

ANNUAL REPORT



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

CAMBODIA

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

Appeal No. CHF 01.31/2002; Appeal target: CHF 3,988,532; Appeal coverage: 57%

Overall analysis of the programme w

Throughout 2002 the Royal Government of Cambodia continued to make progress in the development of the country. Steps were taken to push ahead with reform in trade and investment, finance and administration, forestry and military demobilisation; the reforms are closely monitored through half-yearly government-donor consultations. Significant progress has also been made in drafting the National Poverty Reduction Strategy (2003-2005) - the final version is due for completion in the first half of 2003 - and in approving the government's Social Economic Development Plan (SEDPII). At the mid year donor/government consultative group meeting, US\$ 635 million was pledged to support the government budget; given that the annual budget amounts to estimated US\$ 687 million, the country continues to remain highly dependant on Official Development Assistance.

In February the first ever multi-party commune level elections were held. While results reaffirmed support for the ruling Cambodian People's Party (CPP won all but 23 of the country's 1,620 communes) local and foreign election monitors, who declared the process to be free and fair, applauded this step towards full democracy. Meanwhile throughout 2002 donors, non-governmental organisations (NGOs) and human rights groups, continued to call not only for strengthening the framework for free and fair national assembly elections in 2003, but also urged the government for greater respect of refugee law - concerning the arrival of refugees from Vietnam - and to take action against human trafficking, the burgeoning sex trade and to restart the stalled negotiations over alleged war crimes of the Khmer Rouge.

Despite progress made in its development, Cambodia continues to rank 130th out of 173 in the Human Development Index (UNDP, 2002). At least one third of the population of 11 million, 50 per cent of whom are below 18 years old, live below the basic needs poverty line (UNDP, 2002), 50 per cent of the under-fives are malnourished, and life expectancy at 55 is one of the poorest in Asia (Cambodia Human Development Report, 2002). While there are some indications that the HIV/AIDS epidemic may have been contained, Cambodia has the highest prevalence rate in the region (2.8 per cent among the adult population). The continued exploitation of, and discrimination towards, women, as well as the disproportionate impact of HIV/AIDS on women, are a major challenges for what amounts to 53 per cent of the population.

In 2002 the Federation delegation in Cambodia continued to provide support to Cambodian Red Cross (CRC). Though the essence of that support focused on organisational development, considerable support for the core programme areas of humanitarian values, disaster management and health was also provided. However, the Federation continued its strategy to shift from an operational delegation

to one that delivers advice in organisational development, harnesses support and coordinates partnerships for CRC. In line with this, the Federation's global 'change process', the delegation also continued to respond to humanitarian needs and to take a lead in advocacy and international relations.

Within the framework of an ambitious 2002 Federation Appeal – which was 58 per cent covered – a growing budget deficit, a considerable increase in bilateral support for CRC projects and significantly some serious management constraints within CRC, in mid 2002, the delegation began a steady process to not only scale back its costs but also to set in place the necessary steps to reflect on, and consolidate, its experiences. Working with CRC and the many bilateral and multilateral Red Cross Red Crescent partners, by late 2002 it was agreed that while support must continue for CRC projects – principally through bilateral partnerships - it would be necessary in 2003 to work with CRC on a focused and holistic organisational development process. The Federation and its partners will, therefore, in 2003, support CRC not only to drive its own change process but also help CRC position itself, as a leading civil society actor within a rapidly changing internal and external environment; an environment that is very different to the last decade of the 20th century. The building blocks for this change will be the substantial achievements of CRC, facilitated by the Federation, ICRC and Red Cross Red Crescent partners, which have taken place since its unification in 1994.

Disaster Response¹ w

In 2002 while CRC continued to play a significant role in the provision of humanitarian assistance (see below) the expanding role of the government - especially through the National Committee for Disaster Management (NCDM) - and some NGOs in disaster response is beginning to reshape the disaster management agenda. The Federation has continued to both support CRC in humanitarian response as well as to support and advocate for a more effective NCDM: "NCDM should have qualified and capable personnel with high skills" (draft National Poverty Reduction Strategy, 2002).

The European Commission Humanitarian Office (ECHO) supported disaster mitigation project, which was developed in direct response to the consecutive years of disastrous drought and flooding, was completed by the end of July. The project evaluation found that "as a result of the combination of the rice seed distribution and the rehabilitation of small scale infrastructure, improved food security is expected for the 2002/3 harvest in the target areas..." (Project Evaluation, September 2002). Moreover, valuable lessons have been learnt for future interventions; these are particularly relevant given the growing chronic food insecurity that is being experienced in Cambodia. The ECHO supported project has, through food-for-work, enabled the construction of 100 small-scale projects at community level (largely water resource management).

Meanwhile, CRC launched a national level appeal on 24 August in response to the flood and drought. CRC distributed 690 MT of rice to an estimated 28,000 families (averaging 25 kg per family). In addition to rice CRC also distributed a range of relief items including varying quantities of tinned fish, sarongs and mosquito nets. By late October 2002, CRC had not only begun to exhaust its stocks but it had fully distributed in-kind donations received from a number of embassies, the Cambodian royal family as well as from the public. While stocks last CRC will continue to provide humanitarian assistance into 2003. The Federation has continued to work with CRC, the government and the 'international community' to look at the alarming increase in household level food insecurity as well as the indications of increased chronic malnutrition.

In 2003 CRC will also look at enhancing its national level appeal process where a written document could support the CRC public request for assistance and regular narrative reports could strengthen reporting. Moreover, some reflection will be made on both the type and quantity of food and non-food items as well as the means of distribution.

¹ The Federation received no specific funds for this programme; however, some activities were funded through emergency response operations or through the disaster preparedness programme. Given the difficulties in accessing development funds for disaster response, this component will not be included in the 2003 country appeal and relevant activities will be incorporated in disaster preparedness.

Objective 1 CRC has an emergency action plan.***Achievements***

In July 2002 the Federation regional disaster management unit assisted CRC to develop a six-month action plan.

Constraints

No major constraints were faced in relation to this objective.

Objective 2 CRC is prepared for emergencies***Achievements***

Stockpiling: As was reported in 2002 programme updates, CRC was able to procure 825 basic household kits (essential relief items including shelter material, sleeping mats, clothing, water containers and mosquito nets). Funds for the procurement were provided through the Empress Shoken Fund and Latter Day Saint Charities organisation. The majority of kits were distributed during the 2002 drought and flood operations.

