

# PROGRAMME UPDATE



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

## SOMALIA

Appeal No. MAASO001

18 December 2006

### BUDGET REVISION

*The Federation's vision is to strive, through voluntary action, for a world of empowered communities, better able to address human suffering and crises with hope, respect for dignity and a concern for equity. Its mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world's largest humanitarian organization and its millions of volunteers are active in over 185 countries.*

### In Brief

Programme Update no. 2; Period covered: May to September, 2006.

This Programme Update revises the total Appeal budget from CHF 4,849,350 to CHF 7,067,092 (USD 5,855,089 or EUR 4,441,918).

Appeal coverage: 55.5%; Outstanding needs: CHF 3,141,654 (USD 2,602,862 or EUR 1,974,641).

Appeal 2006-2007: <http://www.ifrc.org/docs/appeals/annual06/MAASO001.pdf>

Programme Update no. 1: <http://www.ifrc.org/docs/appeals/annual06/MAASO00101.pdf>

[<Click here to go directly to the attached revised appeal budget and here for the interim financial report>](#)

**Programme summary:** Since October 2005, the Somali Red Crescent Society (SRCS) has opened a total of six new clinics – increasing the coverage in its integrated health care programme (IHCP)

by 14% in a year – and a further two clinics are planned to be opened in 2007, in addition to new mobile outreach units. Over 200,000 clinical consultations have been carried out in 2006 by the SRCS facilities with Federation member

support. This progressive scaling up of the SRCS's health response is contributing to the achievement of the Global Agenda and the Millennium Development Goals in remote areas of high vulnerability.

*Photos (above and right): SRCS staff and volunteers carry out VCA exercises with communities in Puntland and Somaliland.*

At the same time, it is being managed in an integrated manner coordinated with improvements in disaster management, volunteer



## **Somalia: Appeal 2006-2007; Appeal no. MAASO001; Programme Update no. 2**

management, community-based first aid (CBFA) and organizational development. Two regional level vulnerability and capacity assessments (VCA) exercises were carried out by the SRCS staff and volunteers during this reporting period, supported by increased investment in volunteer management. In the light of this progressive scaling up of activities, and of the strong financial support to the SRCS's programmes by partners this year, the 2007 appeal budget for Somalia has been revised upwards from CHF 2,427,538 to CHF 4,645,280.

**The programmes herein are aligned with the Federation's Global Agenda, which sets out four broad goals to meet the Federation's mission:**

- **Reduce the numbers of deaths, injuries and impact from disasters.**
- **Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.**
- **Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.**
- **Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.**

### **Operational developments**

This reporting period initially saw some consolidation of positions between the Transitional Federal Government (TFG) and the Union of Islamic Courts (UIC). However, tension increased following an assassination attempt in September on the president, disrupting the efforts towards power sharing and dialogue between the factions. The UIC extended their area of control to Kismayo and other areas of Lower and Middle Juba. Progressive build-up of military assets by both sides, with both internal and external support, has led to conflict or potential conflict on four main fronts in south and central Somalia, with analysts expressing fears of escalation into a major regional conflict. Population movements across the southern border areas into neighbouring Kenya increased up to 800 new arrivals per day, with increased displacement anticipated in the coming months.

The deteriorating security and political environment has brought increasing challenges, particularly in terms of logistics, access, movement of personnel, monitoring and supervision. Despite these constraints, the SRCS has managed to continue and even expand its programme activity. Clear needs expressed by communities and partners have called for scaled up activities by the national society, supported by the increased capacity at branch and coordination office level. Financial support obtained through the Federation's multi-donor funding strategy has increased through 2006 and into 2007, and the appeal budgets have therefore been revised upwards.

### **Health and care**

**Goal: The health status of the Somalia populations is improved.**

**Objective: Improved quality of health services through a network of MCH/OPDs clinics, the Garowe hospital and community-based activities.**

#### **Progress**

This reporting period has seen continued and increased donor support, thanks to successful programme implementation. New or increased commitments have been offered by a number of Red Cross/Red Crescent Movement partners for the coming years. In the case of HIV and AIDS, an application to the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) was approved for second year funding for information, educational and communication (IEC) material development for the whole of Somalia.

