

# Mid-Year report

 International Federation  
of Red Cross and Red Crescent Societies

## ZAMBIA

Appeal No. MAAZM001

31 August 2011

This report covers the  
period 01/01/2010 to  
30/06/2010



ZRCS secretary general with volunteers visiting the IDP camp for families displaced by floods in Lusaka. The team is accompanied by the officials from the office of the President and the Zambian Army: Photo ZRCS

## In brief

**Programme outcome:** In line with the strategic aims of the [Strategy 2020](#)<sup>1</sup>, the Zambia Red Cross Society (ZRCS) expected programme outcome is communities that are resilient to disasters and public health emergencies, with protected livelihoods and strengthened capacity to recover from disasters and crises, with healthy and safe living, social inclusion and a culture of non-violence and peace.

**Programme(s) summary:** With the technical and financial support of the International Federation of the Red Cross and Red Crescent (IFRC), ZRCS programming achieved expected results in health, disaster management and organisational development. In partnership with the Zambia National Blood Transfusion Service (ZNBTS), ZRCS launched the blood donation programme on Red Cross Day, 8 May 2010. The programme is being supported with funding from in-country partners. ZRCS also launched Club 25 club whose objective is to save lives through giving blood targeting youth in and out-of-school.

<sup>1</sup> Strategic aim 1: Save lives, protect livelihoods, and strengthen recovery from disasters and crises  
Strategic aim 2: Enable healthy and safe living  
Strategic aim 3: Promote social inclusion and a culture of non-violence and peace.

The implementation of the integrated HIV and AIDS programme, which started in 2006 and was planned to continue until 2010 faced a lot of challenges due to lack of funding and has since been phased out leaving the National Society to only implement prevention activities in Lusaka.

The water and sanitation (WatSan) project supported by the EU, the British and Swedish Red Cross assisted communities in Choma and Sinazongwe Districts with various WatSan related activities. The project was completed in February and a project evaluation started in June 2010. In partnership with other government line ministries, the WatSan project addressed the urgent need to improve water supply, sanitation and hygiene among vulnerable communities in eight wards in Sinazongwe and Choma.

**Financial situation:** The total 2010 budget is CHF 211,257 (USD 659,359 or EUR 520,322), of which CHF 89,672 (12 per cent) covered during the reporting period (including opening balance). Overall expenditure during the reporting period was CHF 4,354 (2 per cent) of the budget.

[Click here to go directly to the attached financial report.](#)

See also

[MDRZM007](#): The DREF operation was launched on 26 February 2010 for CHF 91,610, to support ZRCS in delivering immediate assistance to 1,200 people affected by flooding in Lusaka. An additional CHF 63,701 was allocated on 19 April 2010 to enhance the capacity of ZRCS to provide immediate assistance to 3,000 households affected by an outbreak of cholera in Lusaka.

**No. of people we have reached:**

- 3,000 people were reached with voluntary non numerated blood donation messages of which 270 were enrolled at the blood bank for blood donation.
- Club 25 was introduced in 15 schools in Lusaka, Copperbelt and Northern Provinces.
- 40 volunteers were trained on cholera prevention and targeted three cholera prone communities in Lusaka.
- About 12,230 were reached through health education messages during the cholera outbreak experienced in early 2010.
- 31,100 people in and around Lusaka were provided with information, education and communication (IEC) materials, hygiene supplies, and detergents during the cholera outbreak experienced in April 2010.
- 1,400 people from various organisations in Zambia were trained in basic First Aid through the commercial First Aid programme.
- 180 flood affected families were provided with relief assistance at a camp established for Internally Displaced Persons (IDPs) at Lusaka's Independence Stadium.
- 100 volunteers were trained on basic disaster management to assist with the floods operations at the IDP camp in Lusaka.

**Our partners:** ZRCS continued working in partnership with Norwegian, British, Swedish Red Cross and IFRC within the Movement. The National Society also partnered with other agencies outside the movement such as EU, Royal Netherlands Embassy, UNICEF, SIDA, MSF, USAID and World Vision. At community/implementation level, ZRCS partnered with local government offices, Disaster Management and Mitigation Unit (DMMU), National AIDS Council (NAC), the District Aid Task Force (DATF) teams, District Development Coordination Committees (DDCC), District Disaster Management Committees (DDMC) and District Water and Sanitation Committees (Dwashes).