Preparedness for health-in-emergencies: The Federation supported a dengue fever prevention operation over a period of five months (see Health section below).

Constraints

Stockpiling was constrained by a lack of donor support.

Objective 3 CRC has a nationwide communications system***Achievements***

As a result of Federation funds carried forward from the 2001 flood relief operation, CRC were able to procure and install 36 VHF radio sets.

Constraints

A lack of funds for the Federation appeal meant that CRC were not able to achieve this objective.

Disaster Preparedness w

While Cambodia has made progress in taking a more coordinated approach to disaster response – through the emerging NCDM – disaster preparedness, mitigation and recovery are attracting more and more actors, but with little in the way of coordination. The Cambodian Red Cross, which has traditionally taken a lead role in humanitarian assistance (disaster response) and is gradually expanding its community based disaster preparedness programme (CBDP), has in 2002 continued to negotiate its role vis-à-vis the role of NCDM. The Federation has worked to harness resources for the CRC programme as well as to advocate not only for greater clarification of mandates but also for better coordination between the government, UN, NGOs, and international and national organisations.

The national society's CBDP programme, which was established in 1998, is the basis for CRC preparedness, response and recovery activities. The programme is based on training CRC volunteers in most aspects of disaster management and working through community-based structures at the village and commune level. In early 2002 the programme was evaluated with support from the International Institute for Disaster Risk Management (IDRM) and lessons learnt have been incorporated into the subsequent development of activities and a training manual. It is likely that while in 2003 the programme will be extended to further communes and provinces, a further mid year evaluation will be commissioned. The evaluation will look at the effectiveness of the CBDP

programme as well providing reflection on the appropriateness of the small-scale disaster mitigation projects (see objective 2 below).

The CRC Disaster Management Department (DMD), with support from the Federation and the International Institute for Disaster Risk Management (IDRM) completed a departmental strategic planning process in August. The strategic plan, which provides DMD with a tool, including an action plan, to chart the department's development over the next five years, will need to be revisited in 2003 in the context of the overall development of CRC.

Since departure of the Federation country DP delegate in late August 2002, technical support to CRC has been provided directly by the Federation regional delegation as well as from neighbouring national societies, such as Vietnam Red Cross. This approach, coordinated through the regional disaster management unit, makes greater use of regional resources and has provided an appropriate level of support.

While in 2002 activities were largely funded by the British government's Department for International Development (DFID), as well as the British Red Cross and European Commission (though an ECHO grant for food security), in 2003 CRC is expecting support through the Federation, British and Chinese (Hong Kong) Red Cross Societies as well as from the European Commission (DIPECHO). In addition funds will be provided from the American government through the Mekong River Commission (and American Red Cross) for work in flood early warning systems.

It is important to note that while for the purposes of the 2002 Appeal, and hence this report, planned activities were set out under three objectives, in reality objectives one and two (see below) should be merged as the same staff, volunteers and community groups basically carried out activities.

Objective 1 CRC has the capacity to effectively prepare for and respond to natural disasters.

Achievements

The Federation has provided technical support to enable CRC to train a total of 525 Red Cross volunteers in disaster management in seven provinces. While a total of 71 community-based disaster management committees have been established (all have been trained in participatory risk assessment), in early 2003 CRC will review the function of these committees and consider more effective ways of linking them with village development committees and commune councils. The Federation also supported CRC in facilitating a workshop to revise its disaster management training manual and subsequently to field test the manual with 14 CRC development officers from seven provinces.

The national society continued to maintain a capacity to respond to natural disasters. As mentioned above, CRC mobilised resources and staff to respond to the dengue fever outbreak (see Health section below), flood and drought in 2002.

Constraints

The development of DMD continued to be constrained by a lack of suitably qualified staff. Moreover, further training in project design, monitoring and evaluation as well as in report writing and proposal development is required. To address this need, a regionally supported tailor-made management course will be made available to key CRC staff in 2003 (though IDRM).

Objective 2 CRC has the capacity to implement natural disaster prevention and mitigation strategies at the community level.

Achievements

With support from the Federation, CRC has expanded its community based mitigation activities through an ECHO funded operation. Focusing on the impact of flood mitigation on food security,

CBDMC used participatory risk assessment and hazard mapping to identify and implement 100 small-scale mitigation projects. In 2003, small-scale mitigation projects ('micro-projects') are expected to be a significant component of CBDP.

Constraints

Further expansion of the programme was limited by the lack of donor support.

Objective 3 CRC is part of local, regional and global networks in disaster management.

Achievements

The DMD continued to participate in the South East Asia disaster management network. This has included regional meetings as well as representing the network at the Asia Pacific regional conference in Manila. In addition, the Federation supported CRC staff to attend a training of trainers course for logisticians in Geneva, as well as to participate in a Sphere training workshop in Hanoi. The national society also provided staff to co-facilitate a Federation disaster management and disaster response workshop in Myanmar and have organised exchange visits between the Red Cross societies of Vietnam and Thailand.

The CRC signed an agreement with the United Nations Centre for Regional Development (UNCRD) whereby CRC developed a case study on the sustainability of community based disaster management, which was presented at workshops in India and Japan.

At a national level in 2002, CRC faced some challenges in defining its role vis-à-vis the government's National Committee for Disaster Management. Meanwhile CRC have continued to participate in local level training programmes and facilitated training for a number of NGOs.

Constraints

Despite CRC having access to the regional Red Cross Red Crescent network as well as to a number of global forums, the national society has limited partnerships with international organisations and donors within Cambodia. This reflects a wider organisational challenge for CRC that will be addressed in 2003.

Humanitarian Values w

Although it received some support from the Federation and ICRC, the CRC communications department continues to be constrained by a lack of funds and suitably skilled staff. Moreover, the lack of communication and integration between CRC departments does not provide the most appropriate conditions. Steps to address staff training needs have continued, with the communication director and a fundraising officer participating in a regional communication workshop, and a public relations officer receiving a weeklong internship at the regional delegation. In addition, a volunteer Australian youth ambassador has been assigned to work with the department for 12 months. The ambassador will provide technical support and training in public relations.

Objective 1 CRC has a communications policy by the end of 2002.

Achievements

A draft communication policy was submitted to the Central Committee for consideration and will be approved in early 2003.

Constraints

There were no major constraints through the process of finalising the policy took longer than expected.