The integrated health care programme (IHCP) budget for 2007 has been reviewed and revised upwards, increasing the overall Somalia 2007 appeal from CHF 2,427,537 to CHF 4,377,404 (an increase of 80 %). This reflects the scaling up and programme expansion outlined above, and includes a review of the SRCS salary scales carried out in coordination with all the operational Movement partners in Somalia in 2006.

The IHCP activities continued according to plan in Somaliland and Puntland. In South and Central zones, activities faced several challenges of insecurity as a result of the conflict and political tension. The SRCS continues to run the two maternal and child health/outpatient department (MCH/OPD) clinics at Balad and Afgoi with the support of the Netherlands Red Cross/government through the Federation, until the end of 2006 after which support will be

## Somalia: Appeal 2006-2007; Appeal no. MAASO001; Programme Update no. 2

provided by the International Committee of the Red Cross (ICRC). Health education sessions at the clinic and community levels continued, in groups and individually to promote health-seeking behavior within the community.

The recent establishment of two new clinics has increased the impact of the SRCS's health response. Since October 2005, the national society has opened a total of six new clinics, increasing the coverage in its IHCP by 14% in a year; a further two clinics are planned to be opened in 2007. In addition, two full mobile outreach units will be established in 2002 to supplement the increased outreach activities already carried out from the clinics. This progressive scaling up of the SRCS health response is contributing to the achievement of the Global Agenda and the Millennium Development Goals (MDG) in remote areas of high vulnerability. At the same time, it is being managed in a responsible and integrated manner, and coordinated with improvements in volunteer management and other programme areas, including disaster management, community-based first aid (CBFA) and organizational development.

From January 2006 to August 2006, the OPD and ante-natal/post-natal clinics (ANC/PNC) recorded 193,982 attendances for outpatients as well as ante-natal and post-natal care. Scaling up of the health programme continued as two new clinics were opened under the Somaliland branches of Hargeisa and Lasanod in August 2006, with Federation support.

In the reporting period, 8 clinics in Puntland embarked on outreach activities, in which 18 villages were covered in pre-registration for the Expanded Programme on Immunization (EPI) activities as well as carrying out of all activities regularly provided at the MCH level. In the four-month period, May to August, consultations at the outpatient department (OPD) and ante-natal/post-natal clinics (ANC/PNC) recorded 95,116 attendances.

**Table 1: Clinic consultations**

Period	OPD consultation				Total	ANC/PNC	Total
	<5 Years		> 5 Years				
	Male	Female	Male	Female			
January - August 2006	17,568	17,732	27,226	58,477	<b>136,833</b>	57,149	<b>193,982</b>

Similarly, a total of 18,531 ante-natal and post-natal consultations were recorded of these 6,577 were mothers who received iron and folic acid, 5,963 received vitamin A and a total of 1,938 successful deliveries were conducted by the traditional birth attendants (TBA) with assistance from the midwives.

EPI activities continued to be provided in all the clinics through out the reporting period. A total of **17,032** children and 8,188 women were vaccinated between May and August 2006.

**Table 2: vaccination of women and children**

Period	Children	Women	Total
January 2006 - August 2006	30,133	15,406	<b>46,243</b>

Growth monitoring activities continued in the period under review. From May to August 2006, a total of 22,734 children were screened for malnutrition conditions; 41 children had oedema, 174 had severe and 888 had moderate malnutrition. 19,493 had normal status of nutrition.

**Table 3: Children screened for malnutrition**

Period	Oedema	Severe malnutrition	Moderate malnutrition	Normal Weight	Total
January - August 2006	92	273	2,391	34,060	<b>38,681</b>

## **Somalia: Appeal 2006-2007; Appeal no. MAASO001; Programme Update no. 2**

The national and branch health officers from the three zones attended the follow-up SRCS health planning meeting held in Hargeisa in June 2006. The meeting was organized by the Federation to see how far the programme activities have been implemented, to plan for the remaining months of 2006, to approve the activities for 2007 and to improve coordination. ICRC health personnel also participated; this enabled a full review of the SRCS' Movement partner's health activities.

The SRCS is undertaking capacity building of its health staff and volunteers to improve the early detection and referral of cases, proper case management and establish primary health care laboratories to perform malaria tests for correct diagnosis at the facility level.

All the activities undertaken at clinic level were carried out in consultation with community health committees. The committees assist the SRCS in managing the clinics and act as links between the SRCS and the community, in addition to helping in social mobilization during campaigns.

