eastern and lower eastern regions.	
Expected results	Activities planned
<ul style="list-style-type: none"> Improved health status of the population through behaviour change and hygiene promotion activities. Key hygiene messages disseminated effectively at household and/or community level and positive hygiene behaviour adopted by targeted households. 	<ul style="list-style-type: none"> Train 20 volunteers and/or trainer of trainers (TOTs) on Participatory Hygiene and Sanitation Transformation in Emergency Response (PHASTER) methodologies. Conduct continuous hygiene promotion and awareness campaigns among the affected individuals. Produce and distribute generic hygiene promotional information, education and communication materials. Establish and/or strengthen community water committees within the rehabilitated water points. Conduct Child to Child hygiene promotion in 35 schools.

Livelihood

Objective: To provide seeds to 150,000 households to ensure early recovery in Mwingi, Makueni, Kitui and Machakos districts.	
Expected results	Activities planned
<ul style="list-style-type: none"> Communities recovered from the adverse effects of the drought and improved harvest. 	<ul style="list-style-type: none"> Provide seeds to the communities to enhance early recovery. 2 and ½ Kgs Maize, 1 Kg beans, 1 Kg Green Grams, 1 Kg Cowpeas and 1 Kg Sorghum (one off distribution). Conduct post distribution monitoring to measure effective use of seeds and ensure that harvest expected is achieved.

Logistics

Objective: To provide strong logistical support in primary and secondary transportation as well as warehousing in the field that would enable rapid access to beneficiaries in targeted areas.	
Expected results	Activities planned
<ul style="list-style-type: none"> Mobilization of relief goods; reception of all incoming goods; warehousing, centralized provision of standard vehicles as required; and efficient dispatch of goods to the final distribution points are well coordinated. 	<ul style="list-style-type: none"> Conduct rapid assessment to determine logistical needs or gaps. Transport 2,267 MT of food and non food items to final distribution points. Identify suitable warehouses for storage of relief items. Maintain mobilisation table. Monitor and evaluate the relief activities and provide reporting on relief distributions. Reinforce regional logistics capacity in warehousing and transportation. Procurement of CSB/Unimix, Seeds and drugs supplies both locally and internationally.

Communications – Advocacy and Public information

Maintaining a steady flow of timely and accurate information between the field and other major stakeholders is vital for fundraising, advocacy and maintaining the profile of emergency operations. During an operation, communication between affected populations and the Red Cross and Red Crescent, as well as with the media and donors, is an essential mechanism for effective disaster response and the cornerstone to promote greater quality, accountability, and transparency. The communications activities outlined in this appeal are aimed at supporting the National Society to improve their communications capacities and develop appropriate communications tools and products to support effective operations. These activities are closely coordinated with the Communications department of the International Federation's Secretariat in the Zone and Geneva.

Capacity of the National Society

The Kenya Red Cross Society has good response capacity and the ability to make rapid deployment for affected areas as well as put in place high readiness capacity for areas yet to be affected. With 67 branches, 8 regional offices and 70,000 volunteers, the National Society has capacities at regional levels to make an initial response which can later on be reinforced by headquarter re-enforcement both in human and material terms.

This capacity cuts across human, material, as well as planning and mobilization of response. The competency of the staff and volunteers cuts across relief, rehabilitation and development and ability to address all aspect of the disaster management cycle with proven track record. The KRCS has a wide experience in managing similar if not bigger drought operations.

The Kenya Red Cross Society has built up its preparedness and response capacity from challenges and experiences of past disaster operations. All mitigation programmes are designed with sufficient consultation

at community level, using and enhancing community structures where possible, and ensuring an equal representation of men and women at decision-making bodies.

The Kenya Red Cross Society headquarters, with the support of its volunteers and branch staff across the country will coordinate the drought operation activities, including distribution of food and delivery of relief items to affected populations. The National Society has been involved in several similar operations in the recent years, as the leading humanitarian agency in Kenya, mandated to coordinate humanitarian response during disasters such as floods and droughts in parts of the country.

The Kenya Red Cross Society will provide timely information bulletins on its website to ensure sensitization and advocacy on the plight of affected population.

Monitoring and Evaluation

The National Society headquarters works closely with branches countrywide in the targeted areas to ensure proper delivery of humanitarian assistance to the drought victims. The National Society together with members of the sudden onset disaster committee and the International Federation Zone Secretariat technical personnel will assume the overall monitoring role to ensure accountability, timely and quality response and reporting.

Capacity of the Federation

The Federation's Eastern Africa Zone office is located in Kenya and will provide technical support to the operations through its Disaster Management Department. The Food Security Advisor for the Zone will assist with implementation of activities and monitoring food interventions. Additional technical support in Health and WatSan are also in place at the Zone office.

Budget summary

See attached budget (**Annex 1**) for details.

Yasemin Aysan
Under Secretary General
Disaster Response and Early Recovery Division

Bekele Geleta
Secretary General

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

For further information specifically related to this operation please contact:

- **In Kenya:** Mr. Abbas Gullet, Secretary General, Kenya Red Cross Society, Nairobi; Phone: +254 20.60.35.93; +254 20.60.86.81/13, Fax: +254 20.60.35, Email; gullet.abbas@kenyaredcross.org
- **In Kenya:** Eastern Africa Zone Office (Nancy Balfour, Disaster Management Coordinator, Eastern Africa, Nairobi), phone: +254.20.283.5208; Fax: + 254.20.271.2777; email: nancy.balfour@ifrc.org
- **In Kenya:** Eastern Africa Zone Office (Dr. Asha Mohammed, Head of Zone, Eastern Africa, Nairobi), phone: +254.20.283.5124; fax: 254.20.271.27.77; email: asha.mohammed@ifrc.org
- **In Geneva:** Pablo Medina, Operations Coordinator for Eastern Africa; phone: +41.22.730.43.81; fax: +41 22 733 0395; email: pablo.medina@ifrc.org

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

	APPEAL BUDGET SUMMARY	Annex 1
	APPEAL NAME Kenya - Drought	Appeal Number MDRKE009
	RELIEF NEEDS	
500	Shelter	0
505	Construction Materials	0
510	Clothing and Textiles	0
520	Food	2,047,059
523	Seeds and Plants	1,751,765
530	Water and Sanitation	727,794
540	Medical and First Aid	497,882
550	Teaching Materials	0
560	Utensils and Tools	0
570	Other Supplies and Services	0
	Total Relief Needs	5,024,500
	CAPITAL EQUIPMENT	
580	Land and Buildings	0
581	Vehicles Purchase	0
582	Computers and Telecom Equipment	0
584	Office/Household Furniture and Equipment	0
587	Medical Equipment	0
589	Other Machinery and Equipment	0
	TRANSPORT, STORAGE AND VEHICLES	
590	Storage - Warehouse	0
592	Distribution and Monitoring	0
593	Transport and Vehicles Costs	1,467,846
	PERSONNEL	
600	International Staff	0
640	Regionally Deployed Staff	0
661	National Staff	0
662	National Society Staff	325,412
670	Consultants	0
	WORKSHOPS AND TRAINING	
680	Workshops and Training	427,566
	GENERAL EXPENSES	
700	Travel	26,471
710	Information and Public Relations	45,618
730	Office running costs	0
740	Communication Costs	35,294
750	Professional Fees	25,882

760	Financial Charges	0
790	Other General Expenses	737,858
	<u>PROGRAMME SUPPORT</u>	
599	Programme Support - PSR	564,245
	Total Operational Needs	3,656,192
	Total Appeal Budget (Cash and Kind)	8,680,692
	Net Request	8,680,692