***Objective 2** CRC has staff with the appropriate skills to conduct information and dissemination activities.*

Achievements

Originally scheduled in April, a workshop to provide second level training for dissemination staff took place in November. Though this workshop was to be co-financed by ICRC and the Federation, ICRC covered the full costs. Twenty-six CRC staff (16 from the branches and 10 from headquarters), most already working as either first aid or disaster preparedness trainers, or involved in the landmine awareness project, were provided with a standardised teaching file. These ‘disseminators’, who are largely made up of branch development officers, will, by working through projects, provide information to people at the commune and district level in international humanitarian law, Red Cross principles and the role of CRC. They will also contribute to recruitment of new members and volunteers and will be key interlocutors with local government, NGOs and business.

The Federation, in December 2002, fully funded a three-day dissemination workshop for 32 newly recruited branch directors, staff and branch committee members.

Constraints

Delays in implementation were largely the result of staff having to focus more on fundraising and on the membership drive.

***Objective 3** CRC undertakes the systematic and standardized dissemination of Red Cross Red Crescent messages to defined target groups.*

Achievements

The national society has developed a teaching file for use by key staff. While this file is targeted for use by disseminators, work to provide standardised documents and presentations for use at all levels of communication will continue into 2003.

In 2002 funds were provided through the Federation that enabled CRC to support a number of television broadcasts. This included coverage (two live broadcasts) of the annual Red Cross and Red Crescent Day with a specific focus on the need to reduce discrimination against people living with HIV/AIDS. Additionally, a ‘round-table’ discussion on the CRC third General Assembly was organised; discussion focused on CRC statutes, the process for selection of Central Committee members, and the overall activities of the national society. Production of the CRC annual brochure as well as printing of dissemination material, including the 2003 calendar, took place in the last quarter of 2003.

Constraints

A lack of funding has meant that not all activities have been carried out as scheduled in 2002

Health and Care w

“The cycle of poverty, ill-health and high health care expenditure by households (11 per cent of household income) economically cripples Cambodian families” (draft National Poverty Reduction Strategy, 2002). Given the significant needs in Cambodia, improving health care at community level has continued to be a priority for CRC and the Federation in 2002. While the Federation 2002 objectives remained unaltered, the strategy to achieve those objectives changed significantly during the latter half of the year. Instead of taking direct responsibility to implement projects, as it was in the past, the Federation gradually established its role as an adviser and has coordinated various activities in health. Much effort has been invested to assist CRC develop a strategic direction for health and to build the capacity of the health and social welfare sub-department. However, this has been constrained by not being in-line with the broader organisational development process. In addition a

high number of bilateral health projects have been initiated by various partner national societies (PNS); the coordination of these initiatives remains a priority as well as a challenge.

The community-based first aid (CBFA) programme has been reviewed and the findings suggest that CBFA, without stronger links to regular activities, is not sustainable. In 2003, therefore, the CBFA training curriculum will be revised, whereby first aid training for Red Cross volunteers will be linked with community health activities.

The CRC HIV/AIDS project continues in partnership with Australian Red Cross. The Federation in late 2002 has secured funds from the OPEC Fund to scale up activities (US\$ 350,000 will be made available in Cambodia largely through the Australian Red Cross). In addition the French and Swedish Red Cross Societies have made applications to donors to support this sector. Funds expected through the first round of the Global Fund for HIV/AIDS, Tuberculosis and Malaria (GFATM) have yet to materialise.

Dengue Fever Outbreak 2002 (un-planned activity)

In view of a potential outbreak of dengue fever and dengue hemorrhagic fever (DHF), the National Center for Parasitology, Entomology and Malaria Control (CNM)/Ministry of Health (MoH) and CRC, with support from World Health Organisation (WHO) and the Federation, launched a nationwide operation. This included a mass application of mosquito larvicide (Temephos), community based clean-up activities and health education during the peak season of the outbreak (June to September 2002). The operation was funded through the provision of EUR 700,000 from ECHO.

While similar to previous campaigns managed by CRC and CNM since 1998, the 2002 operation was deemed to be a successful collaborative approach; lessons from the operation demonstrated the need to establish a more structured and longer-term programme of community-based prevention. As a result of this, CRC with the support of the Federation has developed a long-term prevention plan (complete with guidelines and training materials) that is being presented to key partners. In view of the potential outbreak of dengue in 2003, the Federation will be seeking financial support for this programme, with indications of some start up resources from New Zealand Red Cross.

The key lessons from 2002 can be summarised as follows:

- ✓ The CRC recognise its long-term prevention role as opposed to its short-term response role.
- ✓ That the DHF campaign is a good example of effective partnership.
- ✓ That a clear memorandum of understanding between CRC and the CNM/MoH is a necessity in order to initiate and maintain a long-term DHF prevention programme.

Community Based First Aid project

Objective 1 CRC has a well functioning health and social welfare sub-department.

Achievements

Following the arrival of a newly recruited health delegate in March 2002, activities have focused in two areas: developing a strategic direction in health planning for five years, and building capacity of the CRC health and social welfare sub-department.

Through a series of discussions, workshops and follow-up meetings involving the staff of CRC headquarters and representatives from CRC branches, a health strategic plan (2003-2007) has been developed. However, full implementation of the strategy will, in 2003, be dependent on wider changes in the organisational development of CRC. Moreover, as CRC capacity to implement health projects is limited, the building up of the capacity of the health and social welfare sub-department is also a necessity. The process initiated by the Federation includes streamlining the health unit, building staff skills, and improving coordination with other departments. The process will continue in 2003.

Constraints

Although in 2002 much has been achieved towards meeting the objectives, some fundamental lessons have been learnt. These include two important areas:

1. *Limited analysis in establishing the 2002 Federation health objectives.*

To establish a well functioning health and social welfare sub-department requires not only considerable time but also involves various activities, requires a coordinated approach in all sectors and is intrinsically linked to the overall development of the national society. In 2002 the overall pace of organisational development was slow, and coordination among different sectors (health, disaster management, communication, volunteer, youth) limited. Moreover, resource allocation to achieve the objective was not effectively planned or budgeted. The result has been, that while a health strategy has been put in place by CRC, the pace of development has outstripped the wider organisational development of the national society. This has led to somewhat of an impasse where further progress is dependant on wider organisational change.