In June 2006, the branch health officers and clinic head nurses from Puntland participated in the new malaria treatment protocol training. The training also covered prevention, control and management of tuberculosis (TB). The training was organized by the United Nations Children's Fund (UNICEF) and the World Health Organization (WHO) through GFATM.

HIV and AIDS awareness activities were carried out within the IHCP. In coordination with the three zonal AIDS commissions under year one of the GFATM, the SRCS/Federation also completed the following activities:

- Training of 102 participants on the development and use of IEC material as well as reducing stigma and discrimination;
- Printing and distribution of 9,000 posters, 8,250 stickers and 40,000 brochures for use by health staff and volunteers with a range of target groups;
- Conducting awareness campaigns across all regions of the country, reaching more than 15,000 people.

Garowe Hospital continues to provide inpatient and outpatient services without interruption. A total of 8,177 patients were attended to, with 14 deaths registered.

During the reporting period, consultations were carried out in Puntland by the Ministry of Health (MoH), the Garowe Hospital Board, SRCS and the Federation to discuss the finalization of a draft memorandum of understanding (MoU), which has now been signed by all the parties. Other discussions centred on progress in the reorganization of the hospital staff and salary increment. The hospital management team also met with its staff and SRCS to discuss how to improve hospital services in future.

**Constraints:** Working in Somalia continues to present the same persistent constraints including logistical and communication challenges. Security concerns and issues of access are becoming increasingly problematic with the continuing conflict.

### **Disaster management**

The disaster management (DM) programme has been supported using funds from the Tsunami Appeal. Community-based risk reduction (CBRR) programmes, particularly CBFA, were initiated with the selection of focal persons from Somaliland, Puntland and south/central Somalia. The Federation DM officer is working with the SRCS DM director and the newly-appointed SRCS DM officers in the Mogadishu and Hargeisa coordination offices. Although some tsunami-related activities were put on hold pending agreement of the global situation and approval of Project Expenditure Approval Requests (PEARs) for funded projects, normal activities were resumed in the period.

The vulnerability and capacity assessment (VCA) exercises in three pilot regions were planned earlier in 2006 following SRCS management decision that a full VCA exercise will not be feasible in the whole country due to practical considerations and unnecessary rising of communities' expectations. VCA trainings and exercises were carried out in Galkayo and Burao, with facilitation from the DM director of the SRCS and officers and the Federation DM officer. Three more volunteers from every sub-region will be trained alongside the already trained volunteers. Together, they will form a team to carry out VCA exercises in the three pilot branches. Besides the exercise, the facilitation team worked on documentation of the VCA curriculum and trainers guide, based on experiences from the first two pilot exercises. Those will then be used in the continued VCA roll-out in branches around the country.

## Somalia: Appeal 2006-2007; Appeal no. MAASO001; Programme Update no. 2

As part of strengthening health promotion activities at community level, the SRCS held a CBFA working group meeting with assistance from the Federation's Somalia delegation and the regional delegation in Nairobi. The CBFA meeting was held for four days and attended by nine SRCS staff – three from each region – including a health officer, a field operation officer and disaster focal persons, as well as Federation staff. A follow up workshop early in 2007 will focus on development and harmonization of IEC materials for CBFA activities in the community. Information technology (IT) equipment was upgraded in several branches and coordination offices with some work still to be done on radio communication.



*SRCS staff and volunteers in a first aid training exercise.*

### Organizational development

**Goal: The capacity of the Somali Red Crescent Society to adequately function and manage programmes that assist the most vulnerable people is increased.**

**Objective: The Somali Red Crescent Society's institutional capacity and progress towards operating as a well-functioning national society (WFNS) is enhanced through the Federation Secretariat support.**

#### Progress

Progress on the branch development strategy and plan of action continued. However, it was limited to some extent by the increased conflict and uncertainty in Somalia during the period. Management meetings continued to take place bringing together key members of the field management team with the leadership in Nairobi, to facilitate programme decision making and communication.

The support given by the Federation has empowered the leadership of the SRCS as well as built capacity within its management at field level. The plan of action for the branch development strategy captures the key areas to be achieved in the coming two years, starting with the membership campaign. The full implementation of this strategy should contribute towards the achievement of a shared vision and direction for the future.