## Context

Zambia is a landlocked country and home to almost 12 million people of whom 20 percent live in the capital city Lusaka, while another 20 percent live in the northern Copperbelt Region, leaving huge tracts of uninhabited land and resulting in one of the smallest land to person ratios in Africa.

Zambia has one of the world's most devastating HIV and AIDS epidemics. However, the country recorded a reduction in the HIV prevalence rate, from 16 percent in 2007 to 14.3 percent in 2009. This has largely been due to sensitization and reduced rate of new infections, especially among the youths. All the challenges posed by such high prevalence rates are even further compounded by high poverty levels estimated at 68 percent.

Currently, there are about 1.1 million people living with HIV (PLHIV) and a total estimate of 710,000 OVC. The National AIDS Council (NAC) continued to coordinate all HIV and AIDS response actions through the decentralised District AIDS Task Forces (DATF), which work closely with communities to identify resources and develop partnerships that respond to local needs. With the availability of anti retroviral therapy (ART), the Government has tried to ensure adequate access, and according to NAC, ART coverage increased dramatically in 2006 to 2007 from 39 to 59 percent.

Almost two-thirds of Zambia's population lives below the international poverty line – that is, around 7.5 million people. The epidemic has brought about unending poverty and deprivation due to inability by the affected population to meet basic needs and other livelihood requirements. Agriculture, the mainstay of the majority of Zambians, has also been affected by AIDS related illnesses. However, overall poverty levels have improved, with significant gains in urban areas, enrolment rates for primary education are rising, literacy is increasing, immunisation coverage is more widespread and child death rates are falling.

The 2009/10 rain season was characterised by heavy rainfall in most parts of the country which led to excessive rains that culminated into flash floods in low lying areas and water logging in plateau areas. The excessive rainfall experienced resulted into varying impacts on key sectors of the economy. The incessant rainfall led to flooding in Lusaka and other districts, causing extensive water logging which increased the risk of water-borne diseases. About 200 households were moved to a relocation camp established by the government and jointly managed with ZRCS.

Following reports from District Disaster Management Committees (DDMCs) on the negative effects of the floods, the Zambia Vulnerability Assessment Committee (ZVAC) undertook an assessment. This assessment was conducted in 15 districts with an estimated population of 1.7 million people and 87 percent of this area being rural.

The assessment established that a total of 238,254 people (39,710 households) were affected by the 2009/2010 flood situation. Owing to the fact that the majority of households are involved in activities that rely on weather, the floods negatively impacted on agricultural production, and a 30 percent crop loss was recorded. In the same districts affected by floods, a total of 3,065 water sources were surveyed of which a huge proportion, 43 percent were found to be unsafe for human consumption and about 40.6 percent of the latrines collapsed causing the sewer to permeate into the flood waters. Protected water sources were damaged whilst others were submerged in water.

Due to the resultant insanitary conditions, water borne diseases increased causing hardship for the most affected communities. Over 60 per cent of the households in the affected areas reported a member having clinical malaria. A number of school and health infrastructure were also damaged.

ZRCS being a member of the ZVAC was part of the floods relief operation team in the country. The operations were coordinated by the Disaster Management Mitigation Unit (DMMU). In Lusaka, ZRCS was appointed by government to manage all camp activities for the people displaced as a result of the floods. ZRCS staff and volunteers were trained on skills to improve disaster response and management during this operation.

# Progress towards outcomes

## Disaster Management

Programme component: Zambezi River Basin	
Outcome 1	The risk and impact of disasters among communities living along the Zambezi River basin is reduced through community preparedness.
Outcome 2	Access to adequate and nutritious food commodities increased among communities along the Zambezi River Basin.
Outcome 3	The number of deaths, illnesses and impact from diseases reduced among communities along the Zambezi River Basin.
Outcome 4	ZRCS capacity to implement disaster preparedness, response and recovery operations is increased.

### Achievements

ZRCS efforts in disaster management were directed at responding to the needs of 200 families that had been displaced by the floods and housed in temporary shelters at a camp established at Lusaka Independence Stadium. ZRCS participated in initial needs assessments of the affected communities in Lusaka and collaborated with DMMU in distributing food and non-food items to the IDPs sheltered at the camp.

