

# Appeal 2004



## INDIAN OCEAN SUB-REGIONAL PROGRAMMES

Appeal no. 01.09/2004

The International Federation's mission is to improve the lives of vulnerable people by mobilizing the power of humanity. The Federation is the world's largest humanitarian organization, and its millions of volunteers are active in over 180 countries. All international assistance to support vulnerable communities seeks to adhere to the Code of Conduct and the Humanitarian Charter and Minimum Standards in Disaster Response, according to the SPHERE Project.

This document reflects a range of programmes and activities to be implemented in 2004, and the related funding requirements. These are based upon the broader, multi-year framework of the Federation's Project Planning Process (PPP). The PPP products are either available through hyperlinks in the text<sup>1</sup>, or can be requested through the respective regional department. For further information concerning programmes or operations in this or other countries or regions, please also access the Federation website at <http://www.ifrc.org>

*Click on programme title, by country or sub-region, or figures to go to the text or budget*

Programme title	2004 in CHF
<b>Strengthening the National Societies</b>	
Organizational Development <a href="#">[Comoros]</a> – <a href="#">[Madagascar]</a> – <a href="#">[Mauritius]</a> - <a href="#">[Seychelles]</a>	322,713
<b>Coordination, Cooperation, and Strategic Partnerships</b>	
Coordination and Implementation <a href="#">[Indian Ocean sub-region]</a>	232,866
<b>Total</b>	<b>555,579<sup>2</sup></b>

Please note that objectives, expected results, and activities associated with the Health and Care programme are included in the narrative of this appeal; the budget associated with these activities is integrated within other programme budgets.

[<Click here to go to the text for Comoros>](#)

[<Click here to go to the text for Madagascar>](#)

<sup>1</sup> Identified by blue in the text.

<sup>2</sup> USD 417,258 or EUR 357,631.

## **Sub-Regional Context**

The Indian Ocean sub-region is comprised of the four south western states of Comoros, Madagascar, Mauritius and Seychelles. The sub-region is very diverse in terms of politics, economics, demography and the general living conditions of the population.

Comoros remains the most politically unstable state with a continuing standoff between the administrative Presidents of the three islands and the Union President over how the country's resources are to be shared, which culminated into an unsuccessful coup attempt in 2003.

Stability is returning to Madagascar following the turbulence which devastated the country in 2002 immediately after the Presidential election in 2001. President Marc Ravalomanana's TIM<sup>3</sup> party has since established a firm grip on power but there are some concerns about arbitrary arrests and detention of members of the ousted AREMA party, whose leader Didier Ratsirarka lives in exile in France.

In Mauritius, the Coalition government of the MMM and the MSM<sup>4</sup> is still firmly in control. It is expected that premiership will pass from Sir Anerood Jungnauth to the deputy Prime Minister Paul Bérenger before the end of 2003. Some conservative elements in the Hindu community are opposed; they feel that their traditional predominance in government will be eroded when Mr. Bérenger, a white Mauritian, takes over.

In Seychelles, which has been a one-party state since 1991, the opposition SNP<sup>5</sup> is growing stronger, having won eleven of the 42 seats in the 2002 parliamentary elections.

Population figures range from 16.9 million in Madagascar to 82,500 in Seychelles. Mauritius, with a population of one million and a GDP of USD 4.2 billion is the most prosperous State when compared with Comoros (population 568,000) and a GDP of USD 200 million. GDP fell by 11.9% in Madagascar during the political crisis in 1992. In Seychelles, the figure rose by 1.5% in 2002 but debt service obligations and a current account deficit of USD 75 million remain a major barrier to growth.

The region is susceptible to natural disasters, particularly floods during the annual December to April cyclone season. Madagascar tends to be the worst affected as the cyclones which generally originate in the east of the Ocean frequently find landfall on Rodrigues, Mauritius and La Réunion (France) as they continue their path westwards. Serious deforestation in Madagascar compounds the effects, including massive landslides. The most recent devastation was caused by Cyclone Maanou which struck Madagascar in 2003 and Cyclone Dina which struck Mauritius and La Réunion in 2002. Heavy rain accompanying another cyclone in 1993 caused severe flooding on the island of Mohéli in Comoros. The Karthala volcano on the island of Mohéli which erupted in 1977 and 1991 experienced a high level of seismic activity in late 2003. The southern region of Madagascar also suffers from chronic famine and in 2003 it affected up to 100,000 people

Contrary to Mauritius and Seychelles which have well established health care systems and consequently don't suffer from a prevalence of transmissible diseases, including HIV/AIDS, the health conditions of a major section of the populations of Madagascar and Comoros are deplorable. Cholera and malaria are endemic and HIV/AIDS prevalence is growing. In rural areas of Madagascar, where most Malagasy live, only 3% have good sanitation and 10% have access to safe water. In Comoros some 82% of the population has access to basic healthcare but poor hygiene and the high number of inhabitants per square kilometer contributes to high levels of disease transmission.

The Indian Ocean Commission of which all four states are members is one of the main bodies that fosters regional co-operation. The main areas of activity include economics and trade, agriculture, fisheries, conservation of resources, education and law. Funding for many of the Commission's activities comes from the European Union. The four states are also members of COMESA<sup>6</sup> which aims to liberalize trade and to encourage co-operation in industry, agriculture, transport and communications.

---

<sup>3</sup> TIM - Tiako-i-Madagasikara

<sup>4</sup> MMM - Mouvement militant mauricien ; MSM - Mouvement socialiste mauricien

<sup>5</sup> SNP - Seychelles National Party

<sup>6</sup> COMESA - Common Market for Eastern and Southern Africa

**Human Development Indicators at a glance**

	Comoros	Madagascar	Mauritius	Seychelles	Sub-Saharan Africa	World
Life Expectancy at birth (years)	59.8	52.6	71.3	72.7	48.7	66.9
Adult literacy rate (%age 15 and above), 2000	55.9	66.5	84.5	88.0	61.5	-
Adult literacy rate (female as % of male), 2000	77	81	-	-	77	-
Combined primary, secondary and tertiary gross enrollment ration (%), 1999	35	44	62	-	42	65
GDP per capita (PPP USD), 2000	1,588	840	10,017	12,508	1,690	7,446
People living with HIV/AIDS, adults (% age 15-49), 2001	-	0.29	0.10	-	9.0	1.2

Source: UNDP Human Development Report 2003

PPP in this context refers to Purchasing Power Parity

*Click below to access the narrative text for:*

[<Comoros, page 4>](#)   [<Madagascar, page 10>](#)   [<Mauritius, page 15>](#)

[<Seychelles, page 18>](#)   [<Indian Ocean sub-region, page 21>](#)

**Comoros**

[<Click here to return to title page>](#)

**National Context**

The Comoros Union is made up of three islands: Grand Comore, Anjouan and Mohéli. The total population of approximately 568,000 people lives in very dense communities (average 446 per sq. km on Anjouan) in the habitable area of the islands. Relations with France are central to foreign and economic policy. The Comorian franc is guaranteed by the French Treasury which makes Comoros a de facto member of the Franc zone. However tensions prevail over the issue of Mayotte, the fourth island in the Comoros archipelago which is a French dependent territory.