Regular SRCS management meetings continued to be held in Nairobi, with support and facilitation from the Federation and the ICRC. They were attended by the president and heads of Mogadishu and Hargeisa coordination offices and other key programme staff from the national society. The purpose of the meetings was to facilitate planning and coordination of the SRCS activities for the coming quarters.

Support was given to the redesign and re-launch of the SRCS website. The SRCS organizational development (OD) director worked with a design team and the regional IT department, and the new website is now up (refer to: [www.bishacas.org](http://www.bishacas.org).) Five new bishacas.org email addresses were also set up with Federation's support.

The launch of the SRCS new membership campaign earlier in the year saw very positive results, with a number of branches exceeding their targets for membership recruitment. Individual fees were reduced in an effort to expand the membership base and to get more community members to support and get involved in the national society, its work and principles. Associate membership also attracted significant support from businesses in the larger urban centres. New targets have been set for the most successful regions and further membership materials have been distributed for use before the end of 2006.

Standardized plans for the "Naadiga" or volunteer club, as proposed in the branch development strategy and plan of action, were prepared for approval by SRCS leadership. Implementation of the Naadiga will follow the integrated DM/OD rollout of VCA exercises and subsequent appointment of volunteer managers at branch level.

Sports equipment donated by the International Olympic Committee (IOC) was dispatched for distribution to all SRCS branches and sub-branches in tsunami-affected areas as well as other areas of the country. The equipment will help to motivate and retain volunteers throughout the country.

**Constraints:** Travel has been periodically restricted, while the priorities of response to drought and conflict in the south disrupted organizational development issues.

## Humanitarian Values

**Goal: The Fundamental Principles and Humanitarian Values are known and respected throughout Somalia and, as a result, discrimination against vulnerable groups is reduced.**

**Objective: The Federation Secretariat supports the Somali Red Crescent Society by increasing its capacity to promote the Fundamental Principles and Humanitarian Values.**

### Progress

Stigma reduction training and dissemination of newly developed anti-stigma messages was undertaken through the HIV programme. Greater awareness and appreciation has been created among different sections of the community of the humanitarian work carried out by SRCS and its partners in Somalia, and the Principles and Values they espouse.

### Implementation and coordination

The implementation and coordination of this appeal is governed by the Federation’s Framework for Action which will orient capacity-building actions over the next five years, with the aim of building a well-functioning Federation network. The framework is a clear set of actions to reform and renew the Federation to ensure that it remains relevant and effective as an organization. This calls for collective leadership and accountability at all levels of the Federation to succeed.

### Coordination, cooperation and strategic partnerships

The Somalia delegation continued to support the SRCS in strengthening its cooperation with UN agencies, international organizations and donors. In addition, both the Somali Red Crescent Society and the Somalia delegation continued to be active members of the Body for Coordination of International Support to Somalis (CISS), formerly Somalia Aid Coordination Board (SACB). Apart from the organized meetings, SRCS and the Somalia delegation continued to take part in field coordination meetings with other state and humanitarian actors, and also discussed support to the health programme in tsunami-affected areas with the World Bank. Regular Movement cooperation meetings were held with the partner national societies (PNS) present in Nairobi, with active participation of the Somalia delegation and ICRC. These were chaired by the SRCS.

**Table 4: Summary of activities undertaken bilaterally by Movement partners in Somalia**

Movement partners	Summary of activities
ICRC	Ongoing economic security activities. Tracing and dissemination activities. Drought relief operations in south and central drought-affected districts. Support to the SRCS health programme in south and central Somalia.
Norwegian Red Cross	Support to three rehabilitation centres in Somalia, one in each zone.
German Red Cross	Support to WatSan programme and four MCH clinics in Somaliland, and four in Bossasso (with services provided via agreement with the Federation).

### International disaster response

Drought response activities were limited to conflict-affected areas of the south of Somalia, with ICRC working with the SRCS on the response. Avian influenza virus preparedness measures were continued, in coordination with the regional delegation in Nairobi and partner organizations in Somalia through the health coordination structures. The avian flu toolkits (including protective equipment and information materials) were finalized for distribution to the national society’s coordination offices, branches and health facilities and are currently stored with Somalia delegation pending need.