2. *The challenge of capacity building in the context of increasing bilateral partnerships.*

In 2002 more than seven, largely bilateral, Red Cross Red Crescent partners have been providing assistance to CRC in the health sector. While the bulk of assistance is project based, the demands in management terms on the sub-department can at times undermine the broader process of capacity building. And, as the Federation delegation has continued its strategy of taking a more advisory and coordinating role, the demands on CRC in 2003 will continue to be a challenge.

In view of these lessons, the Federation annual appeal for 2003 sets out a very different strategy whereby capacity building of the health sub-department is addressed within the wider framework of organisational change. Added to this, resources from the multiple partners are harnessed for both project based and headquarters capacity building support.

Objective 2 CRC has a trained Red Cross volunteer network throughout Cambodia.

Achievements

This objective was to be achieved through the continuation of the CBFA programme. However, while 150 new volunteers were trained in three provinces/municipalities (Sihanoukville, Kep and Svay Rieng) during the DHF operation as well as through landmine awareness, following a review in 2002 recommendations were made that the CBFA programme not be continued in its current form. The key reason for this is that in order to retain trained volunteers, more substantial linkages must be established between volunteers and regular community activities. A sound Red Cross volunteer policy and an appropriate first aid training curriculum are also prerequisites for a sustainable volunteer network participating in health.

Constraints

Lessons learnt include:

- ✓ That in order to retain volunteers they must be involved in regular activities at community level.
- ✓ That links must be made between first aid training and community health activities.
- ✓ That there is a need for CRC to review its volunteer policy.

Community Based Primary Health Care

Objective CRC pilots a primary health care project in rural and urban settings.

Achievements

The community based primary health care (CBPHC) projects (2000-2002) both in rural and in urban settings, Chong Kal and Chamcar Mon respectively, were reviewed in 2002. While the rural project, which will continue into 2003 (supported on a bilateral basis by British Red Cross), has been

redesigned to ensure sustainability and enhanced linkages with the local health authorities, the urban project based in Phnom Penh has not been extended. The high number of CRC health initiatives, limited capacity of CRC, and the dependency on the Federation being highly operational, were three major factors in deciding the closure of the latter project.

Constraints

While full detail of the projects can be found in the respective evaluation and programme updates, important lessons learnt include the following:

- ✓ The pilot projects were overly dependent on operational management by the Federation and hence not altogether replicable given CRC capacity.
- ✓ The lack of an effective monitoring system resulted in a poor understanding of the project.
- ✓ The CRC volunteer policy should be reviewed in order to ensure greater complementarity with the Ministry of Health.

Blood Donor Recruitment

Objective CRC increases the amount of safe, non-remunerated blood donated in Cambodia.

Achievements

The Korean National Red Cross (KNRC) has initiated a bilateral project, initially for 12 months and with a possible two-year extension, with CRC in blood donor recruitment (BDR). This has involved technical support being provided by KNRC and a visit by CRC staff to South Korea. The project promotes blood donation and recruits voluntary and non-remunerated blood donors. Since CRC started working in blood donor recruitment, the number of blood donors in Cambodia has increased by 100 per cent.

Constraints

The important lessons learnt:

- ✓ That CRC must develop a long-term strategy in blood donor recruitment.
- ✓ That coordination between CRC, especially with the communications department, is crucial.
- ✓ That a clear memorandum of understanding between CRC and the National Blood Transfusion Centre (NBTC)/MoH is a necessity in order to maintain a long-term partnership between the two organisations.

Organisational Development w

The third General Assembly of CRC took place in August 2002. The existing Central Committee (governing board) was dissolved and a new one elected (for four years). Out of 18 candidates for the board, 15 were elected. The board selected, for a second term, the incumbent president, as well as the two vice-presidents. The present secretary general was also reappointed for a further term. The new board has an almost equal representation of men and women and is made up people from a range of backgrounds. In addition, the revised CRC five-year development plan (2002-2006) was formally adopted as was the financial report for the last four-years and changes to the statutes (including changes to membership fees).

Under leadership of the president, members of the board have been appointed as 'focal points' to work with the CRC management in a number of areas: youth, dissemination, disaster management, community development, health and information. In an additional move to strengthen organisational development, the Organisational Development Council has been re-established. The council will function through four working groups:

- ✓ Internal policy and structure
- ✓ Roles and responsibilities
- ✓ Cooperation, information and administration

✓ Capacity building

In the context of the growing volume of bilateral partnerships with CRC, the reduction in core funding for CRC, as well as the Federation 'change process', during a meeting of the council held in mid-November, the Federation was invited to work with CRC to consider the challenges in 2003. The meeting identified some key management challenges around internal and external coordination, human resource management, planning and budgeting, external competition, as well as internal ownership of key processes and policies (such as youth, volunteers, gender and branch development) and is likely to lead to a renewed strategic planning process. Initial steps to familiarise CRC staff with the concept of strategic planning were taken during the regional strategic planning workshop held in Phnom Penh during December.

It is on this basis and where national society partners will play a greater role in organisational development and capacity building, that the recruitment of an organisational development delegate was finalised by late 2002 (to begin in February 2003). The delegate will, through, inter alia, an inclusive strategic planning process, work with CRC and its partners to address the key organisational development issues (including those detailed below). While a key outcome is likely to be an integrated strategic plan demonstrating all inputs from domestic, external and private sector resources, among other priorities, it will also be necessary to assist CRC improve annual planning and to develop a budget system that both shows the full extent of CRC operations².

In November 2002, a member of the Federation delegation as well as a deputy secretary general from CRC attended a gender-training workshop in Italy (facilitated by the Federation Secretariat). It is expected that as part of the renewed strategic planning process, CRC will work to better mainstream gender into the organisation. With support from the British Red Cross, discussions are underway to implement a gender mainstreaming initiative in mid-2003. This project is expected to also provide valuable lessons for the work of the Red Cross Red Crescent in the South East Asia sub-region.

Objective 1 CRC implements its statutes with regard to the separation of governance and management at headquarters and branch level.

Achievements

The formal separation of governance and management was completed at all branches during early 2002 (provincial assemblies have now been held at all branches) and was finalised at the central level during CRC's third General Assembly in August.

Constraints

There were no serious constraints; however, it is recognised that there is a need to continuously support branches in their work to effectively separate management from governance. As staff changes are made there will continue to be a requirement to address this issue.

Objective 2 CRC has sufficient human resources with the appropriate skills to manage programmes and projects at the headquarters and branch level by December 2003.