Comoros has a poor educational base and lacks a university. However enrollment rates in schools have improved with 50% of children enrolled in primary schools and 36% in secondary schools. A 1999 UNDP/World Bank report estimates that 34% of males and 48% of females were illiterate. Infant mortality rates have dropped below the average Sub-Saharan level, registering 82 per 1,000 live births in 1970. Large numbers of the population are constantly affected by malaria and cholera. The **Comoros Red Crescent Society** is a key actor in the areas of prevention and the main partner to the Ministry of Health in responding to cholera outbreaks.

The political standoff between the Union and island presidents over the control of the country’s revenue and security continued during 2003. International mediators fear that all avenues of negotiation have been explored with no solution. In July 2003 the African Union sent its third delegation in two years to mediate in the dispute but with little result. The IMF declared that the current ‘institutional disorder’ is likely to prevent it from implementing a new SMP in the foreseeable future and that it is becoming increasingly difficult to attract either multi or bilateral donors to the country. The International Francophone Organization (*L’organisation internationale de la francophonie-OIF*) which has been involved in mediation talks closed its office in Moroni.

At least two Comorian-registered ships are reported to be on a blacklist of 20 cargo vessels suspected of transporting equipment on behalf of al-Qaida terrorist groups. As such, the government’s agreement with a Greece-based shipping office for the sale of registration in the Comoros is having negative repercussions.

**Red Cross and Red Crescent Priorities**

**Movement<sup>7</sup> Context:**

The Comoros Red Crescent Society approved its Strategic Plan and elected a new Board at its General Assembly in March 2003. The main priority for the Federation will be to support the Board in the implementation of the Plan through the establishment of appropriate structures and systems. The French Red Cross Platform for Disaster Intervention (PIROI<sup>8</sup>) will continue to take the lead but on a decreasing scale in supporting Disaster Preparedness and Response particularly in the areas of cyclone and flood response. A bilateral programme in health prevention and hygiene promotion supported by the French Red Cross will continue, as will support by the Federation Eastern Africa Regional Delegation (Nairobi) in the area of HIV/AIDS. The ICRC will maintain its support to the dissemination programme and may consider a phasing out of its support to staff salaries within the next few years.

<sup>7</sup> ‘Movement’ refers to the International Red Cross and Red Crescent Movement

<sup>8</sup> PIROI – Plate-forme d’Intervention Régionale Océan Indien

**National Society Strategy/Programme Priorities:**

The major priority for the Comoros Red Crescent is to become a recognized member of the International Movement. The submission of the final version of the revised Statutes to the Movement's Joint Commission on Statutes will be an important step in this direction. The Comoros Red Crescent needs to develop its capacities and activities countrywide as well as to increase its visibility amongst other national societies<sup>9</sup> in the region and beyond; this will be developed through an increase in the number of regional exchange opportunities. Priorities set out in the Strategic Plan focus on the four core areas of Strategy 2010 as well as branch, youth and financial resource development. However, it is unlikely that the national society will make much progress in generating financial resources locally given the present political and economic environment.

**Strengthening the National Society**

**Health and Care**

*[<Click here to return to title page>](#)*

**Background and Achievement / Lessons to date**

The revitalization and development of the Health and Care activities of the Comoros Red Crescent started in October 2002 through the Cholera Outbreak to initiate a community health information programme focusing on prevention, management and control of cholera outbreaks at community level.

The national society has been running a school hygiene programme with support from the French Red Cross since 2000 to prevent parasitic diseases. Through this programme, 17 schools have been equipped with latrines between December 2001 and July 2003 and offered 8,500 school children with improved water and sanitation (WatSan) facilities. Capacity building efforts have been undertaken with support of the Federation Eastern Africa Regional Delegation to equip Comoros Red Crescent with the tools to implement ARCHI<sup>10</sup> 2010. The society subsequently embarked on the training of a network of coaches and volunteers who undertook community based prevention activities targeting 240 villages with 380,000 people as beneficiaries.

With financial and technical support from the Regional Delegation, the society trained 60 volunteers, from each of the three islands, on HIV/AIDS prevention in 2003. The volunteers embarked on a campaign to sensitize communities about the disease, and to fight stigma and discrimination surrounding people affected by the epidemic. A theatre play developed by the youth was performed in the twelve villages of the main Island as well as in Mohéli. However, HIV/AIDS prevalence is low (0.12 %).

The national society has also developed a five year HIV AIDS, malaria prevention and control strategic plan through funding from the Regional delegation to capitalize and further develop its volunteer network. The Comoros Government has made an application to the Global Fund on TB, HIV and Malaria for prevention and control of malaria and HIV and has identified the national society to administer the funds. These efforts are expected to positively consolidate the image of the young society and more importantly, improve the health of vulnerable people on the three islands.

**Goal: The health status of the most vulnerable communities in Comoros is improved.**

**Objective: Vulnerable communities are supported to address their public health needs (malaria, cholera, HIVAIDS) in a sustainable manner using the ARCHI strategy; volunteer management structures are developed to rapidly and effectively address public health needs in emergencies (preparedness and response).**

---

<sup>9</sup> Within this document, 'NS' may be used to abbreviate 'national society' or 'national societies'

<sup>10</sup> ARCHI – African Red Cross and Red Crescent Health Initiative 2010 builds on its strength: a Red Cross and Red Crescent presence in each of 53 countries in Africa and, in all, more than 2 million volunteers. The overall goal of ARCHI 2010 is to make a major difference in the health of vulnerable people in Africa. Refer to <http://www.ifrc.org/what/health/archi/>

## Indian Ocean sub-regional programmes; Annual Appeal no. 01.09/2004

### Expected results :

1. Health and care interventions (malaria, cholera and HIV/AIDS) have been scaled up within the ARCHI framework by 2007.
2. Integrated Health and Care Pilot projects (HIV/AIDS, WatSan and communicable diseases) have been initiated and expanded by 2005.
3. HIV/AIDS prevention programmes have been expanded including access to treatment to national society staff and volunteers.
4. Existing Strategic Partnerships at national (Ministry of Health, national AIDS control programme) and international levels (WHO, UNFPA, French cooperation, French Red Cross) have been strengthened and further developed to sustain health interventions.