### Management of the delegation

The Somalia delegation operated at full capacity during the period, with the health delegate leading the team in giving support to the SRCS health and care programme and the disaster management officer giving additional

## **Somalia: Appeal 2006-2007; Appeal no. MAASO001; Programme Update no. 2**

support to the VCA process and CBFA preparations. The medical logistics officer was offered a Federation emergency mission in Indonesia. Upcoming maternity leave for the STI/HIV/AIDS officer will be covered by the SRCS assistant national health officer to progress GFATM activities as a staff-on-loan. Financial reporting was managed by the Somalia delegation finance officer, working together with the regional delegation finance department.

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

- ***In Kenya (for Somalia):*** Dr. Ahmed M. Hassan, President, Somali Red Crescent Society, Nairobi; Email: [srcsnai@bishacas.org](mailto:srcsnai@bishacas.org); Phone +254.20.271.37.84; Fax +254.20.271.88.62
- ***In Kenya:*** Ed Cooper, Federation Head of Somalia Delegation, Nairobi; Email: [ed.cooper@ifrc.org](mailto:ed.cooper@ifrc.org); Phone +254.20.283.51.32; Fax +254.20.272.90.70
- ***In Kenya:*** Per Jensnaes, Federation Head of Eastern Africa Regional Delegation, Nairobi; Email: [per.jensnaes@ifrc.org](mailto:per.jensnaes@ifrc.org); Phone +254.20.283.51.24; Fax +254.20.271.84.15
- ***In Geneva:*** Amna Al Ahmar, Federation Regional Officer for East Africa, Africa Dept.; Email: [amna.alahmar@ifrc.org](mailto:amna.alahmar@ifrc.org); Phone +41.22.730.44.27; Fax +41.22.733.03.95

All International Federation assistance seeks to adhere to the [Code of Conduct](#) and is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response](#) in delivering quality and accountable assistance to the most vulnerable. For support to or for further information concerning Federation programmes or operations in this or other countries, or for a full description of the national society profile, please access the Federation's website at <http://www.ifrc.org>

[\*Revised budget and interim financial report below:\*](#)

[\*Click here to return to the title\*](#)

# BUDGET 2006

## PROGRAMME BUDGETS SUMMARY

Appeal no.: MAASO001

Name: SOMALIA

PROGRAMME:

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	Emergency	Total
	CHF	CHF	CHF	CHF	CHF	CHF	CHF
Shelter	0	0	0	0	0	0	0
Construction	0	0	0	0	0	0	0
Clothing & Textiles	0	0	0	0	0	0	0
Food	44,556	0	0	0	0	0	44,556
Seeds & Plants	0	0	0	0	0	0	0
Water & Sanitation	2,160	0	0	0	0	0	2,160
Medical & First Aid	248,343	0	0	0	0	0	248,343
Teaching Materials	0	0	0	0	0	0	0
Utensils & tools	0	0	0	0	0	0	0
Other Supplies & Services	21,688	0	0	0	0	0	21,688
<b>SUPPLIES</b>	<b>316,747</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>316,747</b>
Land & Buildings	0	0	0	0	0	0	0
Vehicles	0	0	0	0	0	0	0
Computers & Telecom	1,546	0	0	454	0	0	2,000
Medical equipment	0	0	0	0	0	0	0
Other Equipment	0	0	0	0	0	0	0
<b>LAND, VEHICLES &amp; EQUIPMEN</b>	<b>1,546</b>	<b>0</b>	<b>0</b>	<b>454</b>	<b>0</b>	<b>0</b>	<b>2,000</b>
Storage	46,456	0	0	0	0	0	46,456
Distribution & Monitoring	0	0	0	0	0	0	0
Transport & Vehicles cost	158,288	0	0	6,890	1	0	165,178
<b>TRANSPORT &amp; STORAGE</b>	<b>204,744</b>	<b>0</b>	<b>0</b>	<b>6,890</b>	<b>1</b>	<b>0</b>	<b>211,634</b>
International Staff	168,775	0	0	49,625	102,000	0	320,400
Regionally Deployed Staff	0	0	0	0	0	0	0
National staff	163,522	0	0	48,080	0	0	211,602
National Society Staff	450,802	0	0	109,000	0	0	559,801
Consultants	1,524	0	0	20,000	0	0	21,524
<b>PERSONNEL</b>	<b>784,623</b>	<b>0</b>	<b>0</b>	<b>226,705</b>	<b>102,000</b>	<b>0</b>	<b>1,113,328</b>
Workshops & Training	148,994	0	0	80,953	0	0	229,947
<b>WORKSHOPS &amp; TRAINING</b>	<b>148,994</b>	<b>0</b>	<b>0</b>	<b>80,953</b>	<b>0</b>	<b>0</b>	<b>229,947</b>
Travel & related expenses	60,573	0	0	12,265	0	0	72,837
Information & Public Rela	54,766	0	0	55,680	0	0	110,446
Office Running Costs	87,099	0	0	55,626	-20,100	0	122,624
Communication Costs	4,980	0	0	26,400	11,400	0	42,780
Professional Fees	0	0	0	0	2,100	0	2,100
Other General Expenses	27,948	0	0	5,400	6,600	0	39,948
<b>GENERAL EXPENDITURE</b>	<b>235,366</b>	<b>0</b>	<b>0</b>	<b>155,371</b>	<b>0</b>	<b>0</b>	<b>390,736</b>
Asset Depreciation	0	0	0	0	0	0	0
<b>DEPRECIATION</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Contributions & Transfers	0	0	0	0	0	0	0
<b>CONTRIBUTIONS &amp; TRANSFERS</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Programme Support	117,627	0	0	32,700	7,091	0	157,417
<b>PROGRAMME SUPPORT</b>	<b>117,627</b>	<b>0</b>	<b>0</b>	<b>32,700</b>	<b>7,091</b>	<b>0</b>	<b>157,417</b>
<b>TOTAL BUDGET:</b>	<b>1,809,647</b>	<b>0</b>	<b>0</b>	<b>503,073</b>	<b>109,092</b>	<b>0</b>	<b>2,421,812</b>

