

EAST AFRICA, THE HORN, GREAT LAKES AND INDIAN OCEAN ISLANDS: REGIONAL PROGRAMMES

4 August 1999

programme no. 01.09/99

situation report no. 1

period covered: 1 January - 30 June 1999

Although serious cost cutbacks had to be made during the period, Regional programmes continued to be developed in fields as diverse as disaster preparedness, water and sanitation, reproductive health and institutional development, while support was maintained to a range of emergency relief operations.

The context

The Regional Delegation in Nairobi - which includes the Regional Logistics Centre - covers 15 countries in East Africa, the Horn of Africa, the Great Lakes region and the Indian Ocean Islands. The majority are amongst the world's poorest states: the highest national average *per capita* income being USD 280 and the lowest USD 100. Together they are home to more than 235 million people.

As a result of endemic conflict, poverty and natural disasters, tens of thousands continue to suffer, whilst many more remain vulnerable. Shifting weather patterns, widely believed to have been induced by the El Niño phenomenon, have brought additional problems such as waterborne diseases and an emerging cholera threat. In addition the lack of food security and basic education in many parts of the region will exacerbate the general unrest, violence and conflict.

Red Cross and Red Crescent National Societies have responded to the crises in terms of relief, but emergency action alone will not resolve the enduring problems of disaster victims. Ongoing community development and strategic disaster preparedness are necessary.

Latest events

In contrast to 1998 when El Niño and its after effects dominated the Region, the principal focus during this reporting period is again on the effects of conflict on populations. The on-going fighting in the Congo and the threat of proliferation to surrounding countries has dominated the headlines. The escalation of the war between Eritrea and Ethiopia is having far reaching consequences for several countries in the Horn of Africa. Natural disasters have also occurred, but largely as a cyclic recurrence of events rather than new incidents.

In **Burundi** the UN embargo was lifted, although any impact on the local economy will take a long time to filter down to the most vulnerable. The Arusha peace talks have resumed, as has an escalation of rebel activity around the capital, Bujumbura, and the border areas with Tanzania in the south.

The **Democratic Republic of Congo** is involved in peace negotiations and an accord has been signed by all parties except the rebel groups. The continued unrest has produced an increase in population movements over the border to Tanzania and Zambia. In the Bas-Congo region new refugees arrived fleeing the conflict in Angola. Vast areas of the DR Congo remain out of bounds for the Federation as the security situation is still too volatile.

Eritrea has been embroiled in a border war with Ethiopia. Mediation by the Organisation of African Unity has to date proved fruitless, although a new initiative has just begun with both sides agreeing to talk. Should the conflict continue there is the threat of a large scale complex emergency developing. A new Federation Country Representative has been assigned to Eritrea for a two year period.

Ethiopia is fighting Eritrea and is waging a campaign in areas of Somalia as well. Closer to home the *belg* (secondary) rains have failed again and, following a poor *meher* (primary) growing season, have left nearly 4 million people at risk of famine. The situation is unlikely to ease until December when the next harvest is due, prompting emergency appeals from World Food Programme and the Federation.

The **Indian Ocean Islands** and **Djibouti** continue to suffer from a lack of funding by donors both from within and outside of the Movement, hampering in most cases their development as National Societies. In April, **Madagascar** suffered its first ever cholera outbreak which had been predicted in 1998 by the Regional Health delegate and for which some preparatory response training had been completed.

The weather patterns in **Kenya** have given cause for concern this year, with below average rainfall and the threat of a drought. Early warning systems are monitoring the situation and its likely impact on food security. There has already been limited government intervention. April saw several small scale cholera outbreaks in different parts of the country. The long term rehabilitation projects, set up in the wake of the bomb blast, received a massive boost with US\$ 3.5 million grants from USAID for education and mental health counselling.

In **Rwanda** the National Society is undergoing a complete overhaul of its structure, management and strategic plans which has dominated the first half of the year.

The nomadic people of **Somalia** are also experiencing drought and many are resorting to traditional coping mechanisms to deal with its effects. The security situation has remained difficult, obliging the Federation to maintain a supportive presence from outside the country while the National Society continues to function within.