Achievements

While a number of new staff have been recruited at branch level, this objective has faced some significant constraints (see below), the most notable of which are identifying appropriate staff and meeting the costs. However, as noted above, CRC, through the OD Council, is now committed to

² Although in 2002 CRC has been able to increase resource generation through membership and the overall volume of project-based funds has risen considerably (largely through bilateral arrangements), the lack of a CRC integrated planning and budgeting system does not enable CRC or its donors to understand the overall picture (for instance, projects funded by donors are not budgeted within a CRC budget) and hence CRC has continued to struggle to cover its core administrative budget and importantly salaries for 175 people.

looking both at staffing levels and staff performance. It is expected that this will be linked with the strategic planning process, where CRC will in 2003 be in a position to identify an appropriate group of core staff linked to a realistic budget and funding plan. There is also the likelihood that additional project staff will be more closely linked to one-off project funding (hence there will be a number of temporary staff). A key challenge continues to be the retention of professional staff that may otherwise find more lucrative contracts outside of the Red Cross.

In 2003 it is expected that funding of some branch and headquarters salaries will be linked to bilateral project support. A number of bilateral Red Cross partners have expressed a willingness to cover appropriate human resource costs (as opposed to establishing their own parallel staff structures), but only if there is a full transparency in planned income and expenditure.

Constraints

The lack of a sustainable source of funds to fully cover staff costs (at both headquarters and branch level) has led CRC to review the human resources situation in late 2002. Although efforts have been made by CRC to mobilise resources, including increasing its membership fees and training key staff in resource development, the national society has continued to be dependant on the Federation for salary support. However, due to the level of funding received by the Federation in 2002, reluctance of donors to pay core staff costs, as well as the need to work with CRC to look more critically at wider human resource issues, the Federation is unable to continue the high level of salary support. In 2003 the Federation will assist CRC review its human resource capacity and identify a formula for covering core costs and salaries (increasingly drawing on the considerable bilateral project inputs).

Objective 3 CRC has a standard policy, guidelines and tools for Red Cross volunteers

Achievements

The management of Red Cross volunteers continued to be a challenge in 2002 and little progress has been made towards the objective. With the renewed interest in youth in late 2002, discussions are underway to appoint a volunteer focal point in the CRC programme department. Currently each department maintains its own 'register' of volunteers with no coordinated approach.

Constraints

The lack of a focal point within CRC for volunteer management has been a constraint.

Objective 4 CRC has standardized financial procedures at headquarters and branches.

Achievements

The CRC financial procedures, which were drafted by KPMG in 2001, will be finalised in 2003 following the scheduled training workshop for branch administrative and finance officers. The six computers that will enable an upgrading of branch financial management systems have been procured and provided to the branches in December 2002.

Constraints

There were no major constraints though the implementation of activities has been delayed (see Financial Update section below for explanation).

Objective 5 CRC has a long-term strategy for branch and community development.

Achievements

Branch and Community Development Programme at four Northeast Provinces:

The Australian Red Cross (ARC) supported programme in the North Eastern provinces came to an end in December 2002. While details of the programme can be found in previous Federation programme updates, the series of evaluations indicate that the programme had a significant impact on both the local population, largely in terms of health, and on CRC branches. In late 2002, the

Federation facilitated discussions between CRC and American Red Cross to develop a primary health care programme focusing on water and sanitation that would build on the experiences of the ARC supported programme.

Branch and Community Development Programme at Phnom Penh Municipal Branch:

The programme evaluation report was finalised in June 2002 after discussion with branch staff about its content. As of May, the branch and community development programme at Phnom Penh municipal branch was completed and the Federation's role as facilitator in branch activities has come to an end.

Development of long-term strategy for branch and community development:

In May the Federation facilitated a two-day workshop for the development of a CRC branch and community development strategy. To date, the 'branch development strategy' describes what a CRC branch should look like in terms of structure and function; however, a strategy is yet to be completed. Further work on developing a strategy for branch development will be part of the ongoing Federation supported and facilitated organisational development process in 2003.

The national society distributed 'branch profile' forms (questionnaires) to all 24 provinces; 17 were returned. The questionnaire, which was used as a self-evaluation of branch committees, provided a valuable insight into branch capacities and will be useful should a more structured approach to branch development be taken in 2003.

Constraints

There have been no major constraints though the lack of ownership of the branch development strategy has meant little progress in this area.

Resource Development

Objective Cambodian Red Cross increases its self-reliance and sustainability.

Achievements

During 2002 the Federation has provided financial resources, including funds from the Finnish Red Cross and DFID, as well as training opportunities for CRC staff.

As a tool to raise awareness, and potentially funding through increased membership, 30,000 pamphlets promoting the work of CRC and defining membership categories were printed and distributed throughout the country. More than 126,000 new members were identified, generating an estimated US\$ 200,000 for CRC. The intention, in 2003, is to both retain the 126,000 and to identify new volunteers.

Resources for training provided a significant part of Federation support in 2002. The department director attended the International Fundraising Congress and Red Cross Red Crescent skill-share in the Netherlands. Additionally, funds were used to support two workshops that brought together CRC, the Federation, and representatives from the corporate sector who have direct experience in Cambodia of fundraising and development of small businesses. A fundraising consultant (from 'Venture' in the Philippines) also participated in the workshops that provided opportunities to headquarters and branch staff/governance to explore the subject. The workshops concluded by recommending further branch level training, development of a donor database, greater investment in fundraising personnel, maximizing the benefits of the brand (while being vigilant of the political reality in Cambodia), and fostering partnership with new businesses. In 2003 CRC intends to capitalize on training and to increase and diversify its funding base.

While four to five branches have held gala dinners, the number of donation boxes has increased, and some branches have leased out their office space, the level of income is not sufficient to cover core branch costs. Through a charity concert, fundraising letter to corporations, and the annual

flood/drought emergency appeal, CRC have been able to raise US\$ 90,000, US\$ 100,000 and US\$ 200,000 respectively.

The national society recognises that it does not necessarily have the skills to carry out countrywide income generation projects, though it is considering opportunities in key tourist destinations. Unfortunately in 2002 CRC closed its Phnom Penh shop as it made significant losses.

Constraints

There were no significant constraints.