# BUDGET 200

## PROGRAMME BUDGETS SUMMARY

Appeal no.: MAASO001

Name: SOMALIA

PROGRAMME:

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	Emergency	Total
	CHF	CHF	CHF	CHF	CHF	CHF	CHF
Shelter	304,800	0	0	150,000	0	0	454,800
Construction	0	0	0	0	0	0	0
Clothing & Textiles	0	0	0	0	0	0	0
Food	38,616	0	0	0	0	0	38,616
Seeds & Plants	0	0	0	0	0	0	0
Water & Sanitation	8,359	0	0	0	0	0	8,358
Medical & First Aid	333,204	0	0	0	0	0	333,204
Teaching Materials	0	0	0	0	0	0	0
Utensils & tools	0	0	0	0	0	0	0
Other Supplies & Services	94,126	0	0	0	0	0	94,125
<b>SUPPLIES</b>	<b>779,105</b>	<b>0</b>	<b>0</b>	<b>150,000</b>	<b>0</b>	<b>0</b>	<b>929,104</b>
Land & Buildings	0	0	0	0	0	0	0
Vehicles	262,500	0	0	0	0	0	262,500
Computers & Telecom	14,832	0	0	17,775	0	0	32,607
Medical equipment	0	0	0	0	0	0	0
Other Equipment	0	0	0	0	0	0	0
<b>LAND, VEHICLES &amp; EQUIPMEN</b>	<b>277,332</b>	<b>0</b>	<b>0</b>	<b>17,775</b>	<b>0</b>	<b>0</b>	<b>295,107</b>
Storage	48,700	0	0	0	0	0	48,700
Distribution & Monitoring	0	0	0	0	0	0	0
Transport & Vehicles cost	518,282	0	0	7,803	0	0	526,085
<b>TRANSPORT &amp; STORAGE</b>	<b>566,982</b>	<b>0</b>	<b>0</b>	<b>7,803</b>	<b>0</b>	<b>0</b>	<b>574,785</b>
International Staff	305,200	0	0	10,800	248,400	0	564,400
Regionally Deployed Staff	75,867	0	0	0	0	0	75,866
National staff	0	0	0	0	0	0	0
National Society Staff	749,390	0	0	192,337	0	0	941,726
Consultants	0	0	0	22,000	0	0	22,000
<b>PERSONNEL</b>	<b>1,130,457</b>	<b>0</b>	<b>0</b>	<b>225,137</b>	<b>248,400</b>	<b>0</b>	<b>1,603,993</b>
Workshops & Training	363,762	0	0	93,420	0	0	457,182
<b>WORKSHOPS &amp; TRAINING</b>	<b>363,762</b>	<b>0</b>	<b>0</b>	<b>93,420</b>	<b>0</b>	<b>0</b>	<b>457,182</b>
Travel & related expenses	90,941	0	0	13,103	0	0	104,043
Information & Public Rela	134,830	0	0	60,504	0	0	195,334
Office Running Costs	101,521	0	0	19,647	-12,323	0	108,845
Communication Costs	8,623	0	0	17,040	10,267	0	35,930
Professional Fees	0	0	0	0	100	0	100
Other General Expenses	28,461	0	0	5,940	4,510	0	38,910
<b>GENERAL EXPENDITURE</b>	<b>364,376</b>	<b>0</b>	<b>0</b>	<b>116,234</b>	<b>2,554</b>	<b>0</b>	<b>483,164</b>
Asset Depreciation	0	0	0	0	0	0	0
<b>DEPRECIATION</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Contributions & Transfers	0	0	0	0	0	0	0
<b>CONTRIBUTIONS &amp; TRANSFERS</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Programme Support	242,065	0	0	42,432	17,446	0	301,943
<b>PROGRAMME SUPPORT</b>	<b>242,065</b>	<b>0</b>	<b>0</b>	<b>42,432</b>	<b>17,446</b>	<b>0</b>	<b>301,943</b>
<b>TOTAL BUDGET:</b>	<b>3,724,079</b>	<b>0</b>	<b>0</b>	<b>652,801</b>	<b>268,400</b>	<b>0</b>	<b>4,645,280</b>