<b>Programme title: The Comoros Red Crescent Society- Health and Care Programme</b>			
<b>Expected Results</b>	<b>Indicators to measure results</b>	<b>Risk/Assumptions</b>	<b>Activities planned to meet results</b>
1. Health and care interventions (Malaria, cholera and HIV/AIDS) scaled up within the ARCHI framework by 2007.	1.1 Comoros Red Crescent Society implementing expanded health initiatives using the ARCHI by 2007 1.2 Significant reduction in cholera outbreak and a 10% increase in blood donations.	NS and donors, staff and volunteers buy into the integrated approach.	1. Design and scale up sustainable gender balanced health and care programs through training of volunteers in addressing malaria, HIV/AIDS, water and sanitation health related problems targeting vulnerable communities.
2. Integrated Health and Care Pilot projects (HIV/AIDS, WatSan and communicable diseases) initiated and expanded by 2005.	2. Comoros RCS implementing expanded and integrated health and care pilot projects by 2006	NS buy into the pilot project and have relevant technical personnel including adequate funding for the integrated health and care programmes.	Develop a five year (2004-2009) integrated health and care plan with tools and indicators for monitoring; documentation of best practices and lessons learnt, and strategies for scaling up the integrated health and care programmes.
3. HIV/AIDS prevention programmes are expanded including access to treatment to NS staff and volunteers.	3. HIV/AIDS prevention and care activities are scaled up including access to antiretroviral for volunteers and staff and infection rate maintained at less than 1% over the four years.	In-country policies that support HIV/AIDS prevention and access to ARV treatment.	3. Develop five years HIV/AIDS strategic plan and Scale up HIV/AIDS intervention activities through peer education, IEC and Behaviour change communication (BCC), HIV/AIDS workplace policies and programmes, and comprehensive medical care for staff and volunteers

<b>Programme title: The Comoros Red Crescent Society- Health and Care Programme</b>			
<b>Expected Results</b>	<b>Indicators to measure results</b>	<b>Risk/Assumptions</b>	<b>Activities planned to meet results</b>
4. Existing Strategic Partnerships at national (MOH, National AIDS control program) and international levels (with WHO, UNFPA, French cooperation and French Red Cross) strengthened and further developed to sustain health interventions.	4. MoU developed and signed among partners to address challenges in public health.	RC/RC societies are seen as credible partners and accepted by other stakeholders.	4. Network and create partnerships with stakeholders to promote linkages with WatSan, Health and HIV/AIDS through regional workshops and participation in existing Country Co-ordination Mechanisms and Inter-agency Coordinating Committee.

Note: The above activities will be implemented with technical support from the Regional Delegation Health and Care Support Unit and other stakeholders.

[<Click here to access the Logical Framework Planning Matrix document for Comoros Health and Care>](#)

## **Organizational Development**

[<Click here to return to title page>](#)

### **Background and Achievements/Lessons to date**

Support from the Federation Capacity Building Fund enabled the Regional Delegation to maintain its support to strengthening the Comoros Red Crescent in 2003. Much of this focused on the preparation of the agenda and documentation for the General Assembly. The regional committees on the three islands (Grande Comore, Anjouan and Mohéli) held their Assemblies and elections in advance of the National Assembly at the end of March that was attended by eleven persons, as well as government representatives from each of the three islands. The national society's draft Strategic Plan, Statutes and Internal Regulation were all discussed through working group sessions before being approved by the General Assembly. A new President, three Vice-Presidents and Treasurer were also elected during the assembly. The successful hosting of the meeting on the island of Anjouan, traditionally a separatist island, gave the national society the opportunity to profile itself as a unified organization. All government representatives in attendance undertook to promote the recognition of the national society by the International Movement with their political superiors. The clear distinction between governance and management roles set out in the new Statutes will reduce some tensions regarding decision making which existed at national level.

The Federation in collaboration with the ICRC will continue to prepare the national society for recognition. Emphasis will be placed in familiarizing the new committees on each of the three islands on good governance and integrity issues. As the cost of transport between the three islands limits the capacity of headquarters staff to visit regional branches, efforts will be maintained to set up proper systems and structures for the implementation, monitoring and reporting on projects as well volunteer management.

**Goal: The Comoros Red Crescent maintains a high profile in responding to the needs of the most vulnerable at community level.**

**Objective: The national society's institutional capacity and its progress towards operating as a well functioning national society is enhanced through Secretariat support**

## Indian Ocean sub-regional programmes; Annual Appeal no. 01.09/2004

### Expected results :

1. The Comoros Red Crescent has met the recognition milestones of the Movement by 2005
2. The integrity of the Comoros Red Crescent is respected within the Movement by 2005
3. Annual national society income is increased by 20% by 2007.
4. Volunteers carry out their activities based on well-defined training and development plans by 2005.
5. An adequate management structure is in place to facilitate successful implementation of national society activities by 2007
6. The development and capacity building of the Comoros Red Crescent information unit to meet minimum technical, professional and human resources standards - as approved by the RC- NET - has been completed.

<b>Programme : Organizational Development – Logical Framework 2004-2007</b>			
<b>Expected Results</b>	<b>Indicators to measure results</b>	<b>Risks / Assumptions</b>	<b>Activities planned to meet results</b>
1. The Comoros Red Crescent has met the recognition milestones of the Movement by 2005.	1. Statutes approved by Movements Joint Commission - NS carries out its activities without political interference.	1. Political stability in the country	1.1 Prepare final draft of statutes based on proposals made at General Assembly in March 2003. 1.2 Consult with Joint Commission regarding any issues requiring clarification. 1.3 Publish and disseminate approved Statutes and accompanying Internal Regulations.
2. The integrity of Comoros Red Crescent is respected within the Movement by 2005.	2. The NS is applying Federation policies effectively.	2. Capacity of Headquarters to coordinate and follow-up.	2.1 Train new Board members on the characteristics of a well-functioning NS, governance and integrity issues 2.2 Assist Board members to disseminate to regional and local committees
3. Annual NS income is increased by 20% by 2007.	3. Partnership Agreement signed with national and international partners.	3. Political stability	3.1 Assist regional committees to design Action Plans based on Strategic Plan 2003-2006 3.2 Assist National and Regional Committees to present strategic and Action plans to national and international partners. 3.3. Provide technical advice to NS on the content of agreements with partners.
4. Volunteers carry out their activities based on well defined training plans by 2005.	4. Volunteer management policy and guidelines being implemented.	4. Human Resources to implement.	4.1 Provide advice to NS on content of a volunteering policy and guidelines documents. 4.2 Facilitate the design of volunteering policy and guideline documents. 4.3 Assist NS to put procedures set out in guidelines in place
5. An adequate management system is in place to facilitate successful implementation of NS activities by 2007.	5. Volunteers are trained in and applying all aspects of project cycle management	5. Capacity of headquarters to coordinate	5.1 Establish monitoring and reporting procedures 5.2 Train committees in monitoring and reporting procedures 5.3 Train Headquarters staff in standard NS financial procedures

**Indian Ocean sub-regional programmes; Annual Appeal no. 01.09/2004**

<b>Programme : Organizational Development – Logical Framework 2004-2007</b>			
<b>Expected Results</b>	<b>Indicators to measure results</b>	<b>Risks / Assumptions</b>	<b>Activities planned to meet results</b>
6. The development and capacity building of the Comoros Red Crescent information unit to meet minimum technical, professional and human resources standards –as approved by the RC Net – has been completed.	6. Communications Forum (CF) report - customized Job Description adopted - articles, news releases - publication introducing the Comoros Red Crescent - adequate equipment in place - media coverage - Federation (and other) web site - participation in the regional writing/photo competition	6. Comoros RC commitment to strengthen their information unit - sufficient funding available	6. Comoros RC information officer participates in the regional Communications Forum. 1.2 Comoros RC information officer contributes with articles (covering the NS activities and response to emergencies) towards the regional network. 1.3 Produce promotional booklet to meet recognition of the NS.

