

Revised Plan 2011



Sahel Region

Executive summary

The International Federation of Red Cross and Red Crescent Societies (IFRC)'s Africa Zone (Zone) covers 48 countries in sub-Saharan Africa and is divided into six functional/geographical regions namely the Sahel (Dakar), Indian Ocean Islands (Mauritius), West Coast (Abuja), Central Africa (Yaoundé), East Africa (Nairobi), and Southern Africa (Johannesburg). The Sahel region based in Dakar covers nine countries; Burkina Faso, Cape Verde, Gambia, Guinea Bissau, Guinea, Mali, Mauritania, Niger and Senegal. The Sahel Regional Representation acts as one of the two operational support hubs with provision for technical programme support upon National Societies (NS) request, as well as zone-level roles in key support services (including finance, logistics, information technology/telecommunication and human resources) and humanitarian diplomacy (including communications, resource mobilisation, and performance and accountability).

Sahel National Societies (NS)' priorities for 2011 are guided by the IFRC Strategy 2020. The 17th session of the [General Assembly](#) of the IFRC, held in November 2009 in Kenya, adopted [Strategy 2020](#), which is built upon new strategic thinking and designed to better prepare Red Cross and Red Crescent NS to effectively address the humanitarian challenges of the coming decade. The IFRC regional representation priorities are hence guided by the strategic aims of Strategy 2020 to support the development and work of NS, whilst supporting the NS obligation as outlined in the 7th Pan African [Johannesburg Commitments](#) and the African Red Cross and Red Crescent Health Initiative (ARCHI) 2010.

The Sahel programme strategy comprises of disaster management (DM), health and care, (H&C) NS development (NSD) and principles and values (P&V), which will include migration issues. For 2011, the strategy will shift focus from regional to country-based programme integrated approach. The Sahel Regional Representation support to Sahel NS will mainly focus on strengthening disaster risk reduction (DRR) projects including adaptation to climate change; early warning system development; disaster preparedness and response. The NS will meet these targets through enhanced community-based disaster management initiatives, establishing and working within networks and through partnerships supporting disaster risk management (DRM), including food security programmes.

With the on-going support from the DFID, the Irish and Spanish Government, Swedish and Spanish Red Cross Societies, IFRC will scale-up support to NS in community-based risk reduction activities. The existing partnerships with governments and inter-governmental organisations such as the Comité Inter-Etats pour la lutte contre la sécheresse au Sahel (CILSS) and the African Centre for Meteorological Applications and Development (ACMAD) will be further developed and strengthened especially in the area of disaster management. The partnerships with academic institutions such as Columbia University's IRI will be further strengthened to facilitate National Society work in risk reduction and food security.

The nine NS envisaged to also scale-up **health and care** activities by focusing on maternal and child health, malaria prevention and control, provision of clean water and sanitation (WatSan) services, as well as reducing the risk of and response to public health emergencies. In terms of social mobilization, the IFRC will provide support during national mass vaccination campaigns and the distribution of insecticide treated nets (ITN). As part of the global programme, the Sahel team will continue coordinating the human pandemic preparedness (H2P) at country level.

The regional representation will also increase technical support in the prevention of HIV and AIDS and reducing the vulnerability through care and support activities. Three National Societies in the Sahel region are already part of the Global Alliance on HIV.

A new approach to **NS development** (NSD) will be deployed through the regional and country representations, which have closer relationships with the membership. The approach entails integration into the NS structure with streamlined reporting lines, thereby increasing IFRC responsiveness to the NS needs and priorities. Priority areas for NS development include: strengthening capacity in programming; governance and leadership development; accountability and programme management; resource mobilisation; encouraging cooperation; strategic partnerships; operational alliances and knowledge sharing.

