

# Final report



International Federation  
of Red Cross and Red Crescent Societies

## Namibia: Floods

Preliminary Final report  
Emergency appeal n° MDRNA004  
GLIDE n° 2009-00062-NAM  
30 January 2010

### Period covered by this Final Report:

25 March 2009 to 31 August 2009.

**Appeal target (current):** CHF 2,121,518  
(USD 1,878,181 or EUR 1,403,594)

**Final Appeal coverage:** 97% [<click here to go directly to the preliminary final financial report, or here to view the contact details>](#)

### Appeal history:

- CHF 146,695 was allocated on 11 March 2009 from the International Federation of Red Cross and Red Crescent Societies' (IFRC) Disaster Relief Emergency Fund (DREF) to support Namibia Red Cross Society (NRCS) provide immediate assistance to 4,000 households (20,000 beneficiaries) displaced by floods. After a rapid assessment of the needs, a second DREF of CHF 129,000 was released to scale-up the emergency water and sanitation activities in aid of approximately 13,000 displaced persons living in 31 relocation camps.
- An Emergency Appeal was initially launched on 25 March 2009 for CHF 1,494,980 (USD1.3 million or EUR 979,849) for a six months operation. The appeal budget was revised to CHF 1,569,797 (USD 1,376,399 or EUR 1,033,080) in the first operations update and to CHF 2,121,518 (USD 1,878,181 or EUR 1,403,594) in the fourth operations update to include additional operational costs, including the deployment of the Mass Sanitation emergency response unit (ERU).



A flooded settlement in Caprivi region

**Summary:** Heavy rains which began in February 2009 led to flush floods, affecting almost 700,000 people in the northern and north eastern parts of Namibia. Of these, 56,545 people were displaced, an estimated 105 deaths reported and 545,000 people identified to be at risk of food insecurity during the 2009/2010 agricultural season. The NRCS emergency relief operation's focus was on providing temporary shelter, clean water, sanitation facilities and promoting health and hygiene practices.

In addition to the technical support to the National Society, the IFRC facilitated the deployment of a British Red Cross led Mass Sanitation Module (MSM20) ERU team to the most affected Caprivi and Kavango regions. Immediately, the MSM20 ERU constructed latrines, embarked on hygiene promotion activities and strengthening coping mechanisms at community level. The ERU deployment was made possible by financial and human resources contributions from the British, Spanish, Irish and Swedish Red Cross Societies, as well as additional DREF from the IFRC. The team implemented their activities over a period of two months beginning 25 April 2009.

Although NRCS concluded all the planned activities, they are yet to reconcile the funds disbursed for this operation. Therefore, this report is issued in the interim pending final report in the next 30 days.

## The situation

Namibia experienced its worst torrential rainfall in 40 years that caused flooding in the northern and north eastern parts of the country. The most affected areas included Oshana, Oshikoto, Ohangwena and Omusati, in the Cuvelai Basin, as well as the Kavango and Caprivi regions. The torrential rains began in February 2009 and raised the water levels in the Cuvelai basin, Chobe, Zambezi and Kavango rivers. The impact of these floods was cumulative, with more devastation and human suffering due to the prolonged nature of the disaster. The floods damaged public infrastructure, including roads and bridges that were still being repaired after the damage from 2008 floods. This resulted in reduced access of the affected population to health facilities, schools and market places.

The Caprivi and Kavango regions, located in the north eastern part of Namibia were the worst affected. The Caprivi Strip is ranked by the Human Poverty Index as the poorest in the country. People living in this region have a low surviving rate, with approximately 53.7 percent of the population likely to die before the age of 40. The rapid spread of HIV has been identified as a major factor towards shortening the life expectancy in the region. Namibia has one of the highest HIV prevalence rates in the world, estimated in 2008 at 15.8 percent of the adult population. The cumulative effects of the flooding in 2008 and 2009, combined with low levels of resilience, resulted in increased vulnerability, particularly for the large proportion of the population affected by HIV.