*<Click here to access the Logical Framework Planning Matrix document for Comoros Organizational Development>*

## Madagascar

[<Click here to return to title page>](#)

### National Context

Madagascar, the fourth largest island in the world, is the most poverty stricken of the southern Indian Ocean States and has an estimated population of 16.9 million with about 30% inhabiting the urban areas. Political stability is returning to the country following a seven months crisis before the confirmation of the election of Marc Ravalomanana as President in July 2002. His popularity rate is still high and he has solid control of all branches of government. The government's intolerance and heavy-handed approach towards public protest is however a cause for concern. The President also runs the risk of facing public disillusion as he strives to show demonstrable progress in reducing poverty. It is expected that the government will continue to work with the IMF and the World Bank to implement economic reforms to reduce poverty. In 2003 GDP growth is expected to be approximately 8%, a major improvement from the 11.9% contraction during the political crisis. The government will need to convince foreign investors that political stability has returned if the majority of the 100,000 jobs lost in the export processing zone are to be reinstated. Cyclones devastate regions of the country on a yearly basis while parts of the south suffer from endemic famine.

Madagascar's educational performance is high by sub-Saharan African standards. This is partly linked to a strong sense of national identity and the widespread use of the national written language, Malagasy. Illiteracy rates are approximately 39% of adult women and 28% of men.

Secondary school enrolment is 16% higher in boys than in girls. The UNFPA has lowered life expectancy rates from 59 to 54.8 years for women and from 56 to 52.5 years for men; this can be linked to the impact of sporadic outbreaks of cholera but more importantly to an increase in HIV/AIDS prevalence. 40% of children under five are underweight.

The country adopted socialist policies at the end of the colonial regime from 1975. Presently the new government has a programme for privatizing more than 40 parastatal enterprises; all major banks have been privatized. The vast majority of the population depends on agriculture for their livelihood. However, about half of the country's land is cultivable but a mere 5% is currently under crops. Rice is the main staple accounting for 70% of farm output and cash crops, particularly vanilla, cloves and pepper are significant export earners. Since 1970 the country has been unable to meet its own consumption needs. There is a potential to develop the cotton industry. Mineral resources have been largely unexploited.



## Red Cross and Red Crescent Priorities

### Movement Context:

The main priority for the Federation will be to assist the national society to put effective governance and management structures in place. This is however contingent on the national society's desire to implement; the dismissal of a second Secretary General within the space of a year gives little reassurance that this is the case. Currently the Secretariat is being managed by a volunteer for a transition phase and it is unclear whether the full-time position of Secretary General will be reopened. Little progress was made during 2003 with the implementation of the national society's Strategic Plan 2001-2004. Similar to Comoros, the French Red Cross will continue to take the lead in Disaster Preparedness and Response, but phasing out over the four year period; with the support of the French Red Cross (PIROI), the society has developed capacity to respond to cyclones. The ICRC is committed to supporting dissemination and First Aid activities but the governance and management problems have prevented it from making any long term plans for supporting the national society.

### National Society Strategy/Programme Priorities:

The **Malagasy Red Cross Society** has provincial and local committees in the six regions of the country. Persistent problems between governance and management at a central level have prevented headquarters from giving consistent support and guidance to provincial structures. The national society however claims its commitment to solving these problems to facilitate the building up of strong branch structures and to implement recommendations of an external audit carried out two years ago. Activities to achieve these objectives are outlined in an activity plan to be implemented in the last quarter of 2003. If this is the case the Federation will support the installation of the necessary structures and systems to achieve this. The national society is also keen to develop its profile in preventing the chronic health problems such as cholera, malaria and tuberculosis which go hand-in-hand with serious poverty situations. Incidences of HIV/AIDS are also on the increase.

## Strengthening the National Society

### Health and Care

[<Click here to return to title page>](#)

#### Background and Achievements/Lessons to date

Madagascar is one of the poorest countries within the Indian Ocean Islands; about two-thirds of the population lives below the poverty line. Literacy levels are still low at 50%; life expectancy is 54.8 years. Access to safe water supply, basic sanitation and hygiene is very low resulting into alarming conditions; diseases like acute respiratory infections, malaria, and diarrhoea are the major causes of mortality. Child mortality and malnutrition rates amongst children under five years are very high at 116 per 1000 live births.

Madagascar is one of the few countries in sub-Saharan Africa with an HIV/AIDS prevalence rate below 1%. This coupled with elaborate programmes gives the country an opportunity to reverse the epidemic.

To support the Government in improving the access to health care for the most vulnerable, the Malagasy Red Cross Society is currently revitalizing its health activities through the adoption of the ARCHI 2010 strategy. The national society has a network of 900 volunteers trained in CBFA<sup>11</sup> located in 98 of 111 departments which have engaged in blood donor promotion, community based activities for malaria prevention and control, cholera prevention and control, and nutritional rehabilitation. The national society is also active through 'PIROI' in responding to the emergency health needs of Malagasy people affected by disasters; this was the case during the cyclone in June 2002.

As a member of the Regional Health and Care working group, the national society has over the last two years embarked on a HIV and AIDS awareness campaign through participation in existing country HIV and AIDS coordination mechanisms

---

<sup>11</sup> CBFA – Community-based first aid

## Indian Ocean sub-regional programmes; Annual Appeal no. 01.09/2004

With financial and technical support from the Regional Delegation, Malagasy Red Cross was able to organize an HIV and AIDS strategic planning workshop that brought together branch representatives and technicians from the ministry of health, UNICEF, UNAIDS and UNFPA.

As the national society embarks on expanding its health activities, there is a great need to establish a sound health and care department at headquarters and provincial levels to provide technical support in the design and implementation of the various community based health strategies as stated in the national society's overall Strategic development plan.

**Goal: The health status of the most vulnerable communities is improved.**

**Objective: Vulnerable communities are supported to address their public health needs (malaria, cholera, HIV/AIDS) in a sustainable manner using the ARCHI strategy to rapidly and effectively address public health needs in emergencies (preparedness and response).**

### Expected results:

1. Health and care interventions (Malaria, cholera, Maternal Child Health (MCH) and HIV/AIDS) scaled up within the ARCHI framework by 2007.
2. HIV/AIDS prevention programmes have been expanded including access to treatment to national society staff and volunteers.
3. Existing Strategic Partnerships at national (ministry of health, National AIDS control program) and international levels (with WHO and UNFPA) have been strengthened and further developed to sustain health interventions

<b>Malagasy Red Cross Society: Health and Care Programme – Logical Framework</b>			
<b>Expected Results</b>	<b>Indicators to measure results</b>	<b>Risk/Assumptions</b>	<b>Activities planned to meet results</b>
1. Health and care interventions (Malaria, cholera, Maternal Child Health -MCH and HIV/AIDS) scaled up within the ARCHI framework by 2007	1.1. Madagascar Red Cross Society implementing expanded health initiatives using the ARCHI strategy. 1.2. Madagascar Red Cross Society implementing integrated health and care programmes using skilled volunteers by 2007.	1.1. NS and donors buy into the integrated approach. 1.2 NS has volunteer management policies.	1.1. Design and scale up sustainable gender balanced health and care programs through training of staff and volunteers in integrated health and care programmes focusing on Malaria, HIV/AIDS and WatSan implemented using ARCHI tool kits and PHAST at community level. 1.2 Develop/Strengthen reproductive health and nutrition strategies and carryout programmes targeting pregnant and lactating mothers.
2. HIV/AIDS prevention programmes are expanded including access to treatment to NS staff and volunteers.	2. HIV/AIDS prevention activities are scaled up and access to treatment including Antiretroviral (ARV) for staff and volunteers by 2007.	In-country policies that support HIV/AIDS prevention and access to ARV treatment.	2.1Scale up HIV/AIDS intervention activities through peer education, IEC and Behaviour change communication. 2.2Develop and implement HIV/AIDS health workplace policy and initiate dialogue with health management organizations and health care providers for comprehensive medical care for staff and volunteers including access to ARV.