In 2011, the Sahel Regional Representation will focus on strengthening NS structures in terms of governance and management and strengthening capacities in service delivery to the most vulnerable. Technical support will continue according to the IFRC intensified capacity building (ICB) framework for the beneficiary NS. The technical support aims to facilitate scaling-up of activities by providing strategic support in the formulation and implementation of an integrated programming approach. Guidance will be provided to NS to ensure effective volunteers management. Through the funding support provided by the Spanish Government, institutional support to the eight NS will be improved, whilst creating opportunities for additional funding support to cover core cost, structural and finance development. The NS development programme will also encourage and facilitate knowledge sharing through peer-to-peer support.

Migration will also be an important area of focus given the challenges being experienced by the NS in dealing with humanitarian consequences of population movement since the region is both a producer and a transit point for migrants to Europe. This migration also has some important political and social implications in both the production and reception States and civil societies. NS such as the Mauritanian Red Crescent, the Senegalese and Mali Red Cross are implementing projects and activities to assist the migrants. Movement partners including Spanish Red Cross and the International Committee of Red Cross (ICRC) are providing support, which will more be structured and coordinated in 2011. Partner NS including Swedish and Norwegian Red Cross have also expressed interest to work with the Sahel Regional Representation on migration.

In order to define a common Movement strategy based on the resolution of the last [International Conference](#), the Sahel Region intends to carry out a study on migration (causes and definition of roles and responsibilities of the IFRC) to better understand the context, and to facilitate effective and more strategic support and advice to the NS in their work with migrants. The region will also foster partnerships within the Movement and externally including with UN agencies (UNICEF, UNHCR, UNFPA, IOM, UNAIDS) and other NGOs to fight all forms of violence, discrimination, exclusion and female genital mutilations (FGM).

The total 2011 budget of the strategy is CHF 3,493,539.

[Click here to go directly to the attached summary budget of the plan](#)

Regional context

The nine countries of the Sahel region are among the poorest in the world. The countries are also facing multiple hazards related to climate change including health emergencies and epidemics including meningitis, polio, cholera, and yellow fever. The epidemics and food shortages heavily affect children among other vulnerable groups in Burkina Faso, Mali, Guinea and Niger. The region is also floods prone whilst concurrently experiencing isolated cases of drought. The poor human development indicators are in infant and child mortality and maternal mortality rate. Despite the success in the fight against infant mortality in children under five years, the number of deaths among the under five is still unacceptable in the Sahel. In 2006, 167 children out of 1,000 live births died before their fifth birthday (MDGs Report, 2008). The health situation is marked by infant mortality rates among the highest in Africa result of moderate or severe malnutrition, vitamin A deficiency, acute respiratory infections, bad child nutrition and hygiene practices are among the factors responsible for diarrhoea, including cholera.

Malnutrition and food insecurity are currently among the biggest challenges in the Sahel region. Precarious weather and environmental conditions, added to consecutive food crises caused relatively high malnutrition rates among children under five. In 2006, this rate reached 39 per cent in Burkina Faso, 35 per cent in Mauritania, 33 per cent in Mali, and 15 per cent in Niger. Food insecurity is still looming over in these countries. Despite multiple initiatives and efforts, the malnutrition indicators have remained stable during the last decade. The Inter governmental Panel on Climate Change predictions for the coming years will have a significant impact on human life in the Sahel. The safe water coverage is relatively good in this region, about 75 per cent, although there are still some pockets of widespread vulnerability due to the lack of access to adequate sanitation facilities (13 per cent), (Human Development Index (HDI), 2006), which is a very big challenge and the main cause of diarrhoeal and other parasite-related diseases that affect children's nutritional status in the Sahel countries. Malaria remains the major cause of child mortality and morbidity as in average less than 10 per cent of children under five sleeps under bed nets (HDI, 2006).