School-Based Red Cross Youth

The Federation has, since March 2002, provided an Australian youth ambassador (March 2002 to March 2003) as well as resources from the Finnish Red Cross to support its work in youth. The primary focus of the Federation has been to build the overall capacity of CRC in its work with Cambodian youth. While a number of projects including HIV/AIDS and landmine awareness, as well as the French Red Cross funded bilateral project in Kampong Cham province, have made significant contributions to the work of youth, overall progress, especially in early 2002, has been limited. In late 2002 following a reduction in funds, CRC commissioned an evaluation of the programme (funded by Finnish Red Cross). The evaluation identified the need for greater commitment by CRC, a more integrated approach and clear policy and guidelines. The evaluation also identified the need for a youth focal point at headquarters as well as focal points within other departments and at the branch level. Following the evaluation there has been a renewed interest in the programme. By the end of the year new, experienced staff had been appointed and the policy and guidelines drafted for adoption in early 2003. Future development of the youth programme will be facilitated through the wider OD process.

In 2002 Red Cross youth did participate in a number of international youth exchange programmes. This included Kenyalang Youth Camp (Malaysia), Asia Pacific Youth Network (South Korea) and the International Youth Exchange (Japan). Cambodia Red Cross also received a four-year scholarship for a youth member to complete an undergraduate degree at the University of Hanseo, South Korea. Fifteen Japanese Red Cross youth members and two youth advisors visited Cambodia for an international exchange in August.

Objective 1 CRC has a Red Cross youth network throughout Cambodia.

Achievements

The school-based network has been extended to 18 provinces though, aside from a number of individual projects mentioned above, no formal activities have been identified. The programme evaluation has highlighted, inter alia, the need to develop a MoU with the Ministry of Youth and Sport, to better define the role of youth vis-à-vis Red Cross volunteers, and to integrate youth into CRC core programmes.

Constraints

The lack of commitment and lack of appropriate staff to manage youth activities was a significant constraint up to December 2002.

Objective 2 CRC has an independent governing structure for Red Cross youth.

Achievements

Following the evaluation in December 2002, it has been decided that there is no real need for an independent structure. Instead CRC youth will establish its own platform extending beyond the schools and better integrating with programmes. The MoU with the Ministry will help govern the functions of Red Cross youth at the school level.

Constraints

There were no constraints as this objective was deemed to be inappropriate.

Objective 3 Red Cross youth membership has improved the quality of health, hygiene and environment in their communities.

Achievements

Red Cross youth continue to be involved in the CRC HIV/AIDS (supported by Australian Red Cross) and landmine awareness programmes (supported by Finnish Red Cross and the Finnish government). Both projects are supported on a bilateral basis and are not part of the Federation annual appeal.

Constraints

There were no specific constraints.

Coordination and Management w

In line with the overall Federation 'change process' as well as with the changing nature of CRC partnerships and the delegation funding situation, the Federation delegation has continued to scale down and begun to give greater emphasis to capacity building, organisational development, coordination and representation. Additionally the Federation has continued to support humanitarian operations, including recovery from the floods in 2001, the 2002 dengue fever campaign and the 2002 flood and drought.

The Federation delegation has continued to make changes to its strategy of support to CRC and its relationships with PNS. Driven by the need to have a more effective model of support to the national society and by the wider Federation 'change process', there has continued to be a reduction in delegates and office staff (by late March 2003 only two delegates and five national staff remain). An integrated model where PNS provide the bulk of CRC programme support and the Federation takes a lead role in coordination and organisational development, is continuing to emerge. This model of support will include the flexibility to both facilitate multilateral support as well as to ensure timely support for humanitarian emergencies. The Federation will continue to ensure that the bilateral PNS are increasingly considered as a resource for the country and region and that they in-turn will have a better understanding of, and active involvement in, the regional Federation team. The regional delegation itself will have a more accountable role vis-à-vis providing direct support to CRC (coordinated with the country delegation).

The delegation in 2002 was constrained by a lack of funding for its core costs; however, given greater cost sharing by PNS as well as a much reduced delegation size, it is expected that a more fundable structure will be in place for 2003. Staff changes in 2002 included a change in the head of delegation as well as the end of contract for the disaster management delegate, branch development delegate and redundancy for the office manager and receptionist.

Objective 1 The Federation has a well functioning country delegation in Cambodia.

Achievements

The major results (as outlined in the Federation 2002 appeal) have been achieved although fewer programme updates than had been planned were published. The delegation has drafted the 2003 annual appeal, supported CRC humanitarian relief operations (see the disaster response and health sections) and has streamlined the delegation (see 'Federation Delegation' below).

Constraints

The production of further programme updates was constrained by workload as well as staff turnover; however, the delegation reporting continues to meet Federation minimum standards.

***Objective 2** The Red Cross Red Crescent Movement provides assistance to Cambodia, through its national society.*

Achievements

Cooperation and coordination between PNS, ICRC, CRC and the Federation continues to be one of the critical factors influencing the sustainable development of CRC. The emerging role of the Federation as the principle coordinator, as well as the more integrated approach being taken by a number of PNS has, in recent months, led to a renewed spirit of cooperation.

Following a mid-year partnership meeting in Phnom Penh there has been more regular coordination between the Phnom Penh based PNS (American, Australian, Danish, French and Swiss national societies) as well as continued coordination with partners based overseas (British, Finnish, Japanese, Korean, Norwegian, and Swedish national societies). By late 2002 monthly coordination meetings between CRC, the Federation and PNS had been reestablished in Phnom Penh, complemented by weekly and monthly meetings between the Federation and CRC.

The approach of a number of PNS (funding not only project based activities but also making contributions to organisational development at headquarters and branch level) has led to not only more effective project design but also to enhanced ownership and commitment by CRC and the Federation to these projects. It is expected that in 2003, where strategic planning should lead to a more critical review of how the extensive range of partnerships are coordinated within CRC, that further progress on the Cooperation Agreement Strategy (CAS) can be made. The following provides a summary of key developments with CRC Red Cross partners:

American Red Cross has continued to work with CRC and the Federation in developing a number of health projects. A project for an integrated approach to water and sanitation - which will build on the work of the Australian Red Cross - in the country's northeastern provinces will be implemented in 2003. The project will also focus on branch development and the capacity building of CRC at all levels. American Red Cross is also hoping to develop a partnership with USAID to support a project on the integrated management of child health. American Red Cross has also secured funds for CRC through the Mekong River Commission for the piloting of a flooding early warning system in 2003.