In order to build ZRCS capacity to respond to the disaster, the National Society provided training in basic disaster management to 50 volunteers. ZRCS also delivered relief materials to 50 families at Chibwe whose houses had collapsed as result of the floods.

Whilst the vulnerable families were still battling to cope with the consequences of flooded households, water sources and road networks, they were also faced with increasing cases of cholera. The number of reported cholera cases increased to over 3,300 cases by April 2010, with 87 deaths reported. In addition to responding to the needs of the floods affected families, ZRCS continued supporting the government efforts in preventing further spread of cholera and ensuring treatment to all patients.

The National Society reached out to the communities affected by cholera during the time of the outbreak in Lusaka's Mandevu, Chaisa and Chipata compounds as well as in the IDP camp. A ZRCS cholera task team was established to manage the response of the outbreak in coordination with the Ministry of Health and other partners. The National Society distributed 6,000 bottles of liquid chlorine to the targeted communities affected by cholera. In addition a total of 3,056 households (12,224 people) were reached through cholera prevention messages.

The ZRCS volunteers monitored the, distribution of food and non food items closely to ensure equity and compliance to the Sphere minimum standards. The relief distribution tremendously contributed to the restoration of livelihoods, averting hunger and outbreak of diseases, thus ensuring dignity amongst the affected population.

The National Society also procured and distributed 50 gumboots, 50 raincoats and 250 T-shirts for distribution among its volunteers in order to ensure self protection against contracting communicable diseases as well as enhancing the quality of the services, at the same time increasing visibility for the National Society. The increased visibility in turn created a favourable humanitarian space for the National Society's response activities.

The ZRCS procured and distributed 400 mosquito nets all the households in the IDP camp. ZRCS volunteers assisted the affected families with hanging and proper use of the mosquito nets.

## Constraints or Challenges

- Due to lack of financial resources, most of the activities in the plan could not be carried out during the period under review.
- ZRCS has been without a disaster management coordinator since January 2010 and coordination of disaster management activities has been put under the responsibility of the acting programmes manager and OD coordinator.

## Health and Care

<b>Programme component: Community-based Health and First Aid</b>	
Outcome 1	Communities are able to cope with health and disaster challenges achieved through implementation of Community-Based Health and First Aid (CBH&FA) and traditional and commercial First Aid activities.
Outcome 2	Mother and child health is improved through immunization services to children and mothers in areas of ZRCS operations.
Outcome 3	Blood donation awareness and pool of voluntary non-remunerated blood donors (VNRBD) is increased through the Club 25 Methodology.

### Achievements:

In partnership with ZNBTS and support from local partners, ZRCS launched a nation-wide blood donation programme on 8 May 2010 with the Zambian Minister of Health in attendance. A total of 135 units of blood were collected from the newly enrolled blood donors on the day of the launch.

In preparation for the launch, ZRCS received widespread coverage and visibility on national television and radio stations. To enhance its blood donation awareness campaign and sensitise communities on the programme the National Society engaged famous Zambian artists who produced a song with the theme entitled 'tandizo' meaning help. This song has been aired on different radio stations around the country calling upon people to become blood donors. Public awareness of the programme was further increased through the distribution of fliers and posters on the programme to communities in and around Lusaka.

ZRCS also launched Club 25, a concept developed to encourage youth in and out of school to donate blood and learn about healthy lifestyles. Through the club, youth in school commit to make 25 blood donations after leaving schools. During the reporting period 250 youths from 25 different schools around Lusaka joined Club 25.

<b>Programme component: Water and Sanitation (WatSan)</b>	
Outcome 1	Access to clean and safe water and sanitation services has improved in Southern, Eastern and Northern provinces of Zambia.

### Achievements:

ZRCS completed the implementation of the WatSan at the end of February 2010. The EU, British and Swedish Red Cross supported the National Society with a major portion of funding for the project with some contributions from the Norwegian Red Cross and Shell. With support of the IFRC, the National Society engaged external consultants to carry out the end of project evaluation.

As at February 2010, a total of 2,748 sanitary platforms (sanplats) and 204 latrines were constructed. This was a 30 percent achievement from planned target of 9,000 SanPlats and 572 latrines respectively. Through the project, ZRCS drilled 112 new water points and rehabilitated 96 boreholes in Choma and Sinazongwe districts.