Sudan has experienced a massive meningitis outbreak this year which affected some 17 states and led to a separate appeal to vaccinate over one million people in an emergency programme. The National Society has also continued its major decentralisation programme, ceding more autonomy to the state level.

Tanzania has seen a reversal in its plans to reduce its involvement with refugee, through voluntary repatriation and the closing of a camp, because of new influxes of people escaping the conflict in neighbouring DR Congo.

Tension in the northern and western areas of **Uganda** persists, with rebel groups operating both along and inside the borders, leading to social disruption and increased numbers of internally displaced. The National Society is finishing a large-scale restructuring programme which began in 1998.

Red Cross/Red Crescent action

Institutional and Resource Development - anglophone countries

Eritrea Red Cross Society: There is an on-going discussion with the Secretary General and the new Federation Representative on the need to strengthen the National Society to enable it to continue to provide vital humanitarian and social services, notwithstanding the fact that formal recognition of the Society by the Government is still awaited.

Ethiopian Red Cross Society: The ID delegate helped co-ordinate the June consultative meeting held between the National Society and its partners (the Participating National Societies, the Federation and the ICRC). The discussion clarified some of the issues required to standardise and finalise the development contract for the implementation of the Comprehensive Development Programme (CDP) of the Society (1999-2001)

Kenya Red Cross Society: The draft revised Constitution of the Kenya Red Cross Society (KRCS) was critically reviewed and a detailed commentary prepared to identify areas that require improvement, prior to its submission to the Joint Commission of the Federation and the ICRC.

The ID delegate provided technical guidance for, and participated in, the monthly meetings of the Restructuring Task Force of the KRCS. It is in this forum that the senior leadership of the NS discuss the key implementation strategies of the change process, including recruitment and selection of managers and staff with the required skills and competencies.

Somali Red Crescent Society: The ID delegate assisted in developing the Terms of Reference for the evaluation of the Society planned for mid-1999. Input from the ID delegate highlighted the need to adopt a more innovative and non-conventional approach, due to the unique and turbulent nature of the environment in which the Society operates. The evaluation is expected to be finalised by the end of July 1999.

Sudanese Red Crescent Society: Following the comprehensive Assessment Report by a team of external consultants produced in August 1998, which focused on the decentralisation process of the SRCS, launched in 1996, a critical review was made by the ID delegate and shared with the National Society. It indicated a need for a more broad based strategic planning exercise where the findings of the Consultants could be discussed in a wider forum, and the direction of the Society could be established through the participation of all concerned.

This was adopted by the National Society and a strategic planning workshop, co-facilitated by the Regional ID delegate, was conducted in Khartoum, 17 - 21 April. A Task Force, consisting of HQ and Branch leadership and management, has been established to finalise the strategic planning process. This will be followed by a consultative meeting with the Society's partners later this year.

Tanzania Red Cross Society: The ID delegate led the five person evaluation team on the Red Cross Refugee Operation (RRO) in Tanzania, in which more than 100,000 refugees from Rwanda, Burundi and the DR Congo are being assisted by the National Society and the Federation. Critical points that emerged include the need to revitalise and strengthen the NS's institutional development and capacity building process.

Uganda Red Cross Society: The ID delegate assisted in the co-ordination of the June consultative meeting held between the URCS and its partners (the PNSs, the Federation and the ICRC) leading to substantial funding support for the National Society's programmes, and general agreement on the partnership development contract.

Development of Regional/sub-Regional Strategic Plan 2000 - 2004

The ID delegate is the secretary for the regional Task Force established during the Regional Annual Planning Meeting in 1998. The Task Force was set up to look at options in promoting regional/sub-regional partnerships among the National Societies in the Region with reference to the

Kampala Declaration of the IVth Pan African Conference in 1996. A separate paper on the outputs from this meeting is available on request.

Institutional and Resource Development - francophone countries

Five countries in the francophone Region were prioritised in 1998 as having the greatest need of institutional and resource development: Burundi and Rwanda in the Great Lakes Region, Comoros and Madagascar in the Indian Ocean, and Djibouti.