Australian Red Cross continued bilateral support to the CRC's HIV/AIDS programme and, through the Federation, support to the Northeast branch and community development programme. Support to the HIV/AIDS program is based on the CRC's Strategic Plan for HIV/AIDS Prevention and Support (2001-2005). Australian Red Cross supported all three major projects - uniformed services peer education, in-school youth (including Red Cross Youth) peer education, and Red Cross Volunteer community support for people living with HIV/AIDS (PLWHA). After evaluations of the uniformed services and in-school youth projects in 2002, the CRC will continue those projects in 2003 with other donor support. Australian Red Cross funds will have a greater focus on the Red Cross Volunteer community support project, while the in-country technical adviser will continue to support the whole programme. Senior management of Australian Red Cross made a visit to Cambodia during September.

British Red Cross has continued its support to the CRC health programme, though shifting to a bilateral arrangement, and is enhancing its support to disaster management through the Federation. It has also indicated continued support for the head of delegation and for organisational development in 2003.

Danish Red Cross (DRC) initiated the design phase of what is potentially a five-year commitment to health care. The integrated project includes providing significant support to the overall organisational development of CRC. DRC have established an office within the CRC compound and will, in the spirit of partnership, develop a cost-sharing model for administrative costs with the Federation. DRC will also support the salary of the new organisational development delegate.

Finnish Red Cross has, through a bilateral agreement, continued to work with CRC on the landmine awareness project. It is also providing support to CRC, through the Federation, for activities in the resource development, information and the youth projects.

French Red Cross (FRC), while continuing its bilateral programming, has submitted an application to the GFATM for HIV/AIDS treatment. The project, coordinated with CRC, will largely be implemented through the Ministry of Health, with FRC technical support. Additionally FRC have submitted an application to the European Commission for HIV/AIDS prevention and treatment.

Swiss Red Cross headquarters staff visited Cambodia to follow up work with the resettlement of fire victims in Anglong Kanang. It is considering providing further support to CRC.

Swedish Red Cross (SRC) have, in addition to supporting the Federation work in organisational development, made a commitment to work with CRC to provide programme support in HIV/AIDS. Together with the French Red Cross, it submitted an application for this programme to the European Commission. The Swedish RC desk officer visited twice between July and November.

Constraints

The growing number of partnerships, where partners will work through the CRC structure and not establish parallel mechanisms, has demonstrated the need for CRC to enhance its capacity to manage projects and to ensure effective coordination. With support from the Federation, steps will be taken not only to ensure more effective coordination of the partnerships but also that the benefits of the partnerships are maximised for the overall organisation.

Objective 3 *The Federation delegation has successfully advocated Strategy 2010 and the three strategic directions in Cambodia.*

Achievements

The Federation has continued to take an active role in all areas of international representation. In addition to making regular visits to diplomatic missions as well as to key partners such as ECHO, the delegation participated in the Consultative Group Meeting, a meeting of the Mekong River Commission, the country coordinating body of the GFATM, and has continued to work with the Social Fund for Cambodia. The delegation also hosted visits from inter alia, the Norwegian government (NORAD), USAID (including OFDA), the European Commission and Voluntary Service Overseas (a British NGO). A strong partnership has also developed between the Federation and WHO in health, with discussions underway to consider a joint application to donors for dengue fever prevention.

Additionally, the Federation has played a key coordinating role in the drought and flood response by working closely with the UN, NGOs and the Cambodian government. The Federation has been provided extensive press coverage in national media and has also been quoted in international radio and print media. The Federation and CRC continue to be involved in sectoral coordination meetings (health and disaster management).

The delegation, under its legal status agreement in Cambodia, hosted the Humanitarian Accountability Project. The field trial, which will look at accountability in the context of humanitarian assistance and builds on earlier work principally in Sierra Leone and Afghanistan, will be completed in February 2003. CRC is also actively involved in the initiative.

Constraints

Time constraints did not enable the continued participation of the Federation in the working group on demobilisation.

Objective 4 *The Cambodian Red Cross and the country delegation are an active part of the wider Federation.*

Achievements

The Federation 'change process', the changing functions of the regional delegation and the increasing importance of bilateral operations, has meant more tangible coordination within the Federation and the Movement as a whole. CRC is developing more direct links with the technical support units of the regional delegation, with complete participation in the regional disaster management network. While Cambodia is able to share its experience with national societies through workshops, such as in Macau (international humanitarian law) and in Italy (gender), it continues to benefit from visiting partners such as the Red Cross of North Korea (DPRK). In December CRC hosted a regional workshop on strategic planning.

Constraints

There are no significant constraints though a shortage of funding within CRC has meant that the Federation or PNS must cover all costs for external workshops. The amount of time spent by senior CRC managers out of the country has at times impacted on internal processes.

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All International Federation Operations seek to adhere to the Code of Conduct and are committed to the Humanitarian Charter and Minimum Standards in Disaster Response (SPHERE Project) in delivering assistance to the most vulnerable. For further information concerning Federation operations in this or other countries, please access the Federation website at <http://www.ifrc.org>

INTERNATIONAL FEDERATION OF RED CROSS AND RED CRESCENT SOCIETIES

| | |
|----------------|---|
| Interim report | |
| Annual report | X |
| Final report | |

Appeal No & title: 01.31/2002 Cambodia
Period: year 2002
Project(s): PKH000, 015, 020, 025, 030, 160, 301, 401
Currency: CHF