Using its technical staff and network of volunteers, ZRCS provided capacity building to communities in Choma and Sinazongwe in various aspects of WatSan as summarised in the table below:

**Table 1: Summary of capacity building initiatives up to February 2010**

Description of activity	Target	Achievement	% Achievement
Training of area pump minders	40	40	100%
Training of village WatSan committees	452	102	23%
Training of caretakers	409	32	8%
Training of masons	40	40	100%
Training of hygiene promoters	160	120	75%
Formation of village PHAST groups	319	209	66%
Training of the village PHAST groups	319	22	7%

The members of the village WatSan committees have mobilized themselves to maintain their boreholes despite the project having come to an end. They have also engaged in fund raising activities to generate income for use in managing and maintaining the water facilities.

At the close of the project, ZRCS had reached a total of 23,479 and 29,137 beneficiaries in Sinazongwe and Choma respectively through various WatSan interventions as shown in Table 2 below. This represented an overall achievement of 58 percent from target.

**Table 2: Number of beneficiaries reached as at February 2010**

Project Area	Water	Sanitation	Hygiene Promotion	Capacity Building	Total
Choma	24,682	4,183	18,050	272	29,137
Sinazongwe	14,675	4,998	16,700	472	23,497
<b>Totals</b>	<b>39,357</b>	<b>9,181</b>	<b>34,750</b>	<b>744</b>	<b>52,634</b>

#### Programme component: Emergency Health

**Outcome 1** ZRCS targeted communities with increased capacity to cope with health emergencies

#### Achievements:

ZRCS also enhanced activities under the water and sanitation (WatSan) and emergency health components of the cholera operation. The WatSan component focused on the provision of safe water by chlorinating shallow wells and other water sources, providing sanitation facilities and enhancing hygiene promotion activities. ZRCS distributed two jerry cans per family (for 200 families) for water storage and 36,000 water purification sachets for treatment. Volunteers and staff conducted door-to-door sensitization on the proper use of water purification sachets. Whilst promoting hygiene, the volunteers supervised the camps and encouraged safe disposal of garbage and the use of washing basins. With support from the IFRC, the National Society also deployed cholera kits to the affected areas.

#### Programme component: HIV and AIDS

(Refer to Link <http://www.ifrc.org/appeals/annual06/logframes/Africa/MAA63003ZM.pdf>)

<b>Outcome 1</b>	Prevent further infections through targeted community-based peer education and information, education, and communication (IEC) activities, and promote uptake of services including voluntary counselling and testing (VCT) and parent to child transmission prevention services (PPTCT).
<b>Outcome 2</b>	Scale-up community home-based care and support for vulnerable children with holistic support to address education, food and nutrition, psychosocial support, social inclusion, and economic support.
<b>Outcome 3</b>	Address stigma and discrimination with targeted communication and advocacy activities.
<b>Outcome 4</b>	Build the NS capacity to plan, implement, and manage the programme.

#### Achievements:

Towards the end of 2009, with technical and financial support from the IFRC, ZRCS conducted a training of trainers' workshop with youth on the peer education programme. The purpose of the training was to capacitate the trainers with skills to train peer educators on the new "Youth Peer Education Life Skills Activity Kit".

During the reporting period, ZRCS started rolling out the peer education package and has supported 23 peer educators from Lusaka branch who managed to reach 342 out-of-school youth through peer education activities including games, group discussions on HIV and AIDS, STIs, VCT, condom use and sexual health. As a result of this intervention ZRCS managed to reach 313 people through sexual and reproductive health promotion sessions and distributed 6,567 condoms.

### Constraints or Challenges

- The rolling out of the voluntary non numerated blood donation programme has been slow due to lack of funding; little has been achieved since its launch on 8 May 2010.
- The training manuals for peer educators have not been received after the training conducted by IFRC in September 2009 and this has slowed down implementation.
- The peer education programme has been rolled out in Lusaka without funding though no activities have taken place in Mansa and Kampiri Mposhi due to lack of funding despite the three districts having trained trainers of the programme.
- Delay in the disbursement of the cholera funds, which made the National Society respond very late to the cholera outbreak in the country.
- The non implementation of the WatSan activities and slow implementation of the HIV and AIDS activities in the period under review was due to lack of funding.