A UN Disaster and Coordination (UNDAC) assessment report of 5 April 2009 highlighted the devastation caused by the floods in the six affected regions. The assessment report revealed primary health and care, safe water and sanitation services as amongst the most pressing needs for the affected population in established relocation camps, particularly in Caprivi region. Based on these identified needs the IFRC responded by mobilizing ERU support in water and sanitation activities. A MSM20 ERU team was hence deployed in the Caprivi and Kavango regions. Latrines were amongst the critical needs as their absence would increase the risk of water-borne diseases, thus the ERU immediately responded by construction at the relocation camps. Among the ERU actions, the team strengthened capacities of NRCS volunteers by training them on hygiene promotion, health education and latrine construction. The MSM20 ERU worked with the NRCS for two months from 25 April to 19 June 2009, led by the British Red Cross.

**Table 1:** Shows details of the impact of the floods in the affected regions

Region	Caprivi	Kavango	Ohangwena	Omusati	Oshana	Oshikoto	Total
Total population (2009)	87,058	257,235	261,323	243,657	176,586	181,304	1,207,275
People affected	26,263	9,000	133,703	228,842	161,916	117,818	677,542
Percentage of people affected	30.2%	3.5%	51.2%	93.9%	91.7%	65%	65.1%
People displaced	26,263	9,000	12,056	401	8,549	276	56,545
People in relocation camps	19,738	4,718	1,296	564	2,478	138	28,932
Number of deaths	3	0	22	32	48	0	105
Schools affected	29	7	63	107	83	39	328
Pupils affected	6,571	2,366	24,355	39,163	15,301	6,014	93,770
Health facilities affected	4	2	10	10	5	1	32
Health facilities closed	1	0	0	0	4	1	6
Small-to-medium enterprises	0	28	387	250	350	53	1,068
Farmers with crop fields affected	2,790	968	5,671	4,392	3,437	7,496	24,754
Hectares of crops field damaged	2,854	36,241	10,117	15,652	6,900	17,323	53,208
Livestock affected	3,000	0	0	0	0	0	3,000
Livestock killed/lost	18	0	2,161	693	2,093	5,038	10,003
Wildlife affected	300	0	0	0	0	0	300
Roads damaged	2	2	5	12	8	4	33

# Red Cross and Red Crescent action

## Overview

NRCS started the response operation by conducting rapid assessments in the most affected regions, which was carried out jointly with the Directorate of Emergency Management (DEM) comprised of government officials, NRCS and UN agencies. The DEM at the national level and the Regional Emergency Management Unit (REMU) at the regional level coordinated the operation. The coordination meetings were held weekly and attended by all stakeholders (UNICEF, WHO, UNDP, NRCS). The coordination bodies ensured that the individual focus areas were clearly defined to avoid duplication and overlapping of response activities.

## Achievements against objectives

Relief distributions (food and basic non-food items)	
<b>Objective:</b> 4,000 flood-affected households are provided with appropriate non-food relief items.	
Expected results	Activities planned
Relief items distributed to 4,000 households in six regions for a period of six months.	<ul style="list-style-type: none"> <li>Conduct joint rapid emergency needs and capacity assessments in the Oshana, Omusati, Ohangwena, Kunene, Kavango and Caprivi regions.</li> <li>Distribute 8,000 blankets, 4,000 mosquito nets, 48,000 bars of soap and 2,000 hygiene kits to relocated school children and lactating mothers.</li> <li>Monitor and evaluate the relief activities and provide reporting on relief distributions.</li> </ul>

**Table 2:** Indicates a breakdown of relief items distributed by NRCS

Relief	Caprivi Region	Kavango Region	North central Region	Grand Total
Number of families assisted	7,027	1,027	994	9,048
Total number of beneficiaries	25,418	4,718	4,476	34,612
Tarpaulins (Single)	8,125	135	375	8,635
Black Sheets (Rolls)	402	25	20	447
Mosquito Nets	10,940	2,344	327	13,611
Soaps	13,919	6,000	2,920	22,839
Water maker	609,670	233,500	135,000	978,170
Kitchen sets	5,470	837	736	7,043
Tents	92	170	-	262
Shelter Tool Kits	1,353	110	-	1,463
Blankets	12,383	3,198	67	15,648
20L Jerry Cans	4,625	3,136	321	8,082
Water Bucket	1,413	-	-	1,413
Assorted Clothes Parcels	1,329	-	-	1,329
White toilet soap	1,580	-	-	1,580
Collapsible Cans (10L)	756	-	-	756
Toilet paper	3,074	-	-	3,074
Pit Latrines constructed	286	97	16	399
Pit Latrines in use	358	97	16	471
Family showers	11	38	10	59
Hygiene kits	1,747	300	-	2,047