<b>Malagasy Red Cross Society: Health and Care Programme – Logical Framework</b>			
<b>Expected Results</b>	<b>Indicators to measure results</b>	<b>Risk/Assumptions</b>	<b>Activities planned to meet results</b>
3. Existing Strategic Partnerships at national (MOH, National AIDS control program) and international levels (with WHO, UNFPA) strengthened and further developed to sustain health interventions.	3. MoU developed and signed among partners to address challenges in public health	RC/RC NSs are seen as credible partners and accepted by other stakeholders	3. Network and create partnerships with stakeholders to promote linkages with WatSan, Health and HIV/AIDS through regional workshops and participation in existing Country Co-ordination Mechanisms and Inter-agency Coordinating Committee.

## **Organizational Development**

[<Click here to return to title page>](#)

### **Background and achievements/lessons to date**

Tensions between governance and management prevailed during 2003; the national society governance seemed incapable of understanding the distinction between the roles and responsibilities of governance and management and sought to maintain a hands-on role in every aspect of the national society's functioning. As of August 2003 these problems prevented the regional delegation from making any constructive contribution to building the national society's capacity during the year. The Regional Delegation stands ready to assist in the implementation of some of the Action Plan for the last quarter of 2003 mentioned above, as well as the necessary structures and systems which will need to be put in place if the Strategic Plan is to be implemented in the ensuing years.

**Goal: The Malagasy Red Cross maintains a high profile in responding to the needs of the most vulnerable.**

**Objective: The Malagasy Red Cross has the necessary structures and systems in place to respond to clearly identified community needs.**

### **Expected results:**

1. National society statutes have been revised and applied in conformity with Federation guidelines by 2007.
2. Integrity issues have been addressed by 2004.
3. Human resource policies are in place by 2006.
4. ICRC and the Federation have adopted a coordinated approach in their support to the national society by 2004
5. The national society has been participating actively in national policy making by 2006.
6. A decentralization process has been established by 2007.
7. The national society has entered into an increased number of local partnerships by 2007.
8. The development and capacity building of the Malagasy Red Cross information unit to meet minimum technical, professional and human resources standards, as approved by the RC-NET, has been completed.

<b>Malagasy Red Cross Society: Organizational Development Programme – Logical Framework</b>			
<b>Expected Results</b>	<b>Indicators to measure results</b>	<b>Risks/Assumptions</b>	<b>Activities planned to meet results</b>
1. The national society Statutes are revised and applied in conformity with Federation guidelines by 2007.	1. General Assemblies are held and governance rotates.	1. Commitment to implement new practices	1. Coaching and reviewing of draft statute documents.

**Indian Ocean sub-regional programmes; Annual Appeal no. 01.09/2004**

<b>Malagasy Red Cross Society: Organizational Development Programme – Logical Framework</b>			
<b>Expected Results</b>	<b>Indicators to measure results</b>	<b>Risks/Assumptions</b>	<b>Activities planned to meet results</b>
2. Integrity issues are being addressed by 2004.	2. External audit is carried out annually and recommendations are implemented.	2. Commitment to implement new procedures effectively	2. Coaching in the design and implementation of Action Plans.
3. Human resource policies are in place by 2006.	3. Volunteer and Staff Policies and Guidelines are being implemented.	3. Resources to implement effectively.	3. Provision of technical advice on implementation and monitoring procedures.
4. ICRC and the Federation have adopted a coordinated approach in their support to the national society by 2004.	4. ICRC and Federation support is compatible with NS Strategic Plans and Cooperation Strategy Agreement.	4. ICRC and Federation strict adherence to Strategic Plan and CAS provisions.	4. Regular consultations and monitoring meetings. Attendance at NS Strategic Plan Review Meeting.
5. The national society is participating actively in national policy making by 2006.	5. National society invited to contribute to the design of policies affecting vulnerable groups.	5. Advocacy skills.	5. Provide technical advice and assist in the design of presentations to policy-making bodies.
6. A decentralization process is established by 2007.	6. De-centralization policy is implemented. Branch Development Plans are in place.	6. Commitment from HQ. - Required Skills.	6. Assist NS in the design implementation monitoring and revision of plans.
7. The national society has entered into an increased number of local partnerships by 2007.	7. Agreements signed with new partners. - Funding diversification	7. Planning and implementation skills.	7. Provide technical advice on the design implementation, monitoring and marketing of Strategic Plans.
8. The development and capacity building of the Malagasy Red Cross information unit to meet minimum technical, professional and human resources standards –as approved by the RC Net - has been completed	8. - Communications Forum (CF) report - customized Job Description adopted - articles, news releases - media coverage - Federation (and other) web site - participation in the regional writing/photo competition	8. - Malagasy RC commitment to strengthen their information unit - sufficient funding available	8.1 Malagasy RC information officer participates in the regional Communications Forum. 8.2. Malagasy RC information officer contributes with articles (covering the NS activities and response to emergencies) towards the regional network.

*[<Click here to access the Logical Framework Planning Matrix document for Madagascar Organizational Development>](#)*

## Mauritius

[<Click here to return to title page>](#)

### National Context

Mauritius has the strongest economy of all the Indian Ocean islands. It gained independence in 1968 and became a republic in 1992. The President is Head of State and is appointed by the National Assembly. The leader of the party that wins a majority in the general elections is appointed as Prime Minister. Mauritius has a number of dependencies, the largest being Rodrigues 563km to the east. The country experienced two serious corruption scandals in 2003 which could seriously damage the country's reputation: the first is linked to the fraudulent sale of State-owned land resulted in the arrest of the Housing and Lands Minister, and the second relates to the possible theft of National Pension Funds deposits amounting to USD 33 million from the country's largest commercial bank.



The literacy rate of 95% is one of the highest among developing countries. Secondary school attendance is estimated at 40% of the eligible age group. This coupled with a well developed health care system means that the country does not suffer epidemics similar to some of its Indian Ocean neighbors. Malaria was eliminated in the 1950s. The current UNAIDS estimate of HIV/AIDS infection is 0.1% of the population.