Epidemiological HIV situation is of serious concern in the Sahel region and is still mixed in the Sahel countries. Although most of the Sahel countries are below three per cent prevalence, the epidemic is concentrated in particular geographic areas, in conflict or post conflict locations, among women and other specific groups. In Senegal, the prevalence has stabilized around one per cent; however, it is almost 20 per cent among sex workers. The HIV prevalence rate among women between 15-49 years is twice as high as that of men of the same age range (1.9 versus 0.9 per cent) according to statistics from UNAIDS. In Guinea Bissau, it becomes more widespread (4 per cent) and more and more young people are paying a heavy toll. People living with HIV (PLHIV) and their families bear the burden of the cost of care. HIV infection is concentrated around specific groups (men having sex with men, sex workers) with prevalence rates up to 20 per cent; socio-professional categories (soldiers, miners, fishers etc) with a prevalence rate that is often above 3 per cent.

The threat of human pandemics such as influenza is more real than ever. The threat does not spare any country and Sahel countries are among the most vulnerable. The slight progress made towards achieving the [Millennium Development Goals](#) are threatened by the rise of food prices that deeply affects the vulnerable groups and questions the success registered in the fighting against child malnutrition. Moreover, the Sahel region is specially affected by the consequences of climate change of which the effects are increasingly affecting the economies and livelihoods of vulnerable groups.

The Sahel region is also source and transit area for migrant flows to Europe. The increasing vulnerabilities to natural hazards in this region where agriculture and farming are the main sources of income essentially dependent on climate change added to the recurrent political instability in most of the Sahel countries (Guinea, Mauritania) ethnical and religious rebellions (Mali, Niger), are weakening communities and lead to important migration flows toward European countries. A rapid increase of the urban population and uncontrolled urbanization has caused new challenges related to urban disasters and violence with a potential for political disturbance. The urban populations are becoming poorer and have fewer coping mechanisms than those in rural areas. This situation is having social, economic and humanitarian consequences of unknown proportions. The present global economic crisis may add to the problem by exposing illegal migrants to severe measures of restriction at the entry of European borders. Programmes to support the returnees migrants are supported in Mauritania and Senegal by the Spanish Red Cross and in Mali by the ICRC.

Priorities and current work with partners

The Sahel Regional Representation's priorities are aligned to the Strategy 2020 and are responsive to the humanitarian challenges in the region. The regional NS DM planning meeting held in Abidjan (August 2008) recommended scaling-up disaster response capacities as a priority support area for NS in Sahel region. Related projects which started in 2009 will continue receiving support from AECID and DFID.

Food security is a priority programme component in the Sahel region; several NS have developed and are implementing food security projects, some of which are funded through the DFID partnership with the IFRC. Another five NS have also developed food security projects as part of the Africa Food Security Initiative. The food security programme will be integrated into a global strategy of risk reduction and the development of the community capacities. Three countries, including Burkina Faso, Niger and Senegal have been identified by the as part of the partnership on disaster risk reduction (DRR) with the World Bank. However, most of the NS have also expressed interest to be part of the IFRC Global Alliance on DRR.

The implementation of integrated management of childhood illnesses (IMCI) is the result of the collaboration between the IFRC, the Irish Government and the Japanese Red Cross. This programme is implemented in Gambia, Senegal and Mali. The Sahel HIV programme was funded by the Japanese and Irish Red Cross societies. The regional health strategy has been funded through the Sahel appeal that is mainly covered by the Irish Government. A new strategy plan is expected to be supported in Mali and Senegal National Societies.

Africa, Caribbean, and Pacific (ACP) EU-water facility projects will be formulated for Burkina Faso, Mali, Mauritania, and Niger with the support of Belgian, Danish, Finnish, French and Spanish Red Cross Societies. Water and sanitation activities have been funded through the Sahel appeal by the Irish Government, and the Japanese Red Cross. Qatari Red Crescent is planning to fund water and sanitation projects in Niger since 2009 and closing in 2011.

The human pandemic influenza threat is a regional priority, with the development of NS' capacities on preparedness. The NS of Mali and Senegal have been supported through the partnership between the IFRC and the USAID with pilot project in human pandemic preparedness (H2P). Sahel NS will also focus on community-based health initiatives and First Aid including malaria, nutrition and integrated approach of health, water and sanitation, HIV activities and health in emergencies.