## National Society Development

Programme Component: Branch Development and Volunteer Management	
Outcome 1	ZRCS branches are viable, and vibrant with sound volunteer and local youth network management systems.
Outcome 2	ZRCS has established systems and procedures for the systematic provision of technical support for branch development and volunteer management by the headquarters.
Outcome 3	ZRCS has established systems and procedures for the systematic provision of technical support for branch development and volunteer management by the headquarters.
Outcome 4	ZRCS resource base is improved and ensures sustainability of programmes.

### Achievements:



Lusaka City Council mayor addressing the Lusaka branch council meeting held in Lusaka on 27<sup>th</sup> March, 2010. Photo ZRCS

ZRCS continued disseminating the Volunteering Policy and the new ZRCS Constitution taking advantage of every opportunity such as field trips, branch executive committee inductions, national council meetings and volunteer training sessions.

During the reporting period, National Council Meeting was held and a new governing board elected. At the same meeting, Mabwe, Siavonga and Mpongwwe were each accorded branch status after achieving 200 members each, bringing the number of ZRCS branches to 70.

The NS conducted an induction of the new branch executive committee of the Lusaka branch at a branch council meeting held in March and attended by the Mayor of Lusaka.

In effort to motivate the Kabwe Red Cross branch, volunteers and community, the ZRCS Secretary General visited the Chibwe Voluntary Aid Unit in Kabwe where various relief items were distributed to flood affected families. Many villagers joined the Red Cross as volunteers as result of the visit.

ZRCS held a youth camp in the Copperbelt Province under the theme, “Youths on the move, building on the youths for the future”. A total of 350 youth from various schools and those out of school benefitted from the youth camp. ZRCS was at hand to mobilise its volunteers to respond and provide assistance to families affected by floods in Lusaka.

During the reporting period, ZRCS intensified its resource mobilisation efforts through commercial First Aid training and letting out of the newly renovated lodge in Livingstone. As a result of these efforts the National Society was able to meet some of its administrative costs. The ZRCS Secretary General was appointed to the Diplomacy and Humanitarian Advisory Board at global level by the IFRC in Geneva.

### Constraints or Challenges

The most significant challenge for ZRCS is financial sustainability, thus in the first half of the year, the National Society was beset with funding insecurity, which hampered implementation of development activities. The activities reported on were implemented using local resource mobilisation initiatives. This situation was duly acknowledged during the staff retreat and the governance and management meetings and has become a priority to be addressed in the next three years.

Despite training being conducted by the IFRC Southern Africa Regional Representation office on Navision accounting software in 2009, the system has not been fully institutionalized by the National Society. The use of local service providers that would offer easily accessible technical support in line with financial reporting requirements of the IFRC is recommended but the NS has no capacity or resources to pay the local technical support.

## Principles and Values

<b>Programme component: Promotion of Fundamental Principles and Humanitarian Values</b>	
Outcome 1	Knowledge, understanding and application of the Fundamental Principles and Humanitarian Values are enhanced (including non-discrimination, non-violence, tolerance and respect for diversity) at all levels of the NS.
<b>Programme component: Operationalization of Fundamental Principles and Humanitarian Values</b>	
Outcome 1	The dissemination of the Fundamental Principles and Humanitarian Values is an integral part of all NS programmes and activities.

### Achievements:

In an effort to enhance the skills of youth and new governing boards in portraying a positive image of the Red Cross at local level, ZRCS took advantage of the youth camp and branch induction sessions to train the youth and governance on various aspects of the Red Cross including volunteerism, legal framework, volunteer management, action planning, history of the Red Cross and the Fundamental Principles and Humanitarian Values.

ZRCS also conducted a training workshop for the media focussed on effective media reporting on disaster management. The workshop covered various topics including promotion of diversity and human dignity, Fundamental Principles and Humanitarian Values of the Red Cross during disasters.

At the launch of the non-remunerated blood donation programme which coincided with the World Red Cross day, ZRCS disseminated the Fundamental Principles and Humanitarian Values. For the World Red Cross day commemoration, ZRCS produced a 2010 full colour wall calendar, banners, flags, Club 25 brochures, T-shirts, voluntary blood donation brochures, television advertisements, radio advertisements and Red Cross jingles on blood donations. ZRCS received 75 spots of media coverage on television, radio and in the print media both at national level and international level.