The main export earners are manufacturing, agriculture and tourism. Sugar production is recovering following the devastation caused by Cyclone Dina in 2002. The tourism industry, a major income earner grew by 3.2% bringing in USD 610 million, although the global downturn and the impact of the SARS<sup>12</sup> virus may impact 2003 figures.

The Civil Society environment is expanding at a rapid pace. The **Mauritius Red Cross Society** is recognized as an important player in the provision of First Aid training and has an active Youth section. However the national society needs to position itself better in the evolving environment if it is not to lose out on opportunities for partnerships and funding. The Mauritius Red Cross completed its Strategic Plan 2003-2006 together with an Action Plan 2003-04 in February.

[<Click here to access the Strategic Plan for Mauritius Red Cross Society >](#)

[<Click here to access the Action \(Activity\) Plan for Mauritius Red Cross Society >](#)

Similar to Madagascar, Mauritius and the smaller island of Rodrigues are prone to cyclone during the December to April season, the latter having encountered devastation after being struck in late February. With the assistance of the French Red Cross Disaster Response platform (PIROI) the national society has increased its capacity to respond to these situations.

<sup>12</sup> SARS – Severe Acute Respiratory Syndrome

## Red Cross and Red Crescent Priorities

### Movement Context:

A priority for the Federation will be to support the national society in monitoring the implementation of its Strategic Plan. Support, if requested, will also be given to revise Statutes. The Federation will promote sub-regional exchange as a means of national society capacity building. Similar to other national societies in the sub-region, the French Red Cross will maintain the lead in providing support in the area of disaster preparedness and response, but phasing out over the period. ICRC intends to support dissemination activities, particularly the development of the international humanitarian law programme in schools.

### National Society Strategy/Programme Priorities:

As set out in the Strategic Plan 2003-06, the main priorities of the national society are: to continue to develop capacity in disaster preparedness and response; to restructure its First Aid programme in line with changing market demands; to develop its capacity in responding to community health needs; and to ensure the necessary human and financial resources to implement its programmes.

## Strengthening the National Society

### Organizational Development

[<Click here to return to title page>](#)

#### Background and achievements/lessons to date

The Strategic Planning process was very participatory and opened a number of up the eyes of Governance representative to the potential a Red Cross organization has to develop its image in a country such as Mauritius. There is a new commitment from many to modernize systems and structures within the national society. It took time for some Board members to be convinced of the importance of Statute revision; agreement reach to go ahead with this process will facilitate the revision of some systems and practices. During 2003, financial support from the Regional Delegation allowed representatives of the branch on the smaller island of Rodrigues to participate more actively in decision-making.

**Goal: The Mauritius Red Cross maintains a high profile in responding to the needs of the most vulnerable**

**Objective: The Mauritius Red Cross has the necessary structures and systems in place to respond to clearly identified community needs**

#### Expected results:

1. The national society statutes have been revised and applied in conformity with Federation guidelines by 2005
2. A Human Resource Policy has been put in place by 2006
3. ICRC and the Federation have adopted a coordinated approach in their support to the society by 2004
4. The national society is participating actively in national policy making by 2005
5. The national society has entered into an increased number of local partnerships by 2007.
6. The development and capacity building of the society's information unit to meet minimum technical, professional and human resources standards - as approved by the RC-NET - as been completed.

<b>Mauritius Red Cross Society: Organizational Development – Logical Framework 2004-2007</b>			
<b>Expected Results</b>	<b>Indicators to measure results</b>	<b>Risks / Assumptions</b>	<b>Activities planned to meet results</b>
1. The national society statutes are revised and applied in conformity with Federation Guidelines by 2005.	1. General Assemblies are held and governance rotates.	1. Commitment to implement new practices	1. Coaching and reviewing of draft statute documents.
2. Human Resource Policies are in place by 2006.	2. Volunteer and Staff Policies and guidelines are being implemented.	2. Resources to implement effectively.	2. Provision of technical advice on implementation and monitoring procedures.

**Indian Ocean sub-regional programmes; Annual Appeal no. 01.09/2004**

<b>Mauritius Red Cross Society: Organizational Development – Logical Framework 2004-2007</b>			
<b>Expected Results</b>	<b>Indicators to measure results</b>	<b>Risks / Assumptions</b>	<b>Activities planned to meet results</b>
3. ICRC and the Federation have adopted a coordinated approach in their support to the national society by 2004.	3. ICRC and Federation support is compatible with NS Strategic .	3. ICRC and Federation strict adherence to Strategic Plan.	3. Regular consultations and monitoring meetings. Attendance at NS Strategic Plan Review Meeting.
4. The national society is participating actively in national policy making by 2005.	4. National society is invited to contribute to the design of policies affecting vulnerable groups.	4. Advocacy skills.	4. Provide technical advice and assist in the design of presentations to policy-making bodies.
5. National society has entered into an increased number of local partnerships by 2007.	5. Agreements signed with new partners. Funding diversification	5. Commitment from HQ. • Required Skills.	5. Assist national society in the design implementation monitoring and revision of plans.
6. The development and capacity building of the Mauritius Red Cross information unit to meet minimum technical, professional and human resources standards –as approved by the RC Net – has been completed	6. - Communications Forum (CF) report - customized Job Description adopted - articles, news releases - media coverage - Federation (and other) web site - participation in the regional writing/photo competition	6. - Mauritius RC commitment to strengthen their information unit - sufficient funding available	6.1 Mauritius RC information officer participates in the regional Communications Forum. 6.2 Mauritius RC information officer contributes with articles (covering the NS activities and response to emergencies) towards the regional network

*<Click here to access the Logical Framework Planning Matrix document for Mauritius Organizational Development>*

## Seychelles

[<Click here to return to title page>](#)

### National Context

Seychelles is an archipelago made up of 115 mostly uninhabited islands occupying one million square kilometers of the Indian Ocean. The country has a population of 82,250 the majority of which lives on three islands of Mahé where the Capital, Victoria, is situated; Praslin; and La Digue. A socialist philosophy has dominated politics in recent years leading to large investments being made in the education and health sectors. Education is free and compulsory between the ages of 6 and 16; approximately 85% of the populations, including 100% of school aged children are literate. Infant mortality is currently 9 per 1,000 live births. The current HIV/AIDS infection rate is relatively low at 0.14% of the adult population. The Government has approved a HIV/AIDS policy.



Foreign exchange shortages and considerable debt-service obligations continue to have a very negative impact on the economy. Canned tuna and tourism remain the two main sources of foreign income; while tourist arrivals recorded a modest increase in 2002, exports of canned tuna reached new heights. The country is affected by cyclones over December to April, although to a lesser extent than Madagascar and Mauritius. However a freak cyclone caused serious damage to the island of Praslin in August 2002.

The Seychelles Red Cross has a high profile and is recognized for its services to the community in First Aid, HIV/AIDS Prevention and an Exploring Humanitarian Values Programme in schools.