Burundi Red Cross: The National Society was advised on the setting-up of Provincial Committee programmes and support was given on creating a commission for the revision of the Society's Constitution. Further help was given on the preparation of the report on the self-assessment workshop held in December 1998.

Rwanda Red Cross: Two phased missions of 30 days were made to the National Society to advise on the conduct of self-assessment meetings. A self-assessment Commission was then set up by the ID Delegate, comprising Directors and Head of Services of the National Society. Terms of Reference were drawn up and approved by the Secretary General and Head of Delegation.

Thereafter, 150 questionnaires were prepared and sent to the National Society leadership, volunteers and members; the government and prefecture authorities, UN Agencies, ONGs, PNSs in Rwanda and beneficiaries. A total of 78 questionnaires were returned. The results then formed the basis for a series of planning workshops.

Assessment workshops were organised in Kigali, Butare, Gisenyi and Kibungo and covered Red Cross history, a SWOT analysis (strengths, weaknesses, opportunities and threats) in the prefectures and the National Society as a whole. This was based on the " Federation's Characteristics of a Well Functioning National Society". A full report on the outcome of the self-assessment is available on request.

The ID delegate also facilitated the Rwanda Task Force Strategic Planning Meeting in Kigali from 24-28 May 1999. The participants included the SG, 3 directors, 8 Heads of Services and 12 Prefectoral Secretaries from the National Society; the HoD, Finance, Logistics and Construction Delegates from the Federation; the HoD and Information and dissemination delegate from the ICRC; representatives from the Swedish, Norwegian and Spanish PNSs; the Senior Desk Officer and the Desk Officer for Rwanda and Burundi from Geneva. A full report is available.

Indian Ocean Islands - building service and response capacities

Comoros Red Crescent: The ID delegate advised the National Society on the organisation of self-assessment meetings, and specifically the creation of a development commission. The task was accomplished in collaboration with the country based French Red Cross bilateral development delegate. Further support was given later on the draft report on self-assessment prepared by the Development Commission.

The ID delegate also advised on the setting-up of the commission for the revision of the constitution and facilitated the Moheli National Council meeting on "Good Governance" where concrete steps towards revising the National Society's Constitution were discussed. Subsequently, the French Red Cross pledged to fund full time staff at the Headquarters in Moroni and three full time staff in each of the three Regional branches.

Madagascar Red Cross: The ID delegate facilitated capacity building meetings in the Toamasina, Fianarantsoa and Majanga provinces during a workshop organised by the National Society on cholera

prevention. The participants included District Branch chairpersons, vice-chairpersons, treasurers and heads of the district health commissions. In Majanga 21 people attended while in Toamasina and Fianarantsoa 26 provincial committee members were present. The topics covered were branch development, the running of a branch, volunteer management, fund-raising and reporting as well as knowledge of the Movement, its origin and principles.

The facilitation of self-assessment meetings at the provincial level could not be undertaken due to a lack of funds.

Djibouti Red Crescent: A familiarisation visit was made to meet the Secretary General, the National Executive Committee and Government authorities. Advice was given on the development programme preparation and the budget.

Seychelles Red Cross: The planned activities of organising training in Community Based First Aid, water and sanitation, hygiene promotion, reproductive health (also for Comoros, Madagascar, Seychelles, Mauritius and Djibouti) were not undertaken due to a lack of funding.

Building Disaster Response Capacities

Outline of relief operations

The first half of 1999, in emergency response terms, was driven by the ongoing conflict in the DR Congo and the destabilisation of the region arising from it. Full reports on the assessments outlined below may be obtained on request.

Tanzania: In early January, the Lugufu refugee camp in Tanzania accommodated roughly 12,000 Congolese - 25,000 having been repatriated in the previous year. With the renewal of hostilities in DRC however, Lugufu once again began receiving new arrivals. The Regional Relief Delegate observed the UNHCR reception and medical screening of new arrivals in Kigoma from across Lake Tanganyika, and helped manage the influx in the Lugufu camp. At that point, more than a thousand people a day were arriving and the camp is now beyond its maximum capacity at 59,000 refugees. All infrastructure and logistics services are strained and being closely monitored.