The Sahel NS development (NSD) programme is mainly supported by Danish and Swedish Red Cross, Irish Government, DFID and Spanish Agency for International Cooperation and Development (AECID). The integration of health and NSD activities provides a better framework for multilateral and bilateral partnership development. Requests for technical support to strategic planning processes, governance issues and other capacity building needs are also arising from many NS that have to engage in a change process. Volunteer management will also be given a particular attention. For that purpose, the OD strategy needs to be refocused from regional to country based approach in order to provide timely tailor-made membership services.

Partners	Programmes
Danish Red Cross	Health / NSD (Mali and Guinea) CB and VMO
Swedish Red Cross	NSD (Sahel) / VMO, Health PHE, HIV
Irish Government	NSD (Sahel) / VMO (Niger), Health MNCH / IMCI
Canadian Red Cross	Health and NSD (Mali and Mauritania)
Icelandic Red Cross	NSD/Finance Development (Gambia)
Finnish Red Cross	Public Health Emergency
Norwegian Red Cross	Health Measles Campaign
Australian Red Cross (Community Health)	Community Health/Nutrition
Japanese Red Cross	NSD, HIV programmes and MCH
DFID	Health and Disaster Management
UNICEF	Health IMCI
World Health Organization (WHO)	Health IMCI
WFP	Health /Nutrition
European Union	Disaster Management
AECID	Disaster Management and NSD
Qatari Government	Health water and sanitation
DFID;ECHO	Health water and sanitation in Guinea

Secretariat supported programmes in 2010-2011

Disaster Management

a) The purpose and components of the programme

Programme purpose

Save lives, protect livelihoods, and strengthen recovery from disaster and crises.

The Disaster Management programme budget is CHF 1,472,895.

Programme component 1: Disaster Preparedness

Outcome 1	Improved disaster preparedness within NS of Gambia, Burkina Faso, Guinea, Mali and Senegal that builds safer and resilient communities.
Outcome 2	Vulnerability capacity assessment activities (VCA) are conducted in targeted NS; Gambia, Burkina Faso, Guinea, Mali and Senegal.
Outcome 3	NS have a contingency plan for the most recurrent hazards.
Outcome 4	Non-food items are strategically pre-positioned closer to targeted beneficiaries in a coherent zonal logistic and DM approach. The concerned countries include Burkina.

Programme component 2: Disaster response and recovery

Outcome 1	NS are supported in developing and implementing disaster response and recovery strategies.
Outcome 2	National disaster response team (NDRT), branch disaster response teams (BDRT) and regional disaster response team (RDRT) strengthened and well equipped to respond to emergencies.

Programme component 2: Disaster risk reduction (DRR)

Outcome 1	The culture of DRR is promoted in schools in the targeted countries under the framework of the following quotation: "risk reduction begins at school".
Outcome 2	DRR projects including the mitigation of impact of natural hazards projects are effectively conducted in selected communities and documented.

Programme component 3: Food Security

Outcome 1	Food security community-based projects are implemented and beneficiaries and Red Cross/Red Crescent volunteers are trained to achieve project objectives in Mauritania, Niger, and Guinea.
Outcome 2	NS are strengthened in organizational capacity and have developed community resilience through networks of prevention, knowledge and education in food security in Burkina Faso, Mauritania, Mali and Niger.
Outcome 3	Country-based Movement partnership established to support Sahel regional food security strategy and specific technical and funding support to the NS of Burkina Faso, Cape Verde, Gambia, Guinea, Guinea Bissau, Mali, Mauritania, Niger and Senegal.

b) Potential risks and challenges

- Lack of qualified human resources for the management of programmes in many of the NS.
- Limited NS capacity in resource mobilisation and funds management, which consequently affected narrative and financial reporting.
- High turnover at NS level particularly for disaster management focal persons, this critically affects sustainability and coordination of the activities.
- Most NS in Sahel region lack clear disaster management plan.