### Red Cross and Red Crescent Priorities

#### Movement<sup>13</sup> Context:

The [Seychelles Red Cross Society](#) carried out a monitoring session of its Strategic Plan 2002-2006 in January 2003. It emerged that all of the objectives set out in the document were still relevant but that some activities would need to be reviewed in the light of changing needs. The Federation will provide support to the society in the implementation of its Strategic Plan (refer to the Organizational Development section) and in the Evaluation at the end of 2006. In recent years members of the Seychelles Red Cross have been involved in regional initiatives such as acting as coach to leaders in other sub-regional national societies and in activities of the Regional Disaster Response Team. This will be further promoted over the Appeal period. The French Red Cross will continue to support Disaster Preparedness activities but on a sliding scale. The ICRC intends to support the expansion of the international humanitarian law programme in schools and the development of new initiatives in the area of dissemination.

[<Click here to access the Strategic Plan for Seychelles Red Cross Society >](#)

#### National Society Strategy/Programme Priorities:

The priorities of the national society set out in its Strategic Plan focus on strengthening capacity in disaster response, first aid, HIV/AIDS prevention, raising its profile and putting the necessary human and financial resource structures in place to implement its programmes. Particular emphasis will be placed on developing structures on the smaller islands of Praslin and La Digue.

<sup>13</sup> 'Movement' refers to the International Red Cross and Red Crescent Movement

## Strengthening the National Society

### Organizational Development

[<Click here to return to title page>](#)

#### Background and achievements/lessons to date

One of the findings of the mid-term monitoring of the Strategic Plan of the Seychelles Red Cross was that there wasn't sufficient human resource capacity to coordinate the implementation of all activities. The main reason for this is that SRCS is a small national society with only two staff members. The sometimes limited time available to key volunteers also meant that schedules in the action plan could not always be adhered to. A decision was made to recruit a full-time Programme Coordinator for which the national society successfully applied and received funds from the Capacity Building Fund to support the costs for one year. It is hoped that funding will be renewed for a second year after which time the Seychelles Red Cross will take over responsibility for the post.

Following a General Assembly held in February, an Action Plan to support the strengthening of branch structures on Praslin and La Digue through general dissemination amongst the local population and various workshops on Movement Policies and structures was supported by the Regional Delegation and the Monaco Red Cross.

**Goal: Seychelles Red Cross maintains a high profile in responding to the needs of the most vulnerable**

**Objective: The Seychelles Red Cross has the necessary structures and systems in place to respond to clearly identified needs**

#### Expected results:

1. A human resource policy has been put in place by 2005
2. ICRC and the Federation have adopted a coordinated approach in their support to Seychelles Red Cross by 2004
3. The national society is participating actively in national policy making by 2005
4. The national society has entered into an increased number of local partnerships by 2007
5. The development and capacity building of the Seychelles Red Cross information unit to meet minimum technical, professional and human resources standards - as approved by the RC-NET - has been completed.

<b>Programme : Organizational Development – Logical Framework 2004-2007</b>			
<b>Expected Results</b>	<b>Indicators to measure results</b>	<b>Risks / Assumptions</b>	<b>Activities planned to meet results</b>
1. Human Resource Policy is in place by 2005.	1. Volunteer and Staff Policies and guidelines are being implemented.	1. Resources to implement effectively.	1. Provision of technical advice on implementation and monitoring procedures.
2. ICRC and the Federation have adopted a coordinated approach in their support to Seychelles Red Cross by 2004	2. ICRC and Federation support is compatible with NS Strategic Plans and Cooperation Strategy Agreements.	2. ICRC and Federation strict adherence to Strategic Plan provisions.	2. Regular consultations and monitoring meetings. Attendance at NS Strategic Plan Review Meeting.
3. The national society is participating actively in national policy making by 2005.	3. National society is invited to contribute to the design of policies affecting vulnerable groups	3. Advocacy skills.	3. Provide technical advice and assist in the design of presentations to policy-making bodies.
4. The national society has entered into an increased number of local partnerships by 2007.	4. Agreements signed with new partners. • Funding diversification	4. Planning and implementation skills.	4. Provide technical advice on the design implementation, monitoring and marketing of Strategic Plan.

**Indian Ocean sub-regional programmes; Annual Appeal no. 01.09/2004**

<b>Programme : Organizational Development – Logical Framework 2004-2007</b>			
<b>Expected Results</b>	<b>Indicators to measure results</b>	<b>Risks / Assumptions</b>	<b>Activities planned to meet results</b>
5. The development and capacity building of the Seychelles Red Cross information unit to meet minimum technical, professional and human resources standards –as approved by the RC Net – has been completed.	5. - Communications Forum (CF) report - customized Job Description adopted - articles, news releases - media coverage - Federation (and other) web site - participation in the regional writing/photo competition - RDRT report	5. Seychelles RC commitment to strengthen their information unit - sufficient funding available	5.1 Seychelles RC information officer participates in the regional Communications Forum. 5.2. Seychelles RC information officer contributes with articles (covering the NS activities and response to emergencies) towards the regional network.

*<Click here to access the Logical Framework Planning Matrix document for Seychelles Organizational Development>*

## **Coordination, Cooperation and Strategic Partnerships**

### **Background and achievements/ lessons to date**

The ICRC- Pretoria Regional Delegation, the French Red Cross and the Federation Eastern Africa Regional Delegation (Nairobi) have established a good cooperation mechanism in their support to national societies in the sub-region. This takes the form of joint meetings and participation in Strategic Planning and Monitoring processes in each of the four islands.

The Federation will endeavour to attract new Movement partners to the sub-region; the Netherlands Red Cross have had a bilateral project for two years in Madagascar while Spanish Red Cross has shown interest to start a project in Madagascar.

At present, the national societies in the sub-region do not have a Country Agreement Strategy. While one will not be drawn up for each country, it is expected that a sub-regional document or individual Country Agreement Strategy for Madagascar and Comoros will be drawn up by end 2005. The needs and the capacities in Mauritius and Seychelles are such that it allows for more local possibilities of support, but the programmes of the two national societies are often jeopardized by the tourist image of the country that hides their realities this making it difficult to attract external support and partners.

However, there is good potential for the islands to develop partnerships with the private sector especially in Seychelles and Mauritius. National societies from Madagascar and Comoros have privileged positions to interest other organizations such as United Nations agencies, NGOs and diplomatic missions to work in partnership. This is the case with UNAIDS for example who has a sub-regional coverage of the Indian Ocean Islands and would be interested to partner with an organization of similar structure.

**Goal: The Federation coordination role is accepted and respected by all partners in the Indian Ocean sub-region with a view to enhancing good cooperation and successful partnerships.**

**Objective: Through constant dialogue, good coordination is achieved with the various partners with a view to building the capacity of the newly created sub-region for Indian Ocean Islands and the four national societies.**

### **Expected results :**

1. Coordination between ICRC and representatives of the partner national societies has been promoted.
2. Good collaboration and working relations with all external partners have been strengthened.
3. An efficient mechanism for consultation with bilateral and multilateral partners has been established with a view to achieving one sub-regional Cooperation Agreement Strategy.