Democratic Republic of Congo: In mid-February, a joint mission was undertaken by the Regional Relief and Watsan Delegates. As a result of renewed hostilities between the government and UNITA forces in northern Angola, refugees poured across the south-eastern border of the DR Congo into the province of Bas Congo. This region had been the scene of intense internal conflict only months before which saw the burning of agricultural fields and left the population hard hit in terms of food security. Through its network of outpatient clinics and dispensaries in the province, the Federation and DR Congo RC were well positioned to monitor this influx and provide immediate relief. A transit facility was established by the DR Congo RC and Regional delegates in the border town of Songololo.

Zambia: In late March, the Regional Relief Delegate assisted the Zambian Red Cross Society in taking the lead role in coping with an influx from the DR Congo of 20,000 Congolese refugees. Many of the refugees had been internally displaced and on the move since August 1998, when the conflict erupted. As a result of their poor physical condition on arrival in Zambia, a temporary transit facility was established in the border town of Kaputa. The construction of a new camp in Mporokosa began immediately, with the Regional Relief Delegate heavily involved in the setting-up and managing of the facility, but also in liaising with the UNHCR and MSF representatives on a plan of action. This was later developed into an appeal with the ZRCS to assist the population at both sites.

The ZRCS and Relief Delegate were involved in all sectors of the operation: watsan, health and first aid, shelter, food and non-food. Heavy rains impeded the delivery of urgently need food and non-food items, but limited distributions were carried out. In early April, the first cases of cholera and measles appeared. While some deaths occurred, large outbreaks were contained through the combined efforts of several agencies. In the first week of May, the transfer operation to the Mporokosa camp site began.

Ethiopia: In late June, the Regional Relief Delegate carried out an assessment mission to the Amhara region of Ethiopia where severe drought conditions are being experienced for the third consecutive year. An Appeal has been launched, to provide assistance for 40,000 beneficiaries in the South Wollo zone. The operation will supplement the government's bulk food distributions with a blended fortified cereal for at risk individuals. In several months time, when the primary rains season is underway, seeds will be distributed to vulnerable families.

Watsan intervention in emergencies and disasters

The Federation and National Societies implement substantial water and sanitation projects in refugee camps in Tanzania (90,000 beneficiaries), Uganda (10,000 beneficiaries) and in displaced camps in Sudan (over 100,000 beneficiaries). In Burundi the Federation/ National Society is implementing a rural water supply rehabilitation project which benefits over 40,000 people.

The Regional Watsan delegate (RWS) developed the following emergency or disaster project proposals and procured funding for them:

- { In Tanzania for improving the water systems and health and hygiene in the camps of Lugufu, Kasulu and Kanazi
- { In Madagascar and Kenya for a cholera outbreak emergenc.
- { In the refugee camp at Mbarara in Uganda
- { In Bas-Congo (DR Congo) the RWS implemented an emergency WatSan programme to assist 10,000 Angolese refugees in co-operation with the DR Congo RC and the Country Delegation.

Watsan support for a rapid response capability for emergencies and disasters

The water and sanitation disaster equipment for a regional response is stored and maintained in the Regional Logistics Centre. The Regional Watsan Delegate purchased locally available equipment to restore the Specialised Water ERU to full strength. Much of the mass water and sanitation ERU kit has been sent to Rwanda for use in collaboration with UNICEF and part of the remainder has been used by the Tanzania and Uganda delegations in emergencies. While there is no longer a mass water and sanitation response capability, there is enough stock for training in Nairobi.

Twenty National Society and Federation Water and Sanitation staff were trained in both the practical and theoretical aspects of emergency water and sanitation response over a seven day period in June. The participants came from throughout the region - Kenya, DR Congo, Ethiopia, Tanzania, Sudan, Burundi, and Uganda.

The RWS delegated developed and maintains an informal database of National Society water and sanitation ERU professionals.