Health and Care

a) The purpose and components of the programme

Programme purpose

Enable healthy and safe living

The Health and Care programme budget is CHF 1,256,704

Programme component 1: Community-based health programmes and First Aid

Outcome 1	Improved maternal, newborn and child health (MNCH) through NS community-based activities, including safe motherhood and child health initiatives, vaccination and nutrition activities in the Gambia, Mali and Senegal.
Outcome 2	Increased capacity of communities and volunteers who are prepared and are able to respond to First Aid needs and identify health priorities in their communities.
Outcome 3	The number of voluntary non remunerated blood donations increased in Gambia, Burkina Faso and Guinea to support children under five, pre and post-delivery women, HIV and malaria infected, and the victims of accidents.
Outcome 4	The protection of vulnerable populations against malaria has increased in Burkina Faso, Gambia, Mali, Niger and Senegal among children under five, pregnant and breast feeding woman, PLHIV and other vulnerable groups.
Outcome 5	NS' involvement in social mobilization during national initiatives to eradicate polio and reduce measles morbidity and mortality is ensured by the mobilization of volunteers in Burkina Faso, Guinea, Mali and Niger.

Programme component 2: Water and sanitation (WatSan)

Outcome 1	WatSan proposals are elaborated and presented to ACP for possible funding support for Burkina Faso, Guinea Bissau, Mali, Mauritania, Niger and Senegal.
Outcome 2	NS are provided with support on epidemic diarrheal prevention and response in Guinea, Guinea Bissau and Niger.
Outcome 3	NS are technically assisted in the formulation and in the implementation of bilateral WatSan projects in Niger and Senegal
Outcome 4	Donors or PNS are supported in the identification of the needs for WatSan project and the capacities of the NS upon request.

Programme component 3: HIV and AIDS

Outcome 1	Vulnerability to HIV and its impact are reduced through the prevention of further infections, the support to HIV affected people and the reduction of stigma and discrimination.
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Programme component 4: Public Health Emergencies

Outcome 1	Access to preventive health services has improved in targeted areas in Burkina Faso, Gambia, Mali, Niger, Guinea Bissau and Guinea.
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Programme component 5: Human Pandemic Preparedness (H2P)

Outcome 1	H2P programme continue with actions to prevent and contain avian influenza outbreaks through community-based health programme and education in Mali and Senegal.
Outcome 2	Increased pandemic preparedness through contingency planning, effective preparation and response actions in Mali and Senegal.

b) Potential risks and challenges

- Limited resource to support the health and care planned activities at regional and NS levels.
- The NS has insufficient capacity to initiative and implement health and care activities based on their own plan of action. Support from the IFRC and other partners should be enhanced.

National Society Development (NSD)

a) The purpose and components of the programme

Programme purpose

Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.

The National Society Development programme budget is CHF 265,579.

Programme component 1: Improving the National Societies legal base

Outcome 1 Updated statutes are available in Senegal and Mali.

Programme component 2: Improving National Societies leadership capacities

Outcome 1 Better functioning and collaboration between governance and management in Mauritania and Senegal.

Programme component 3: Improving National Societies professional capacities

Outcome 1 Adequate and trained staff is available for NS in compliance with human resources best practices and regulations in Mali, Mauritania, Guinea, Guinea-Bissau and Senegal.

Programme component 4: Supporting Sahel NS in programming and planning

Outcome 1 Strategic plans are reviewed in Gambia, Guinea, Guinea Bissau and Senegal.

Programme component 5: Improving NS Volunteers' management systems

Outcome 1 Updated volunteering policy regulating volunteers insurance, limitation of volunteers work time, motivation system (benefit) and functioning data base are available in the NS of Mali, Mauritania, Niger and Senegal.

Programme component 5: Improving NS financial sustainability

Outcome 1 Support to business planning process in Mali 2010 and Guinea 2011 providing management tools for income generating activities.