## Constraints or Challenges

During the reporting period, the National Society had to implement programmes amidst serious internal and external challenges. Internal challenges include financial instability caused by lack of programme funding. Challenges from the external environment include increases in prices of fuel and the loss of value of the local currency against the United States dollar that meant the National Society had to deliver less against set targets though using its locally mobilised resources.

## Working in partnership

ZRCS has been partnering with the local NGOs and FBOs at the national and district levels. The partnership has mainly been centred on capacity building. The Ministry of Health remains the primary partner in the implementation of the HIV and AIDS programme. This partnership provides technical support in areas of prevention and VCT referrals. Other partners include Care Zambia, World Vision, Rapids, CRS, MSF, USAID and UNICEF. The NAC coordinates and monitors all HIV and AIDS related programmes in the country. ZRCS is a member of the National Epidemic Preparedness and Prevention Committee coordinated by the Ministry of Health. ZRCS has also partnered with the ZNBTS in activities related to blood donor mobilization in the country since May 2010.

ZRCS is also a member of the ZVAC. The flood relief operations were done in close collaboration with DMMU which took a coordination role during the operations. The communities targeted to receive assistance were selected in consultation with the DMMU in the five most affected districts of Lusaka, Kabompo, Mufumbwe, Mwinilunga and Zambezi. The ZRCS volunteers work in close collaboration with the environmental health technicians in rural health centres on community sensitization and hygiene promotion. Support from the IFRC is required to enhance collaboration and co-ordination, utilizing the Cooperation Agreement Strategy (CAS) approach that aligns needs, strategic directions, capacities and priorities as well as support received from partners.

## Contributing to longer-term impact

The introduction of Club 25 in the Zambian schools by the ZRCS, which comprise of young people between the ages of 16 – 25 years on voluntary non-remunerated blood donation will significantly contribute to the increase of safe blood in the blood banks around the country therefore reducing on the number of deaths in hospitals which occur due to blood shortages.

Club 25 members commit to regularly donate blood at least three to four times per year. The members also commit to maintain healthy lifestyles by not engaging in risky behaviors such as unsafe sex, drug abuse and alcohol abuse that can potentially will compromise the quality of blood they donate to the programme. Ensuring the quality of blood means that the individual Club 25 member will live a healthy lifestyle and maintain good physical and mental health including proper nutrition, adequate sleep and proper hygiene which is expected to continue into their adulthood. The longer term impact is a zero percent incidence of HIV infection among “Club 25” members.

The increase in numbers of people accessing safe drinking water and good sanitation facilities is expected to contribute to the reduction in disease incidence thus reducing general morbidity and mortality.

## Looking ahead

The 2008 revised Constitution and the Strategic Development Plan (SDP) 2009-2011 are the primary guiding documents for programming and policy direction. There are plans to revise the SDP to align it with the IFRC Strategy 2020. Future programming will ensure long-term and sustainable impact while not neglecting the immediate needs of people affected by disasters. ZRCS will also take an integrated approach to programming at all levels. The National Society will also seek to replicate the cooperation of branch and programme staff at implementation level as demonstrated in the just ended WatSan programme in the Southern Province.

It is the aspiration of the National Society to formalize partnerships with all partners with the support of the IFRC resource mobilization framework. Despite the scaling-down of the IFRC presence in country, ZRCS will continue to actively engage with the IFRC Southern Africa Regional Office.

Also key to the organization and its programming will be international instruments such as the MDGs, the Hyogo Framework, Strategy 2020 and other international declarations. ZRCS will continue aligning its programmes to the IFRC strategic direction, Johannesburg Declaration and Strategy 2020.