## **Effective Representation and Advocacy**

### **Background and achievements/ lessons to date**

Several initiatives have started in the recent years to link all islands of the Indian Ocean together through various cooperation mechanisms especially in political, economical and social areas. The Indian Ocean Rim – Association for Regional Co-operation (IOR – ARC) was been created in 1997 to develop trading alliances with projects focusing on business forum, new technology and investments, trade, joint venture, tourism, education, etc. The Indian Ocean Islands are members of the Southern African Development Community (SADC), have signed the Lome Agreement and the Convention of Small Islands States of United Nations and especially the UNCLOS (the United Nations Convention on the Law of the Sea) which deal with landlocked states and their right of access to the resources of the ocean. They have good and active relationships with the European Union and especially France due to the proximity of the French Territory of La Réunion Island. Contacts with various States of Asia and Middle East countries are developing due to the geo-political situation of the islands but also because of their dynamic business strategy to expand outside what they are limited to develop inside.

Priority will be given to assisting national societies to develop their profile and that of the Movement, with other humanitarian actors such as UNICEF, UNDP UNAIDS and Save the Children. Potential areas of cooperation with the Indian Ocean Commission will also be examined.

## **Indian Ocean sub-regional programmes; Annual Appeal no. 01.09/2004**

**Goal: The Federation has a high profile as a key humanitarian actor and advocate in the region with the added advantage of a network of national societies able to deliver services at community level.**

**Objective: The Federation is an effective and reliable partner in support of the four national societies of the Indian Ocean and in addressing the needs of the most vulnerable.**

### **Expected results:**

1. Advocacy and sensitization has been maintained with external partners, the governments, United Nations agencies, donors and humanitarian NGOs.
2. The four Indian Ocean national societies have been supported in advocacy resulting in a positive image of their activities.

## **Delegation Management**

### **Background and achievements/ lessons to date**

The Federation supports the national societies from Comoros, Madagascar, Mauritius and Seychelles through the Regional Organizational Development delegate and the Head of Regional Delegation both of whom are based in Nairobi. Technical support in Disaster Preparedness, Health, Water and Sanitation, HIV/AIDS, and Information is provided on an ad hoc basis by technical departments of Nairobi Regional Delegation.

As part of the global Federation Change Strategy, the first step of the regional decentralization process for the Indian Ocean sub-region were adopted at the Regional Governance and Management meeting of the RC-NET in Nairobi in September 2003. The plan to integrate the four countries of the Indian Ocean has been designed based on the lessons learned from the experience of the newly created office for the East Africa sub-region that includes Kenya, Rwanda and Uganda. The process will start as soon as the prerequisite conditions are in place and after thorough negotiations with each national society. It is hoped that an office will be set up in early 2004 based in Antananarivo - Madagascar. Each national society will then be integrated during the year 2004 and will receive direct support from the new Head of office for the Indian Ocean sub-region.

**Goal: The Federation structure is streamlined to effectively support the implementation of the decentralization process.**

**Objective: To maintain an efficient, flexible and service oriented infrastructure coordinated with all partners.**

### **Expected results:**

1. The Regional Delegation has effectively and smoothly handed over the direct monitoring of support to the national societies from Comoros, Madagascar, Mauritius and Seychelles to the Head of office for the Indian Ocean Sub-Region.

### **For further information please contact:**

- *Comoros: Mohibaca Baco, President Comoros Red Crescent, Moroni; Email [crco@snpt.km](mailto:crco@snpt.km); Phone 269 733 516; Fax 269 730 664*
- *Mauritius: Gaëtan Roland Lagesse, Director General, Mauritius Red Cross Society, Curepipe; Email [redcross@intnet.mu](mailto:redcross@intnet.mu); Phone 230 676 3604; Fax 230 483 66 80*
- *Madagascar: Mariette Pindray D'ambelle, President, Malagasy Red Cross Society, Antananarivo; Email [crm@dts.mg](mailto:crm@dts.mg); Phone 261 20 222 2 111; Fax 261 320 775 50556*
- *Seychelles: Colette Servina, President, Seychelles Red Cross Society, Victoria; Email [redcross@seychelles.net](mailto:redcross@seychelles.net); Phone 248 324 646; Fax 248 321 663*
- *Susanna Cunningham, Federation Regional Focal Person, Nairobi; Email [ifrcke43@ifrc.org](mailto:ifrcke43@ifrc.org); Phone 254 20 271 4255; Fax 254 20 271 8415*
- *Josse Gillijns, Federation Regional Officer, Geneva; Email [josse.gillijns@ifrc.org](mailto:josse.gillijns@ifrc.org); Phone 41 22 730 42 24; Fax 41 22 733 03 95*

*<Budget below - Click here to return to title page>*

# BUDGET 2004

## PROGRAMME BUDGETS SUMMARY

Appeal no.: 01.09/2004

Name: Indian Ocean Sub-Regional Programmes

PROGRAMME:

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	Emergency	Total
	CHF	CHF	CHF	CHF	CHF	CHF	CHF
Shelter & construction	0	0	0	0	0	0	0
Clothing & textiles	0	0	0	0	0	0	0
Food	0	0	0	0	0	0	0
Seeds & plants	0	0	0	0	0	0	0
Water & Sanitation	0	0	0	32,000	0	0	32,000
Medical & first aid	0	0	0	0	0	0	0
Teaching materials	0	0	0	0	0	0	0
Utensils & tools	0	0	0	0	0	0	0
Other relief supplies	0	0	0	0	0	0	0
<b>SUPPLIES</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>32,000</b>	<b>0</b>	<b>0</b>	<b>32,000</b>
Land & Buildings	0	0	0	0	0	0	0
Vehicles	0	0	0	0	0	0	0
Computers & telecom	0	0	0	0	0	0	0
Medical equipment	0	0	0	0	0	0	0
Other capital exp.	0	0	0	0	0	0	0
<b>CAPITAL EXPENSES</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Warehouse & Distribution	0	0	0	0	0	0	0
Transport & Vehicules	0	0	0	0	18,080	0	18,080
<b>TRANSPORT &amp; STORAGE</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>18,080</b>	<b>0</b>	<b>18,080</b>
Programme Support	0	0	0	20,976	15,136	0	36,112
<b>PROGRAMME SUPPORT</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>20,976</b>	<b>15,136</b>	<b>0</b>	<b>36,112</b>
Personnel-delegates	0	0	0	0	144,000	0	144,000
Personnel-national staff	0	0	0	25,520	15,600	0	41,120
Consultants	0	0	0	31,500	0	0	31,500
<b>PERSONNEL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>57,020</b>	<b>159,600</b>	<b>0</b>	<b>216,620</b>
W/shops & Training	0	0	0	79,150	0	0	79,149
<b>WORKSHOPS &amp; TRAINING</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>79,150</b>	<b>0</b>	<b>0</b>	<b>79,149</b>
Travel & related expenses	0	0	0	77,927	25,050	0	102,977
Information	0	0	0	26,815	0	0	26,815
Other General costs	0	0	0	28,825	15,000	0	43,825
<b>GENERAL EXPENSES</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>133,567</b>	<b>40,050</b>	<b>0</b>	<b>173,617</b>
<b>TOTAL BUDGET:</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>322,713</b>	<b>232,866</b>	<b>0</b>	<b>555,579</b>