

# Mid-Year report



International Federation  
of Red Cross and Red Crescent Societies

## Central Africa Region

Appeal No. MAA62001

29 August 2011

This report covers the period 1 January 2011 to 30 June 2011.



From 31<sup>st</sup> May to 4 June 2011, CARREP trained the programmes coordinators of Red Cross NS of Central Africa on projects/programmes planning process in Brazzaville / IFRC

## In brief

**Programme outcome:** In line with Strategy 2020, the Central Africa Region aims to contribute to five main outcomes: 1) save lives, protect livelihoods, and strengthen recovery from disasters and crises; 2) Enable healthy and safe living; 3) Increase Red Cross/Red Crescent capacity to address the most urgent situations of vulnerability; 4) Promote social inclusion and a culture of non-violence; 5) Facilitate the implementation of programmes in favour of vulnerable people in Central Africa

**Programme(s) summary:** Towards the end of 2010, the Federation's Central Africa Regional Representation (CARREP) reissued its 2010-2011 plan as a revised plan for 2011. This midyear report highlights the achievements of our 2011 plan during the first half of 2011, and also presents CARREP's revised objectives and budget for the second half of 2011. Additionally, some activities initially planned have been dropped based on revised expectations of donor priorities during the second half of 2011.

The achievements made during this reporting period were in the areas of disaster management, health and care, organizational development and capacity building. Some of the major achievements included:

- The launching of a food security project in the Central African Republic (CAR) with support from the Japanese Red Cross Society.
- the completion of discussions for the signing of agreements with UNHCR to assist CAR refugees in Cameroon on the one hand, and refugees from the Democratic Republic of the Congo (DRC) in Congo Brazzaville on the other hand;
- the launching and implementation of both operations in Cameroon and Congo Brazzaville with support from UNHCR; the completion of PROLUSIDA (a three-year project to fight against HIV/AIDS along the Douala-Ndjamena and Douala-Bangui highways, which started in February 2009) with joint support from the European Union and the Central African

- Economic and Monetary Commission (EU-CEMAC); and
- the launching of discussions with partners for the extension of this project to other Central Africa countries.

Other achievements were the response to emergency situations such as violent winds and floods in Gabon, a train accident, floods, polio, chikungunya and measles outbreaks in Congo Brazzaville, violent winds in CAR, as well as population movements and cholera and measles outbreaks in Cameroon. CARREP also organized a regional planning workshop in Brazzaville, which enabled Central Africa National Societies (NS) to identify their priorities for the next four years.

A serious institutional crisis broke out at Gabon Red Cross early this year, leading to the suspension of the Governance and Management teams, as well as all local committees by the Gabonese Government. This has made it extremely difficult to carry out humanitarian activities in Gabon. However, CARREP and ICRC have been maintaining contacts with the Gabonese Government to find quick solutions to the crisis and enable the NS to continue assisting vulnerable people in the country.

**Financial situation:** The total revised 2011 budget is CHF 3,010,148, of which CHF 1,762,093 (59 per cent) was covered during the reporting period (including opening balance). Overall expenditure during the reporting period was CHF 1,139,209, corresponding to 38 per cent of the revised budget figure and 65 per cent of the funds available.

Overall expenditure was slightly below the targeted 40 per cent of the annual budget because most of the funding came in towards the end of the period, not leaving enough implementation time before 30 June. Major contributions from UNHCR were delayed by the discussions surrounding the signing of agreements for the Cameroon and Congo Brazzaville operations.

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

See also:

- Emergency appeal on cholera outbreak in Cameroon ([MDRCM011](#) and the corresponding operations updates No 1 & 2)
- Emergency appeal on Polio outbreak in Congo Brazzaville ([MDRCG006](#) and the corresponding operations updates No 1, 2 & 3)
- DREF operation on Violent Winds in CAR ([MDRCF008](#))
- DREF operation on chikungunya outbreak in Congo Brazzaville ([MDRCG007](#))
- DREF operation on Measles outbreak in Congo Brazzaville ([MDRCG008](#))
- DREF operation on Violent Winds and floods in Gabon ([MDRGA005](#) and the corresponding DREF operation update No 1)
- Donor-specific pledge-based reports

**Number of people we have reached:** More than 6,000,000 people benefited directly from secretariat-supported programme interventions during the reporting period. These beneficiaries can be classified as follows: (82,000 CAR refugees in the East and Adamaoua regions of Cameroon, 59,000 DRC refugees in Likouala (Congo Brazzaville); 87,500 people for the Emergency appeal on cholera outbreak in Cameroon; about 4 million people for the Emergency appeal on Polio outbreak in Congo Brazzaville; 1,626 people for the DREF operation on Violent Winds in CAR; 1,500,000 people for the DREF operation on chikungunya outbreak in Congo Brazzaville; 220,000 people for the DREF operation on Measles outbreak in Congo Brazzaville; 1,015 people for the DREF operation on Violent Winds and floods in Gabon; about 20,000 people for the PROLUSIDA project; 3,000 people for the food security project in CAR; more than 10,000 people were sensitized on climate change in Cameroon; and 150 people living with HIV/AIDS (PLHIV) within the framework of the Global Alliance. We believe that each of the 6,000,000 people reached directly by the programme supported by the secretariat has extended the benefit to at least 1 other person considered as indirect beneficiary. Therefore, the number of indirect beneficiaries can be estimated at 12,000,000 people reached in Central Africa. It is anticipated that about 2 million people will benefit from activities planned for the rest of the year, as the polio outbreak appeal intervention is completed.