## Impact:

NRCS assisted 9,048 families (34,612 beneficiaries) in Caprivi, Kavango, Omusati, Oshana, Ohangwena and Oshikoto regions. In the end, the National Society exceeded the target in terms of coverage, thus reaching over 9,000 families instead of the target 4,000 due to the increasing needs. This was achieved by revising the original appeal budget in order to cover the additional costs. Complementary support was raised through local resource mobilisation efforts. For the duration of the operation, NRCS distributed relief items including blankets, mosquito nets, kitchen sets, plastic sheets, water purification sachets, water containers and tarpaulins as indicated in table 2 above.

Emergency health	
<b>Objective:</b> To reduce health risks, morbidity and mortality as a result of the emergency on the affected population through the provision of health promotion, preventive, community-level and public health care services to 4,000 households for six months.	
Expected results	Activities planned
Mortality and morbidity as a result of the emergency reduced in the target population and health services supported through a primary health care oriented programme.	<ul style="list-style-type: none"> <li>• Provide 20 volunteer modules of the cholera kits towards community-based activities at affected communities under the Ministry of Health (MoH).</li> <li>• Mitigate the effects of cholera by developing the capacity of provincial Red Cross Offices in active case-finding, correct preparation, use and distribution of oral rehydration solution (ORS), and in surveillance.</li> <li>• Support the Government-organized mass vaccination campaign through social mobilisation activities and/or independent monitoring in coordination with MoH/WHO/UNICEF.</li> <li>• Pre-position additional supplies such as cholera kits and ORS sachets as a contingency stock for up to 10,000 persons.</li> <li>• Train volunteers in target branches on community-based health and First Aid (CBHFA) and on Epidemic Control for Volunteers training packages, with emphasis on malaria and water-borne illnesses.</li> </ul>
The scope and quality of the NS involved in health and care services are improved.	<ul style="list-style-type: none"> <li>• Train 150 community-based volunteers on health promotion.</li> <li>• Sustain health promotion campaigns within the affected population, focusing on malaria and water-borne diseases targeting 4,000 households in affected areas.</li> <li>• Distribute information, education and communication (IEC) materials for health education and hygiene promotion campaigns (such as posters, flyers).</li> <li>• Support reproductive health (RH) and sexual gender-based violence (SGBV) activities including protection of women, girls and children.</li> <li>• Train 50 volunteers on emergency health within the next six months.</li> </ul>

**Impact:**

During the initial stage of the operation, NRCS mobilised and trained 78 NRCS volunteers in participatory hygiene and sanitation transformation (PHAST) methodology. Additional 204 volunteers were trained on community-based First Aid, gender-based violence and health in emergencies. The volunteers helped tirelessly and contributed to reducing the risk of communicable diseases in the relocation camps. Although there were no major disease outbreaks reported in the flood affected regions, some incidences of acute respiratory tract infection (ARI) and diarrhoea were reported especially in Lusese A and B relocation camps in the Caprivi region. The situation was promptly contained with the assistance of the Ministry of Health and Social Services.

Water, sanitation, and hygiene promotion	
<b>Objective:</b> The risk of water-borne and water related diseases are reduced through the provision of safe water, adequate sanitation and hygiene promotion to 4,000 families in the Caprivi and Kavango regions.	
Expected results	Activities planned
Provide safe water to 4,000 families displaced by floods.	<ul style="list-style-type: none"> <li>• Distribute 1,000,000 water purification powder sachets.</li> <li>• Distribute 8,000 jerry cans to 4,000 households.</li> </ul>
Provide appropriate sanitation, including excreta disposal, solid waste disposal and drainage, to 4,000 families.	<ul style="list-style-type: none"> <li>• Assist in the construction of 500 latrines (in relocation camps).</li> <li>• Assist with the construction of 235 temporary bathing shelters (in relocation camps).</li> <li>• Assist with vector control and prevention measures.</li> <li>• Assist in waste disposal measures.</li> </ul>
Improve the health status of the population through hygiene promotion activities and behaviour change.	<ul style="list-style-type: none"> <li>• Train 150 community-based volunteers on hygiene promotion.</li> <li>• Conduct hygiene education and health promotion campaigns within the affected population, focusing on behaviour change and targeting a total of 4,000 households in the affected regions.</li> <li>• Provide IEC material on hygiene promotion (posters, flyers, educational material, etc).</li> </ul>