<b>How we work</b>	
<b><u>All Federation assistance seeks to adhere to the <a href="#">Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief</a> and is committed to the <a href="#">Humanitarian Charter and Minimum Standards in Disaster Response (Sphere)</a> in delivering assistance to the most vulnerable.</u></b>	
<p>The IFRC's vision is to: Inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.</p>	<p>The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:</p> <ol style="list-style-type: none"> <li>1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.</li> <li>2. Enable healthy and safe living.</li> <li>3. Promote social inclusion and a culture of non-violence and peace.</li> </ol>
<b>Contact Information</b>	
<p><b>For further information specifically related to this report, please contact:</b></p> <ul style="list-style-type: none"> <li>• <b>In Zambia:</b> Charles Mushitu, Secretary General of Zambia Red Cross Society, Lusaka; Email: <a href="mailto:zrcs@zamnet.zm">zrcs@zamnet.zm</a>; Tel. +260 211 25 36 61; Fax +260 211 25 22 19</li> <li>• <b>In IFRC Southern Africa Region:</b> Ken Odur, Regional Representative, Johannesburg, Email: <a href="mailto:ken.odur@ifrc.org">ken.odur@ifrc.org</a>, Phone: +27.11.303.9700, Fax: + 27.11.884.3809; +27.11.884.0230</li> <li>• <b>In IFRC Africa Zone:</b> Dr Asha Mohammed, Head of Operations, Johannesburg, Email: <a href="mailto:asha.mohammed@ifrc.org">asha.mohammed@ifrc.org</a>, Phone: +27.11.303.9700, Fax: + 27.11.884.3809; +27.11.884.0230</li> </ul> <p><i>For Resource Mobilization and Pledges to the programme (enquiries)</i></p> <ul style="list-style-type: none"> <li>• <b>In IFRC Africa Zone:</b> Ed Cooper; Resource Mobilization and Performance and Accountability Coordinator; Johannesburg; Email <a href="mailto:ed.cooper@ifrc.org">ed.cooper@ifrc.org</a>; Phone: Tel: +27.11.303.9700; Fax: +27.11.884.3809; +27.11.884.0230</li> </ul> <p><i>For Performance and Accountability (planning, monitoring, evaluation and reporting (enquiries):</i></p> <ul style="list-style-type: none"> <li>• <b>In IFRC Africa Zone:</b> Theresa Takavarasha; Performance and Accountability Manager, Johannesburg; Email: <a href="mailto:terrie.takavarasha@ifrc.org">terrie.takavarasha@ifrc.org</a>; Phone: Tel: +27.11.303.9700; Fax: +27.11.884.3809; +27.11.884.0230</li> </ul>	

# International Federation of Red Cross and Red Crescent Societies

MAAZM001 - Zambia

Mid-year Report 2010

Selected Parameters	
Reporting Timeframe	2010/1-2010/6
Budget Timeframe	2010/1-2010/12
Appeal	MAAZM001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

## I. Consolidated Response to Appeal

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
<b>A. Budget</b>	678,083	84,182	0	0	0	762,265
<b>B. Opening Balance</b>	3,512	204,290	3,347	0	109	211,257
<b>Income</b>						
<u>Cash contributions</u>						
<i>British Red Cross (from British Government)</i>	237,648					237,648
<i>Other</i>	-237,648					-237,648
<i>Shell</i>		-121,266				-121,266
<b>C1. Cash contributions</b>	<b>0</b>	<b>-121,266</b>				<b>-121,266</b>
<u>Outstanding pledges (Revalued)</u>						
<i>European Commission - Europe Aid</i>		-97,941				-97,941
<i>Swedish Red Cross</i>		0				0
<i>Swedish Red Cross (from Swedish Government)</i>		0	-58,737			-58,737
<b>C2. Outstanding pledges (Revalued)</b>		<b>-97,941</b>	<b>-58,737</b>			<b>-156,678</b>
<u>Income reserved for future periods</u>						
<i>European Commission - Europe Aid</i>		135,909				135,909
<i>Swedish Red Cross (from Swedish Government)</i>		4	20,445			20,450
<b>C3. Income reserved for future periods</b>		<b>135,914</b>	<b>20,445</b>			<b>156,359</b>
<b>C. Total Income = SUM(C1..C6)</b>	<b>0</b>	<b>-83,294</b>	<b>-38,291</b>	<b>0</b>	<b>0</b>	<b>-121,585</b>
<b>D. Total Funding = B + C</b>	<b>3,512</b>	<b>120,996</b>	<b>-34,945</b>	<b>0</b>	<b>109</b>	<b>89,672</b>
<b>Appeal Coverage</b>	<b>1%</b>	<b>144%</b>	<b>#DIV/0</b>	<b>#DIV/0</b>	<b>#DIV/0</b>	<b>12%</b>