Outcome 2 Up-to-date annual reports are available on volunteers' management through an information system set up to generate the relevant data in Mali, Mauritania, Niger and Senegal.

b) Potential risks and challenges

- Some NS have limited resources to support leadership position, hence the capacities are compromised.
- Support is needed to enhance the NS absorption capacities and leadership engagement in development projects.
- Performance and accountability capacities are weak in most NS, which affects timeliness and quality in planning, monitoring, evaluation and narrative and financial reporting.
- Lack of NSD human resources in Sahel region to support NS in the implementation of their capacity building projects.

Principles and Values

a) The purpose and components of the programme

Programme purpose

To promote respect for diversity and human dignity, and reduce intolerance, discrimination and social

The Principles and values budget is integrated into thematic programmes

Programme component 1: Child trafficking

Outcome 1 Increase awareness on issues related to child trafficking in Burkina Faso. The target groups are Children, government officials and communities.

Role of the secretariat

The secretariat coordination budget is CHF 498,360.

a) Technical programme support

The Sahel Regional Representation office will continue providing technical support to the membership in programming, capacity development through collaboration and liaising with technical departments at the Africa Zone office in Johannesburg. In collaboration with the zone office programme coordinators the team will support NS focusing on institutional development, capacity building, planning and programme implementation and coordination.

In terms of community health and HIV programmes the Sahel team will support in CBHFA rolling plans and formulating health and HIV project proposals in the framework of the Global Funds (Malaria, HIV and Tuberculosis). The disaster management programme at NS will equally receive support from the regional DMC and food security delegates. The Principles and Values component will be supported by the communication delegate and officer as well as the migration delegate at zonal level. Technical support will also be provided at field level during emergency health interventions, polio and measles sensitization campaigns, as well as H2P to ensure effectiveness and relevancy during response.

The performance and accountability function will ensure that planning, monitoring, evaluation and reporting systems and structures are enhanced for efficient and effective management of programmes. This will facilitate programme improvement and accountability as a direct impact of consistent performance measurement, tracking and reporting. There will be specific focus on enhanced quality assurance in reporting and improved measurements of impact and outcomes.

b) Partnership development and coordination

The Sahel regional office will endeavour to provide optimal coordination services to the membership and facilitate cooperation and strategic partnerships within and outside the Movement in collaboration with the Africa Zone office. The office will facilitate peer-to-peer capacity building and support through exchanges of best practices during regional forums.

The Sahel team will continue supporting the Mali Red Cross and Red Cross of Guinea to facilitate CAS/OA process. The other Sahel Red Cross Societies will be involved in the implementation of these IFRC cooperation strategies upon request. For new funding opportunities apart from the annual appeal process, the Sahel team will provide technical support to NS for the submission of new project proposals to donors. Concerning other partnerships development and coordination, the Sahel team will assist NS by strengthening existing partnerships with PNS and other non-Movement partners. Regular partnership meetings will be held at country level with bilateral partners where needed with clear road maps in order to better coordinate our efforts on supporting NS.

A new basis of cooperation is being set up between the IFRC, ICRC and partners in the field with a common understanding of the country context, common goals and approaches. The Danish Red Cross has already deployed a technical staff member to Guinea to work in collaboration with the IFRC on the restructuring process of the NS after the establishment of a new governance team.

c) Representation and advocacy

In the framework of the sub-regional network set up in order to encourage cooperation and coordination between NS, regular Sahel regional working group meetings will be held with the IFRC's technical and financial support. In these meetings, NS will express their expectations from the IFRC Regional Representation and PNS. They will also use the platform to discuss issues related to leadership development, membership services, General Assembly and other international events. The Sahel team will strive to promote the visibility of NS' activities in service delivery to the most vulnerable through the regional monthly magazine shared within the Red Cross Movement and with other partners.

The IFRC presence in the field will be used for profile raising, strengthening partnership opportunities and promoting IFRC's policies in order to create the basis for effective partnerships through the existing cooperation mechanisms, namely Cooperation Agreement Strategies (CAS) and Operational Alliances (OA). The IFRC's Secretariat will also develop and expand links with all stakeholders (local and international media, diplomatic missions, local authorities, NGOs, including intensified advocacy).