**International Federation of Red Cross and Red Crescent Societies**

MAASO001 - SOMALIA

Interim financial report

Selected Parameters	
Reporting Timeframe	2006/1-2006/10
Budget Timeframe	2006/1-2007/12
Appeal	MAASO001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

**I. Consolidated Response to Appeal**

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
A. Budget	5'533'727	0		1'155'874	377'492	7'067'093
B. Opening Balance	1'239'269	0		28'252	64'784	1'332'305
<b>Income</b>						
Cash contributions						
British Red Cross	280'328				2'763	283'091
Finnish Red Cross	94'290			62'860	1'430	158'580
German Red Cross	0					0
Netherlands Red Cross	76'930					76'930
Norwegian Red Cross	373'617			241'360		614'977
Other	33'436					33'436
Saudi Arabian Red Crescent S	431'550					431'550
Swedish Red Cross	84'514			25'176		109'690
UNDP (UN Agency)	260'344					260'344
UNICEF (UN Agency)	30'447					30'447
C1. Cash contributions	1'665'455			329'396	4'193	1'999'044
Outstanding pledges (Revalued)						
Netherlands Red Cross	-76'258					-76'258
Saudi Arabian Red Crescent S	437'500					437'500
Swedish Red Cross	85'550			25'665		111'215
UNDP (UN Agency)	-12'365					-12'365
UNICEF (UN Agency)	-11'497					-11'497
C2. Outstanding pledges (Revalued)	422'930			25'665		448'595
Inkind Personnel						
British Red Cross					85'000	85'000
Finnish Red Cross					44'000	44'000
C5. Inkind Personnel					129'000	129'000
Other Income						
Miscellaneous Income	1'236					1'236
Service Agreements					15'260	15'260
C6. Other Income	1'236				15'260	16'495
C. Total Income = SUM(C1..C6)	2'089'621	0		355'061	148'452	2'593'134
D. Total Funding = B + C	3'328'890	0		383'313	213'236	3'925'439

**II. Balance of Funds**

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
B. Opening Balance	1'239'269	0		28'252	64'784	1'332'305
C. Income	2'089'621	0		355'061	148'452	2'593'134
E. Expenditure	-1'405'618			-122'969	-127'517	-1'656'104
F. Closing Balance = (B + C + E)	1'923'272	0		260'344	85'719	2'269'335

International Federation of Red Cross and Red Crescent Societies

MAASO001 - SOMALIA

Interim financial report

Selected Parameters	
Reporting Timeframe	2006/1-2006/10
Budget Timeframe	2006/1-2007/12
Appeal	MAASO001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