**Impact:**

The MSM20 ERU further trained the volunteers through a refresher course on hygiene promotion. Consequently, the volunteers helped the families in the relocation to ensure clean surroundings and proper use of clean and safe water, plus hygienic use of sanitation facilities and waste disposal. The improved access to clean and safe water thus contributed to a reduction of disease outbreaks in the relocation camps.

Alongside the hygiene promotion activities, the volunteers distributed information, education and communication (IEC) material on health and hygiene. The volunteers also conducted social mobilization campaigns using drama and display of banners with key hygiene promotion messages in the relocation camps.

**Table 3:** Indicates the distribution of water and sanitation relief items.

Regions	Water Purification Sachets	Jerry Cans	Number of pit latrines constructed	Number of bathing showers constructed
Caprivi	609,670	5,381	358	11
Kavango	233,500	3,136	97	38
Northern Regions (Omusati, Shana, Oshana, Ohangwena, Oshikoto)	135,000	321	16	10
<b>Totals</b>	<b>978,170</b>	<b>8,838</b>	<b>471</b>	<b>59</b>

### Challenges:

Although the relief distribution went well in most of the regions, transportation remained a challenge due to flooded roads. Most of the relocation camps were only accessible by boat or helicopter, which were not readily available. As the flood waters subsided, boats could not be used as a means of transport because of shallow water depth. Therefore, the relief teams were forced to walk long distances and this posed a further challenge to the operation in terms of effectiveness and efficiency in service delivery. Another challenge was the delay in the delivery of relief items from the regional warehouse in Harare due to some logistic regulations. Nevertheless, NRCS ensured prompt distribution upon arrival of the relief items.

### Logistics

**Objective:** To support the relief operations, delivering a range of relief items in line with the operational priorities.

Expected results	Activities planned
The operation has coordinated mobilization of relief goods; reception of all incoming goods; warehousing, centralized provision of standard vehicles as required; and coordinated and efficient dispatch of goods to the final distribution points.	<ul style="list-style-type: none"> <li>• Procuring and dispatching relief supplies and controlling supply movements from point of dispatch to end user.</li> <li>• Providing technical support in logistics, warehousing, and distribution and controlling supply movements.</li> <li>• Establishing appropriate warehouses and arranging transportation to distribution points.</li> </ul>

### Impact:

The relief items were dispatched from two sources, i.e. the regional office in Johannesburg and the warehouse in Harare. Although the Johannesburg consignment arrived on time, deliveries from Harare were delayed due to customs regulations. However, the government came in handy in speeding up the distribution by providing transport and hiring local resources to help.

### Communications – Advocacy and Public Information

**Objective:** To better profile and position the National Society as a leading organisation in disaster management in Namibia

Expected results	Activities planned
<ul style="list-style-type: none"> <li>• Increase the overall visibility and positioning of NRCS in strategic areas and create new resources to strengthen its general communication aspects.</li> <li>• Forster synergies and facilitate joint approaches by engaging different partners in the operation</li> </ul>	<ul style="list-style-type: none"> <li>• Dispatch press releases to the media about Red Cross response activities twice a month for three months.</li> <li>• Give interviews as necessary; organize radio/TV talks on response activities.</li> <li>• Share reports/ updates with all the partners, national and international.</li> <li>• Produce a response brochure/DVD after three months.</li> </ul>

### Impact:

In the lead-up to the launch of the emergency appeal, consultations were held with the Head of Zone, the Deputy Head of Zone, and the Disaster Management Coordinator on the effectiveness of sending communications team to Namibia. Some of the factors that were considered in making the decision included the lack of media coverage on the flood emergencies in Southern Africa as a direct influence of diverted media attention to the on-going crisis in the Madagascar government.