Disaster Preparedness

The Regional Delegation DP programme has continued to work with all the National Societies in the Region but more closely with those of Kenya, Sudan, Tanzania and Uganda. These National societies identified DP as one of their central activities and some had earmarked funding for DP in 1999. They also clearly articulated their support needs from the RD Nairobi.

Ethiopian Red Cross Society: The DP delegate designed, prepared and facilitated the Ethiopian Red Cross Society Training of Trainers (ToT) course on Vulnerability Capacity Assessment (VCA) as a follow-up to the theory workshop conducted in December 1998. This course is a major input to the proposed changes in the National Society as VCA was chosen as the entry point to grassroots initiatives.

Kenya Red Cross Society: In January the DP delegate provided technical support to the preparation and facilitation of the KRCS Training of Trainers Course in Disaster Management. The course was one of three workshops funded by the Office for Disaster Assistance of the American Government (OFDA) through the American Red Cross Society. For the first time some 25 participants were drawn from the Government of Kenya and NGOs, in addition to Red Cross volunteers, at the invitation of the KRCS.

In May the DP delegate facilitated an ECHO funded workshop on disaster management training. Held in Kisumu, it was well attended by participants from Government ministries, NGOs and Red Cross officials.

The DP delegate participated in the evaluation of Disaster Preparedness, Branch and Youth programmes of the Kenya Red Cross, funded by the Swedish Red Cross.

Technical assistance was provided to the planning process for 1999 and development of the RCATs *curriculum* for the KRCS.

Sudan Red Crescent Society: The DP delegate facilitated two workshops in Disaster Preparedness in February in Khartoum for senior and middle management personnel from the Sudan Red Crescent states/branches. A follow up mission is planned to assist the National Society in developing a National Disaster Development plan. A separate mission report is available on request.

Tanzania Red Cross Society: The DP delegate facilitated the one-day American RC funded DP post-bomb blast workshop. He also discussed with TRCS officials the need for the Society to have its own disaster preparedness policy, based on that of the Federation.

Uganda Red Cross Society: In May the DP delegate facilitated a DP and co-ordination workshop led by the Minister of Disaster Preparedness and attended by over 50 representatives from various Ministries, NGOs, country UN agencies and URCS officials.

The DP programmes of the National Society were reviewed and a draft of a city disaster preparedness programme was agreed on in view of escalating bomb attacks. It was also agreed that the main areas to focus on were first aid and public awareness, including mass media educational messages.

Other achievements

The DP delegate served as a resource person in the Institutional Development Programme workshops of the Kenya Red Cross and the Somalia Red Crescent for the promotion of integrated programme support.

Integrated Health

Over the reporting period the Regional Reproductive Health Co-ordinator visited Tanzania on six occasions to provide technical support and monitoring to the activities listed below. Burundi, Somaliland, Sudan and Uganda were assisted with the implementation of their respective health programmes. The following was achieved:

Reproductive health refugee programme in Tanzania and support to the refugee affected population.

A maternity wing was constructed at Mtabila I camp in Kasulu to cater for an extension or the opening of Mtabila II. Emergency Obstetric Care equipment is being procured through European Community support. Quotations to renovate one of the health centres on Lake Tanganyika have been submitted to UNFPA. The grant will also provide emergency obstetric equipment.

Six days Emergency obstetric care (EOC) training was conducted from 11 to 17 April for 36 Clinical Officers and Nurse midwives drawn from the refugee camps of Lugufu, Mtabila I, Mtabila II, Muyovosi, Nyarugusu, Nduta, Mtendeli, Mkugwa, Kanembwa and also Lukole A and B in Ngara. Each camp sent 3 people to the course (two Tanzanians and one refugee). Maweni MOH Regional Hospital and Mgambo health centre sent their service providers. The target number to be trained was exceeded by 16.

EOC training for 20 service providers drawn from Maweni (Regional Hospital in Kigoma), Kasulu and Kibondo District Hospitals was set up for the next quarter.