### III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation		
A		B					A - B	
<b>BUDGET (C)</b>		5'533'727	0		1'155'874	377'492	7'067'093	
<b>Supplies</b>								
Shelter - Relief	454'800							454'800
Food	83'172	24'087				24'087		59'085
Water & Sanitation	10'519	2'239				138	2'376	8'142
Medical & First Aid	581'548	187'360				119	187'478	394'069
Other Supplies & Services	115'814	34'819			390		35'208	80'605
<b>Total Supplies</b>	<b>1'245'852</b>	<b>248'504</b>			<b>390</b>	<b>256</b>	<b>249'150</b>	<b>996'702</b>
<b>Land, vehicles &amp; equipment</b>								
Vehicles	262'500							262'500
Computers & Telecom	34'607					3'421	3'421	31'186
Office/Household Furniture & Equipment		1'813					1'813	-1'813
Others Machinery & Equipment		1'850			526	-2'376	0	0
<b>Total Land, vehicles &amp; equipment</b>	<b>297'107</b>	<b>3'663</b>			<b>526</b>	<b>1'045</b>	<b>5'233</b>	<b>291'874</b>
<b>Transport &amp; Storage</b>								
Storage	95'156	7'959			369	2'533	10'862	84'294
Distribution & Monitoring		14'053			560		14'613	-14'613
Transport & Vehicle Costs	691'264	133'139			3'533	-3'041	133'631	557'633
<b>Total Transport &amp; Storage</b>	<b>786'420</b>	<b>155'151</b>			<b>4'462</b>	<b>-508</b>	<b>159'106</b>	<b>627'314</b>
<b>Personnel Expenditures</b>								
Delegates Payroll	364'375	25					25	364'350
Delegate Benefits	520'425	45'572			11'882	130'409	187'863	332'562
Regionally Deployed Staff	75'867							75'867
National Staff	211'602	82'603			18'239	-2'636	98'206	113'396
National Society Staff	1'501'529	221'829			82'970		304'799	1'196'730
Consultants	43'524	10'955					10'955	32'569
<b>Total Personnel Expenditures</b>	<b>2'717'322</b>	<b>360'984</b>			<b>113'091</b>	<b>127'773</b>	<b>601'848</b>	<b>2'115'474</b>
<b>Workshops &amp; Training</b>								
Workshops & Training	687'130	158'011			13'631	1'953	173'595	513'535
<b>Total Workshops &amp; Training</b>	<b>687'130</b>	<b>158'011</b>			<b>13'631</b>	<b>1'953</b>	<b>173'595</b>	<b>513'535</b>
<b>General Expenditure</b>								
Travel	176'881	18'501			3'188	-11	21'678	155'203
Information & Public Relation	305'780	41'843			12'296	-37	54'101	251'679
Office Costs	231'470	45'470			15'469	5'504	66'444	165'027
Communications	78'710	14'911			2'420	5'255	22'585	56'125
Professional Fees	2'200					301	301	1'899
Financial Charges	73'809	21'357			2'642	20'413	44'413	29'396
Other General Expenses	5'050	82'998			18'287	-42'099	59'186	-54'136
<b>Total General Expenditure</b>	<b>873'901</b>	<b>225'080</b>			<b>54'302</b>	<b>-10'674</b>	<b>268'707</b>	<b>605'194</b>
<b>Program Support</b>								
Program Support	459'361	91'365			7'993	7'744	107'102	352'259
<b>Total Program Support</b>	<b>459'361</b>	<b>91'365</b>			<b>7'993</b>	<b>7'744</b>	<b>107'102</b>	<b>352'259</b>
<b>Operational Provisions</b>								
Operational Provisions		162'860			-71'425	-72	91'363	-91'363
<b>Total Operational Provisions</b>		<b>162'860</b>			<b>-71'425</b>	<b>-72</b>	<b>91'363</b>	<b>-91'363</b>
<b>TOTAL EXPENDITURE (D)</b>	<b>7'067'093</b>	<b>1'405'618</b>			<b>122'969</b>	<b>127'517</b>	<b>1'656'104</b>	<b>5'410'988</b>
<b>VARIANCE (C - D)</b>		<b>4'128'109</b>			<b>1'032'905</b>	<b>249'974</b>	<b>5'410'988</b>	