## II. Balance of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
<b>B. Opening Balance</b>	3,512	204,290	3,347	0	109	211,257
<b>C. Income</b>	0	-83,294	-38,291	0	0	-121,585
<b>E. Expenditure</b>	-388	-36,055	40,461		336	4,354
<b>F. Closing Balance = (B + C + E)</b>	<b>3,124</b>	<b>84,941</b>	<b>5,516</b>	<b>0</b>	<b>445</b>	<b>94,026</b>

# International Federation of Red Cross and Red Crescent Societies

MAAZM001 - Zambia

Mid-year Report 2010

Selected Parameters	
Reporting Timeframe	2010/1-2010/6
Budget Timeframe	2010/1-2010/12
Appeal	MAAZM001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

## III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A		B					A - B	
<b>BUDGET (C)</b>		<b>678,083</b>	<b>84,182</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>762,265</b>	
<b>Supplies</b>								
Construction Materials		6,063					6,063	-6,063
Seeds, Plants	106,000							106,000
Water & Sanitation	123,000	1,980	10,700				12,680	110,320
Medical & First Aid	23,000							23,000
Teaching Materials	72,500	2,820					2,820	69,680
<b>Total Supplies</b>	<b>324,500</b>	<b>10,863</b>	<b>10,700</b>				<b>21,564</b>	<b>302,936</b>
<b>Transport &amp; Storage</b>								
Storage			390				390	-390
Distribution & Monitoring	6,000							6,000
Transport & Vehicle Costs	53,150	37,896	6,301	-5,778			38,419	14,731
<b>Total Transport &amp; Storage</b>	<b>59,150</b>	<b>37,896</b>	<b>6,691</b>	<b>-5,778</b>			<b>38,809</b>	<b>20,341</b>
<b>Personnel</b>								
International Staff			25,947	-31,780			-5,833	5,833
National Staff	19,500		103	1,185			1,288	18,212
National Society Staff	96,836	46,731	51,852	20,426		829	119,838	-23,002
<b>Total Personnel</b>	<b>116,336</b>	<b>46,731</b>	<b>77,902</b>	<b>-10,169</b>		<b>829</b>	<b>115,294</b>	<b>1,042</b>
<b>Workshops &amp; Training</b>								
Workshops & Training	109,500		2,487				2,487	107,013
<b>Total Workshops &amp; Training</b>	<b>109,500</b>		<b>2,487</b>				<b>2,487</b>	<b>107,013</b>
<b>General Expenditure</b>								
Travel	13,808		5,473	694			6,167	7,641
Information & Public Relation	13,000	3,061	35				3,096	9,904
Office Costs	4,816	1,250	1,446	669			3,366	1,450
Communications	4,000	454	8,691	7,432			16,577	-12,577
Professional Fees			1,030				1,030	-1,030
Financial Charges	2,000	-21,955	-746	-8,000		-300	-31,002	33,002
Other General Expenses	65,608	4,194	0	8,392			12,586	53,022
<b>Total General Expenditure</b>	<b>103,232</b>	<b>-12,996</b>	<b>15,930</b>	<b>9,187</b>		<b>-300</b>	<b>11,820</b>	<b>91,412</b>
<b>Programme Support</b>								
Program Support	49,547	-1	1,351	-2,548		-38	-1,237	50,784
<b>Total Programme Support</b>	<b>49,547</b>	<b>-1</b>	<b>1,351</b>	<b>-2,548</b>		<b>-38</b>	<b>-1,237</b>	<b>50,784</b>
<b>Operational Provisions</b>								
Operational Provisions		-82,106	-79,006	-31,152		-827	-193,090	193,090
<b>Total Operational Provisions</b>		<b>-82,106</b>	<b>-79,006</b>	<b>-31,152</b>		<b>-827</b>	<b>-193,090</b>	<b>193,090</b>
<b>TOTAL EXPENDITURE (D)</b>	<b>762,265</b>	<b>388</b>	<b>36,055</b>	<b>-40,461</b>		<b>-336</b>	<b>-4,354</b>	<b>766,619</b>
<b>VARIANCE (C - D)</b>		<b>677,695</b>	<b>48,127</b>	<b>40,461</b>		<b>336</b>	<b>766,619</b>	