Manual Vacuum Aspiration (MVA) training was conducted for 28 participants from 18 health facilities. The same NGOs that sent participants to the EOC sent participants to the MVA training course. MOH facilities at Maweni Regional Hospital, Kibondo District Hospital and Mgambo Health Centre also sent participants to the course.

Ten youths were trained for one week as trainers in peer education. They are now expected to pass on their knowledge in basic RH issues, puppetry, folk media and peer education to 64 more youths, drawn from all 10 camps. To date, with technical support from the Federation and consultants from Family Planning Private Sector programme, they have trained 34 youth peer educators.

Two youth centres are being constructed by the youths in Nyarugusu and Lugufu camps, largely on their own initiative. For the one in Lugufu the TRCS/Federation, with support from the Women's Commission for Refugee Women and Children, will provide the resources or building materials needed to complete the centre.

African Red Cross and Red Crescent Health Initiative (ARCHI)

The Regional Health Department co-ordinated the distribution and collection of the ARCHI questionnaires and implementation of the field assessments conducted in Burundi, Madagascar, Sudan, and Uganda. The assessment team comprised health experts from the four countries which were assessed, and the Regional Reproductive Health Co-ordinator (due to the lack of a Regional Health Delegate).

The RH delegate played a key role in the planning, organising and implementation of the ARCHI follow-up meeting held in Nairobi in June, to transfer ownership from the Federation to the National Societies and to chart the future direction of the health programmes in Africa.

Inter-Society secondment

The RH delegate facilitated a ten day attachment of two Health Programme Managers from the Somali Red Crescent to a clinic of the Family Planning Association of Kenya. This was to gain experience in STD client management, in preparation for launching a STD/HIV/AIDS programme in Somaliland and strengthening a similar programme under way in Somalia.

Developmental watsan activities linked to the Health Programme

Missions in support of the objectives, monitoring and evaluation strategies of the water and sanitation projects of the Federation/ National Society were made to: Burundi, DR Congo, Ethiopia, Tanzania and Uganda. Support has also been given to Sudan.

In addition the following has been achieved:

- { The development of stock, procurement and expenditure tracking systems for projects in the region has been advanced by the RWS especially in Tanzania , Burundi and Uganda.
- { A Federation/National Society water and sanitation strategy has been developed and promoted to Country Delegations, National Societies and donorst. Training in the strategy has been provided to National Society staff. Separate reports are available on request.
- { A Project proposal was drawn up and funding obtained, for the National Society of Burundi for a rural water supply rehabilitation project which will benefit 40,000 people.

Information and advocacy

Media

Nairobi is a media hub, with most major media from around the world represented. The Information Department maintains regular contact with leading media, and its media releases are sent to 53 major outlets. These include BBC, CNN, Reuters, Associated Press, Agence France Presse, IRIN, Voice of America, Germany's Deutsche Welle, ARD and ZDF, UK's The Times, Guardian, and Independent, New York Times, Los Angeles Times, Washington Post, and French, German, Dutch, Italian, Chinese and Spanish news agencies. Red Cross/Crescent concerns and activity presented in the reporting period included:

- { The mass movement of Congolese refugees from DR Congo to western Tanzania.
- { A serious outbreak of meningitis in Sudan and the expanding African meningitis belt.
- { Cholera throughout the region.
- { Relief for Burundi's displaced, the victims of continuing armed clashes and widespread killing.
- { Red Cross efforts to relieve the pressure of 80,000 refugees on the already troubled Bas Congo province, DR Congo.
- { The ongoing assistance for, and needs of, the Nairobi bomb blast victims.
- { World Red Cross and Red Crescent Day, and the launch of the RCRC Millennium Year. repared feature.
- { The first-ever outbreak of cholera on Madagascar.

Advocacy

World Water Day was marked by an appeal for a more equitable distribution of water and far greater efforts to prevent cholera in Africa. International radio/TV/print coverage was acquired using the example of Nairobi's Korogocho slum district where 150,000 people face abysmal public health problems and people are obliged to spend more than ten per cent of their income on buying water.