Another important factor was the absence of the NRCS communications manager, who had recently been hospitalised and was on sick leave. This meant that the National Society was not able to effectively initiate contact with the media or produce media content on its own. The Zone communications team, consisting of the communications manager, the external relations senior officer and a professional cameraman, was able to produce film footage, photographs and web stories on their one-week mission in Namibia.

In addition to film footage which could be used for the [Zambezi River Basin Initiative](#) project, and for the IFRC “Our World, Your Move” campaign, the team was able to edit together a ten-minute b-roll specifically on the Namibia floods for distribution to the media. This b-roll<sup>1</sup> was hand-delivered to the Associated Press offices on Saturday, 28 March 2009. This meant that the press agency was able to distribute it over the weekend, and it was used by international media, including BBC and CNN. The b-roll was distributed to other media organizations, both national, and international in the following week, which resulted in increased pick-up of the story.

In total, approximately 300 still photographs were taken on the trip. These have been used on both the IFRC and NRCS web sites, as well as distributed to news organizations including the Associated Press and BBC. A daily diary was uploaded to the IFRC web site. Subsequently, two web stories (featuring profiles of beneficiaries) have also been published. Both the diary and the web stories have also been distributed via the Reuters Foundation ReliefWeb and AlertNet.

## Conclusion

The 2009 flood disaster happened at a time when households in the north and north eastern regions of Namibia were still dealing with the aftermath of the 2008 flood disaster. Although there was some form of preparedness, the experiences of the 2009 floods provided an opportunity for further strengthening the National Society’s disaster preparedness, response and early warning systems.

Despite all the challenges, there are lesson learnt that should be considered in developing capacity in disaster response, as outlined below;

- The need for national and regional emergency contingency plans;
- The need to strengthen coordination mechanisms at all levels i.e. with the government, UN agencies and other international organisations;
- The need to further increase capacity on search and rescue activities;
- To focus on the increased vulnerability to food insecurity among the affected communities.

The recurrent flood disaster reinforces the need for an integrated approach by all stakeholders to implement a sustainable recovery process and mitigation measures to reduce the impact of future flood disasters. The key strategy is to create community or household resilience towards disasters. Failure to do so will imply that these households will remain vulnerable to recurrent floods.

The Zambezi River Basin Initiative launched by IFRC regional office in August 2009, provide an ideal platform for NRCS to address these challenges. All efforts will be made to increase capacity so that both the National Society and the community will be better positioned to respond in case of a floods disaster.

## Recommendations:

- NRCS realised that the limited capacity on disaster preparedness at branch level could have contributed to the delays in response. Therefore, NRCS will ensure strengthening of its structures through a branch development programme supported by the IFRC, through the Zambezi River Basin Initiative. In addition, the Regional Disaster Risk Management Committees will be trained on relevant curriculum as well as reviewing and updating the inter-agency contingency plan. Crucially, NRCS will engage communities by establishing functional community-based early warning systems (through traditional and modern early warning systems).
- There is a need to further strengthen disaster risk reduction activities in order to increase community resilience to the recurrent disasters; this initiative requires long-term support from partners.
- NRCS will introduce flood recovery and rehabilitation activities to the affected households, after closing the operation.

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<sup>1</sup> B-roll is a non-edited section of video, without having been made into a news piece

- Another area for improvement is communication during disasters in order to increase the Red Cross visibility.
- The flood disaster response requires an integrated approach by all stakeholders to facilitate a holistic service delivery. Therefore, there is a need to improve on coordination.

**[<Final financial report below and contact details below; click here to return to the title page>](#)**

### 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 the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable.

The International Federation's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The International Federation's work is guided by [Strategy 2020](#) which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.