I - CONSOLIDATED RESPONSE TO APPEAL

| FUNDING | CASH | | KIND & SERVICES | | TOTAL INCOME |
|---|------------------|----------|-----------------|----------------|------------------|
| | Contributions | Comments | Goods/Services | Personnel | |
| Appeal budget | 3,988,532 | | | | |
| less | | | | | |
| Cash brought forward | -569,743 | | | | |
| TOTAL ASSISTANCE SOUGHT | 4,558,276 | | | | |
| Contributions from Donors | | | | | |
| American Govt.via American Red Cross (DGNUS) | 187,702 | | | | 187,702 |
| Australian Govt.via Australian RC#1 (DGNAU1) | 61,375 | | | | 61,375 |
| Belgian Red Cross (DNBE) | 39,754 | | | | 39,754 |
| British Red Cross # 1 (DNGB01) | 443,156 | | | | 443,156 |
| British Red Cross # 2 (DNGB02) | 124,824 | | | | 124,824 |
| British Red Cross # 3 (DNGB03) | 97,362 | | | | 97,362 |
| British Red Cross # 4 (DNGB04) | 11,405 | | | | 11,405 |
| British Red Cross (DNGB) | -354,350 | | | | -354,350 |
| DFID 3- British Government (DFID03) | 89,061 | | | | 89,061 |
| Donor - Capacity Building Fund (DCBF) | 118,265 | | | | 118,265 |
| Donor - Unidentified (D000) | 299,087 | | | | 299,087 |
| ECHO - CAMBODIA DPP STOCKS (DEKH02) | 83,506 | | | | 83,506 |
| ECHO - CAMBODIA DPP & FLOOD MITIGATI (DEKH) | 59,596 | | | | 59,596 |
| ECHO - CAMBODIA HOUSEHOLD KITS (DE2010) | -53,875 | | | | -53,875 |
| ECHO Cambodia KHM/210/2001/03004 (DEKH04) | 233,900 | | | | 233,900 |
| ECHO Cambodia KHM/210/2002/01001 (DEKH05) | 821,779 | | | | 821,779 |
| Finnish Govt.via Finnish Red Cross (DGNFI) | 19,322 | | | | 19,322 |
| Finnish Govt.via Fin.RC 3 (DGNFI3) | 76,060 | | | | 76,060 |
| Finnish Red Cross #02 (DNFI02) | 21,941 | | | | 21,941 |
| Finnish Red Cross (DNFI) | 27,639 | | | | 27,639 |
| Great Britain - Private Donors (DPGB) | 114 | | | | 114 |
| Japanese Red Cross (DNJP) | 9,468 | | | | 9,468 |
| New Zealand Red Cross #01 (DNNZ01) | 44,169 | | | | 44,169 |
| Norwegian Govt.via Norwegian Red Cro (DGNNO) | 34,999 | | | | 34,999 |
| Norwegian Red Cross # 1 (DNN001) | 28,800 | | | | 28,800 |
| Swedish Govt.via Swedish Red Cross # (DGNSE1) | 64,493 | | | | 64,493 |
| Swedish Govt.via Swedish Red Cross (DGNSE) | 1,247 | | | | 1,247 |
| Swedish Red Cross- #01 (DNSE01) | 23,374 | | | | 23,374 |
| AUSTRALIA | | | | 59,959 | 59,959 |
| FINLAND | | | | 27,269 | 27,269 |
| FRANCE | | | | 38,931 | 38,931 |
| GREAT BRITAIN | | | | 57,330 | 57,330 |
| TOTAL | 2,614,172 | | | 183,489 | 2,797,661 |

II - Balance of funds

| | |
|-------------------|------------|
| OPENING | -569,743 |
| CASH INCOME Rcv'd | 2,614,172 |
| CASH EXPENDITURE | -1,733,432 |
| | ----- |
| CASH BALANCE | 310,996 |

Appeal No & title: 01.31/2002 Cambodia

Period: year 2002

Project(s): PKH000, 015, 020, 025, 030, 160, 301, 401

Currency: CHF

III - Budget analysis / Breakdown of expenditures

| Description | APPEAL Budget | CASH Expenditures | KIND & SERVICES | | TOTAL Expenditures | Variance |
|-------------------------------------|------------------|----------------------|-----------------|----------------|-----------------------|------------------|
| | | | Goods/services | Personnel | | |
| <u>SUPPLIES</u> | | | | | | |
| Shelter & Construction | 186,970 | 132,311 | | | 132,311 | 54,659 |
| Clothing & Textiles | 122,378 | 16,958 | | | 16,958 | 105,420 |
| Food & Seeds | 3,500 | 50,797 | | | 50,797 | -47,297 |
| Water & sanitation | 217,648 | | | | | 217,648 |
| Medical & First Aid | 146,000 | 167,330 | | | 167,330 | -21,330 |
| Teaching materials | 112,144 | 37,724 | | | 37,724 | 74,420 |
| Utensils & Tools | 126,805 | | | | | 126,805 |
| Other relief supplies | 27,685 | 33,931 | | | 33,931 | -6,246 |
| Sub-Total | 943,129 | 439,051 | | | 439,051 | 504,078 |
| <u>CAPITAL EXPENSES</u> | | | | | | |
| Land & Buildings | | | | | | |
| Vehicles | 52,150 | 10,660 | | | 10,660 | 41,490 |
| Computers & Telecom equip. | 99,225 | 39,553 | | | 39,553 | 59,672 |
| Medical equipment | | | | | | |
| Other capital expenditures | 12,250 | -2,706 | | | -2,706 | 14,956 |
| Sub-Total | 163,625 | 47,508 | | | 47,508 | 116,117 |
| <u>TRANSPORT & STORAGE</u> | 67,895 | 194,059 | | | 194,059 | -126,164 |
| Sub-Total | 67,895 | 194,059 | | | 194,059 | -126,164 |
| <u>PERSONNEL</u> | | | | | | |
| Personnel (delegates) | 544,233 | 208,286 | | 183,489 | 391,775 | 152,457 |
| Personnel (national staff) | 541,621 | 408,310 | | | 408,310 | 133,311 |
| Sub-Total | 1,085,853 | 616,596 | | 183,489 | 800,085 | 285,768 |
| <u>GENERAL & ADMINISTRATION</u> | | | | | | |
| Assessment/Monitoring/experts | 62,125 | 20,176 | | | 20,176 | 41,949 |
| Travel & related expenses | 31,133 | 22,203 | | | 22,203 | 8,929 |
| Information expenses | 268,750 | 110,531 | | | 110,531 | 158,220 |
| Admin./general expenses | 282,231 | 117,543 | | | 117,543 | 164,688 |
| External workshops & Seminars | 645,053 | 267,976 | | | 267,976 | 377,077 |
| Sub-Total | 1,289,292 | 538,429 | | | 538,429 | 750,863 |
| <u>PROGRAMME SUPPORT</u> | | | | | | |
| Programme management | 268,947 | 40,329 | | | 40,329 | 228,618 |
| Technical services | 80,509 | 12,075 | | | 12,075 | 68,433 |
| Professional services | 89,283 | 13,396 | | | 13,396 | 75,887 |
| Sub-Total | 438,739 | 65,801 | | | 65,801 | 372,938 |
| Operational provisions | | -168,011 | | | -168,011 | 168,011 |
| Transfers to National Societies | | | | | | |
| TOTAL BUDGET | 3,988,532 | 1,733,432 | | 183,489 | 1,916,921 | 2,071,611 |