Donor profile

All donors are automatically highlighted in media activity, and in Federation publications. In the reporting period the support of ECHO, USAID, UN agencies, and Red Cross/Red Crescent donor societies was profiled.

Strengthening National Society capacity

Consultations were held with Kenya Red Cross, Uganda Red Cross, Ethiopian Red Cross, and Sudanese Red Crescent. Millennium media strategies were proposed for all National Societies. A visit was made to Kinshasa to assess the capacity and needs of the DR Congo Red Cross, and support given and needs defined for the Burundi Red Cross.

Regional newsletter

The second and third issues of *Focus*, the regional newsletter, were produced. *Focus* is distributed within the National Societies of the region and encourages an exchange of information and regional debate. It is also distributed to national and international media and world-wide to Participating National Societies and the donor community. Some 5,000 copies of the full-colour publication are produced in an English-language edition, and 2,000 copies in French. In Nairobi it is widely distributed among the diplomatic community, and can also be found in major hotels, congress venues, cultural centres etc. *For a free subscription please contact the Regional Delegation.*

Information products

A video profile produced for the Sudanese Red Crescent was launched in an English and an Arabic version. An 8-page publication profiling the work and new directions of the National Society was also published. Together the video and publication will play an important role in the re-profiling of the Sudanese Red Crescent.

Work continued on a regional video (due for completion in July), and various video news items and features were produced and broadcast, particularly through the European Broadcasting Union.

World Disasters Report 1999

A regional launch of the World Disasters Report was organised by Uganda Delegation in Kampala, and accompanied by a seminar at Makerere University with the theme of *Changing Environments and Epidemics*. RDN Information Department provided support. The two-day event attracted considerable media attention, both regional and international, and provided a major opportunity for advocacy.

Outstanding needs

Even though the RD Nairobi has made serious efforts to reduce its cost, the current level of funding is still insufficient to cover the revised budget until the end of the year. Besides overall management and reporting, additional funding will be required for the regional programmes of Information, Watsan, Relief, Integrated Health and capacity building for the Islands in the Indian Ocean.

External relations - Government/UN/NGOs/Media

The RD Nairobi maintains contacts with the Government, Embassies and High Commissions, UN agencies, NGOs, donors and media on its own behalf but also as the representative of the National Societies and Country delegations in the Region.

At the Kenyan Government level close relations have developed between the Watsan and Reproductive Health departments in disaster preparedness, particularly while the Federation is a recognised presence in supporting the KRCS.

As Nairobi is the Regional centre for the UN agencies, frequent meetings and consultations are held at Head of Regional Delegation and Programme delegate level with the counterparts from HCR, WFP, FAO, UNDP, UNFPA, and Habitat for information sharing.

The Federation was a key participant and sponsor of the "Disaster '99" conference in Nairobi. This was the first East African conference on disaster management, bringing together 250 business people, professionals in disaster response and management, government policy makers and insurance experts from Kenya, Uganda and Tanzania.

Contributions

See Annex 1 for details.

Conclusion

The RD Nairobi is continuing to adapt and develop its role in supporting the 15 National Societies, 7 Country Delegations and 3 Representatives in the Region. Throughout the first half of 1999, the RD concentrated on continually reducing its staff and costs to meet changing operational needs in the region, and providing more coherent regional development programme support. It has simultaneously backed up emergencies such as the Kenya and Madagascar cholera outbreaks and direct developmental needs in Eritrea and Kenya which, until recently, did not have any Federation country representation. Major emphasis is being placed on integrating the programme support provided by individual technical delegates, supporting the Regional Task Force in the hopes of promoting more local ownership of development processes and strengthening reporting from the region through the Regional Reporting function. Efforts continue to be placed on solidifying co-operation with the ICRC regional delegations in Nairobi and Pretoria (for Indian Ocean Islands) and the Nairobi based French, German, American, and Norwegian bilateral Red Cross offices to ensure efficient use of resources.

Peter Rees-Gildea
Director
Operations Funding and Reporting Department

Bekele Geleta
Director
Africa Department

This and other reports on Federation operations are available on the Federation's website: <http://www.ifrc.org>