### Contact information

**For further information specifically related to this operation please contact:**

- **In Namibia:** Dorkas Kepembe-Haiduwa; Secretary General, Email: [secgen@redcross.org.na](mailto:secgen@redcross.org.na); Phone: Tel: +264.61.235.216; Fax: 264.61.228.949
- **In IFRC Southern Africa Region: Disaster Management Unit:** Farid Aiywar; Disaster Management Coordinator; Email: [farid.aiywar@ifrc.org](mailto:farid.aiywar@ifrc.org); Phone: Mobile: +27.83.440.0564, Tel: +27.11.303.9700; +27.11.303.9721; Fax: +27.11.884.3809; +27.11.884.0230

**For Pledges towards this floods operation:**

- **In Southern Africa Zone:** Laurean Rugambwa; Resource Mobilisation Coordinator, Email: [zonerm.southafrica@ifrc.org](mailto:zonerm.southafrica@ifrc.org); Phone: Tel: +27.11.303.9700, +27.11.303.9772; Fax: +27.11.884.3809; +27.11.884.0230

**For Media enquiries:**

- **In Southern Africa Zone:** Matthew Cochrane; Communication Coordinator, Email [matthew.cochrane@ifrc.org](mailto:matthew.cochrane@ifrc.org); Phone: Tel: +27.11.303.9700; Mobile: +27.83.395.5266; Fax: +27.11.884.3809; +27.11.884.0230

**For Performance and Accountability (Planning, Monitoring, Evaluation and Reporting) enquiries:**

- **In Southern Africa Zone:** Theresa Takavarasha; Email [terrie.takavarasha@ifrc.org](mailto:terrie.takavarasha@ifrc.org); Phone: Tel +27.11.303.9700; Mobile: +27.83.413.3061; Fax: +27.11.884.3809; +27.11.884.0230

**For mobilization of relief items and Logistics inquiries:**

- Regional Logistic Unit in Dubai; Peter Gleniste; Regional Logistics Coordinator; Email: [peter.gleniste@ifrc.org](mailto:peter.gleniste@ifrc.org); Phone: Tel: +971 4883 3887

# International Federation of Red Cross and Red Crescent Societies

MDRNA004 - Namibia - Floods

Interim Final Financial Report

Selected Parameters	
Reporting Timeframe	2009/03-2009/12
Budget Timeframe	2009/01-2009/12
Appeal	MDRNA004
Budget	APPEAL

All figures are in Swiss Francs (CHF)

## I. Consolidated Response to Appeal

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
<b>A. Budget</b>	<b>2,121,518</b>					<b>2,121,518</b>
<b>B. Opening Balance</b>	<b>0</b>					<b>0</b>
<b>Income</b>						
<u>Cash contributions</u>						
American Red Cross	53,328					53,328
British Red Cross	67,670					67,670
Canadian Red Cross (from Canadian Government)	69,004					69,004
Danish Red Cross	1,592					1,592
Finnish Red Cross	45,620					45,620
Italian Govt Bilateral Emergency Fund	452,012					452,012
Japanese Red Cross	49,330					49,330
Monaco Red Cross	15,072					15,072
Netherlands Red Cross	151,492					151,492
South Africa - Private Donors	6,772					6,772
Spanish Red Cross	9,809					9,809
Sweden Red Cross (from Swedish Government)	281,746					281,746
VERF/WHO Voluntary Emergency Relief	2,000					2,000
<b>C1. Cash contributions</b>	<b>1,205,447</b>					<b>1,205,447</b>
<u>Outstanding pledges (Revalued)</u>						
USAID	310,238					310,238
<b>C2. Outstanding pledges (Revalued)</b>	<b>310,238</b>					<b>310,238</b>
<u>Inkind Goods &amp; Transport</u>						
British Red Cross	357,922					357,922
Danish Red Cross	26,844					26,844
Spanish Red Cross	150,914					150,914
<b>C3. Inkind Goods &amp; Transport</b>	<b>535,680</b>					<b>535,680</b>
<b>C. Total Income = SUM(C1..C5)</b>	<b>2,051,364</b>					<b>2,051,364</b>
<b>D. Total Funding = B + C</b>	<b>2,051,364</b>					<b>2,051,364</b>
<b>Appeal Coverage</b>	<b>97%</b>					<b>97%</b>

## II. Balance of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
<b>B. Opening Balance</b>	<b>0</b>					<b>0</b>
<b>C. Income</b>	<b>2,051,364</b>					<b>2,051,364</b>
<b>E. Expenditure</b>	<b>-2,036,053</b>					<b>-2,036,053</b>
<b>F. Closing Balance = (B + C + E)</b>	<b>15,311</b>					<b>15,311</b>