Promoting gender equity and diversity

The worsening of women's health status was a real concern arising from inequalities between girls and boys concerning access to educational and health services because of cultural and religious barriers that clearly affect gender issues. The NS will ensure active participation of women in decision making particularly increasing their voice on health and child welfare. Improving the economic status of women will also be key to their involvement in the decision-making process.

The analysis of the roles of men and women, especially during the PHAST process, will facilitate the integration of gender issue in the activities. Health programmes such as the IMCI in Senegal and Gambia and the Global Alliance on HIV programmes in Guinea and Burkina Faso will have women as main beneficiaries. Women are also being the target group of several food security projects and as well as being the entry point for community participation in hygiene promotion and risk reduction.

Quality, accountability and learning

Most of the Sahel NS will have their strategic plans ending in 2010 and assessments and review of the related will continue in 2011, with IFRC's technical support and in coordination with partners in the field mainly in Guinea-Bissau, Burkina-Faso, Mali, Niger, Mauritania, Gambia and Senegal. Senegal and Gambia Red Cross Societies will benefit from capacity building trainings on project monitoring and evaluation as well as narrative and financial reporting. The establishment of monitoring and evaluation systems will be of priority in 2011 whilst information on best practices is shared between NS and within the Movement. The Secretariat will support NS in developing a monitoring plan with indicators to measure the progress of programme implementation. The Sahel regional team will periodically evaluate NS community health interventions to determine Red Cross contributions in improving the health status of vulnerable populations in Sahel countries.

The implementation of IDWARC programme in the Sahel after an assessment of the NS' financial systems and the recommendations will boost finance development activities by with a real professionalizing finance management systems and procedures. The Sahel NS will start using the manuals for finance and administration procedures developed; thanks to this institutional development programme that will certainly improve the management of funds and quality of financial reports. A human resource audit will be conducted by an external auditor, and recommendations acted on by eight out of the nine Sahel National Societies (Cape-Verde, Gambia Guinea, Guinea-Bissau, Mali, Mauritania, Niger and Senegal).

[click here to view the budget summary below](#)

How we work

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.

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.

Contact information

For further information specifically related to this plan, please contact:

- **In IFRC Sahel Regional Representation:** Momodou Lamin Fye, Regional Representative, Dakar; Email: momodoulamin.fye@ifrc.org; Phone: +221.33.869.3640; Fax: +221.33.820.2534
- **In IFRC Africa Zone:** Asha Mohammed: Head of Operations, Johannesburg; Email: asha.mohammed@ifrc.org; Phone: Tel: +27.11.303.9700; Fax: +27.11.884.3809; +27.11.884.0230

For Resource Mobilization and Pledges (enquiries)

- **In IFRC Africa Zone:** Ed Cooper; Resource Mobilization and Performance and Accountability Coordinator; Johannesburg; Email ed.cooper@ifrc.org; Phone: Tel: +27.11.303.9700; Fax: +27.11.884.3809; +27.11.884.0230

For Performance and Accountability (planning, monitoring, evaluation and reporting (enquiries):

- **In IFRC Africa Zone:** Theresa Takavarasha; Performance and Accountability Manager, Johannesburg; Email: terrie.takavarasha@ifrc.org; Phone: Tel: +27.11.303.9700; Fax: +27.11.884.3809; +27.11.884.0230

MAA61004 - Sahel Region

Budget 2011

Budget 2011

All figures are in Swiss Francs (CHF)

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	Total
Supplies	190,000	70,000				260,000
Land, vehicles & equipment	30,000	16,500				46,500
Transport & Storage	120,000	47,000				167,000
Personnel	606,000	606,000	117,000			1,329,000
Workshops & Training	170,000	40,000	40,000		110,000	360,000
General Expenditure	267,000	400,504	92,370		357,944	1,117,818
Depreciation						
Contributions & Transfers						
Programme Support Services	89,895	76,700	16,209		30,416	213,221
Contingency						
Total Budget 2011	1,472,895	1,256,704	265,579		498,360	3,493,539