International Federation of Red Cross and Red Crescent Societies

MDRNA004 - Namibia - Floods

Interim Final Financial Report

Selected Parameters	
Reporting Timeframe	2009/03-2009/12
Budget Timeframe	2009/01-2009/12
Appeal	MDRNA004
Budget	APPEAL

All figures are in Swiss Francs (CHF)

### III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A		B					A - B	
<b>BUDGET (C)</b>	<b>2,121,518</b>						<b>2,121,518</b>	
<b>Supplies</b>								
Shelter - Relief	389,954	386,046					386,046	3,908
Construction Materials		13,458					13,458	-13,458
Clothing & textiles	57,580	69,275					69,275	-11,695
Water & Sanitation	737,289	117,731					117,731	619,558
Medical & First Aid	20,000	17,461					17,461	2,539
Teaching Materials	7,692							7,692
Utensils & Tools	145,240	155,945					155,945	-10,705
Other Supplies & Services	84,480	57,427					57,427	27,053
ERU		509,134					509,134	-509,134
<b>Total Supplies</b>	<b>1,442,235</b>	<b>1,326,478</b>					<b>1,326,478</b>	<b>115,756</b>
<b>Land, vehicles &amp; equipment</b>								
Office/Household Furniture & Equipm.		1,769					1,769	-1,769
<b>Total Land, vehicles &amp; equipment</b>		<b>1,769</b>					<b>1,769</b>	<b>-1,769</b>
<b>Transport &amp; Storage</b>								
Storage	105,600	23,053					23,053	82,547
Distribution & Monitoring		86,036					86,036	-86,036
Transport & Vehicle Costs	130,000	79,111					79,111	50,889
<b>Total Transport &amp; Storage</b>	<b>235,600</b>	<b>188,200</b>					<b>188,200</b>	<b>47,400</b>
<b>Personnel</b>								
International Staff	69,954	125,464					125,464	-55,510
Regionally Deployed Staff	114,346	4,071					4,071	110,275
National Staff		3,496					3,496	-3,496
National Society Staff		40,120					40,120	-40,120
Consultants		30,450					30,450	-30,450
<b>Total Personnel</b>	<b>184,300</b>	<b>203,601</b>					<b>203,601</b>	<b>-19,301</b>
<b>Workshops &amp; Training</b>								
Workshops & Training	8,000	10,960					10,960	-2,960
<b>Total Workshops &amp; Training</b>	<b>8,000</b>	<b>10,960</b>					<b>10,960</b>	<b>-2,960</b>
<b>General Expenditure</b>								
Travel	17,500	36,473					36,473	-18,973
Information & Public Relation	13,000	3,203					3,203	9,797
Office Costs	2,600	11,645					11,645	-9,045
Communications	4,120	4,952					4,952	-832
Professional Fees		1,190					1,190	-1,190
Financial Charges		14,196					14,196	-14,196
Other General Expenses	76,265	21,303					21,303	54,962
<b>Total General Expenditure</b>	<b>113,485</b>	<b>92,961</b>					<b>92,961</b>	<b>20,524</b>
<b>Programme Support</b>								
Program Support	137,899	116,343					116,343	21,556
<b>Total Programme Support</b>	<b>137,899</b>	<b>116,343</b>					<b>116,343</b>	<b>21,556</b>
<b>Services</b>								
Services & Recoveries		20,925					20,925	-20,925
Shared Services		7,997					7,997	-7,997
<b>Total Services</b>		<b>28,922</b>					<b>28,922</b>	<b>-28,922</b>
<b>Operational Provisions</b>								
Operational Provisions		66,819					66,819	-66,819
<b>Total Operational Provisions</b>		<b>66,819</b>					<b>66,819</b>	<b>-66,819</b>
<b>TOTAL EXPENDITURE (D)</b>	<b>2,121,518</b>	<b>2,036,053</b>					<b>2,036,053</b>	<b>85,465</b>
<b>VARIANCE (C - D)</b>		<b>85,465</b>					<b>85,465</b>	