**Our partners:** Inside the Movement, CARREP received contributions from the Swedish, Norwegian, Japanese and Finnish Red Cross Societies. While the Swedish Red Cross contributed to the Disaster Management, Health & Care, Organizational Development and Coordination components of the regional budget, the Norwegian Red Cross contributed to disaster management, the Japanese Red Cross contributed to malaria prevention and food security in CAR, and the Finnish Red Cross contributed to HIV/AIDS in CAR. The Canadian Red Cross also deployed a delegate to Cameroon to help CARREP with the implementation of the cholera emergency operation for 3 months beginning in June 2011.

The major contributions to the plan budget came from outside the Movement, namely from the United Nations High Commission on Refugees (UNHCR) to facilitate the implementation of refugee operations in Cameroon and Congo Brazzaville. The World Food Programme (WFP) has also been supporting the nutrition initiatives of Cameroon Red Cross within the framework of the operation to assist CAR refugees in Cameroon. On behalf of the National Societies concerned, the IFRC wishes to thank Movement and external partners for their support to this plan.

## Context

During the first half of 2011, the socio-political situation in Central Africa was relatively calm. Presidential elections were conducted in the Central African Republic (CAR) with limited disorder. A serious institutional crisis broke out at Gabonese Red Cross Society early this year, leading to the suspension of the Governance and Management teams, as well as all local committees by the Gabonese Government. This made it extremely difficult to carry out humanitarian activities in Gabon. However, CARREP and ICRC have been maintaining contacts with the Gabonese Government to find quick solutions to the crisis and enable the NS to continue assisting vulnerable people in the country.

Meanwhile, the humanitarian situation did not improve within the region during the first half of 2011. Populations in Cameroon, Congo Brazzaville, Gabon, and Central African Republic (CAR) were affected by violent winds and floods, chikungunya, measles, poliomyelitis and cholera. Violent winds and floods occurred in Gabon in early 2011 and a DREF operation was launched to respond to the situation. There were poliomyelitis, chikungunya and measles outbreaks in Congo Brazzaville. While an emergency appeal was launched and implemented to respond to polio outbreak, DREF operations were launched to respectively respond to measles and chikungunya. A serious cholera outbreak occurred in Cameroon affecting almost all the 10 regions of the country; an emergency appeal was launched to respond. Negotiations with the Canadian Red Cross led to the deployment of a cholera delegate to help with the implementation of the emergency appeal. Another DREF operation has been launched to assist people affected by violent winds in Bangui, the capital city of the CAR Red Cross society.

The various emergency situations that occurred and the institutional crisis in Gabon had a negative impact on the work of both National Societies and the Secretariat in the sense that much effort was concentrated in the response activities. Most of the activities that were planned for Gabon were not carried out as a result of the crisis at the NS. Another factor that impacted the work of NS and the Secretariat during the first half of 2011 was the extremely timid response by donors to the 2011 plan and the various emergency operations that were launched. In most cases, DREF allocations were instrumental in keeping the humanitarian action ongoing.

## Progress towards outcomes

### Disaster Management

<b>Programme Purpose:</b> save lives, protect livelihoods, and strengthen recovery from disasters and crises	
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<b>Programme component 1:</b>	<b>Outcome 1:</b> The NS of Cameroon, Congo Brazzaville, CAR and Gabon have disaster preparedness strategic plans, and their response systems are
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<p>National Society disaster management planning and organizational preparedness</p>	<p>made operational through the updating of their contingency plans and the finalization of the Cameroon-Chad-CAR cross-border contingency plan.</p> <ul style="list-style-type: none"> <li>• To help the CAR Red Cross NS to prepare for the presidential election that took place early this year, CARREP supported the NS with the updating of their contingency plan for presidential election.</li> <li>• CARREP supported the CAR Red Cross NS with the development of their five-year strategic development plan (SDP) to be discussed during the General Assembly later this year.</li> <li>• In Cameroon, CARREP participated alongside with the Cameroon Red Cross Society in the revision of Cameroon's national contingency plan, which was organized by Cameroon Government's Directorate for Civil Protection (DCP).</li> <li>• CARREP also supported Cameroon Red Cross to update their contingency plan in line with the newly revised national contingency plan.</li> <li>• CARREP finalized the cross-border contingency plan for Cameroon, CAR and Chad that was developed in late 2010. This plan was shared with the United Nations System in Cameroon that used it as a basis for the interagency plan prepared ahead of the presidential elections in CAR. This cross-border contingency plan will also serve during the second half of 2011 as elections are planned in Cameroon and DRC before the end of the year.</li> <li>• The Congolese Red Cross Society has expressed the need of support to develop their contingency plan. Preparations are underway to do that during the second half of 2011.</li> <li>• CARREP participated as facilitator in an international workshop on disaster preparedness and response, which was organized in Yaoundé (Cameroon) by OCHA, the International Organization for Civil Protection (IOCP), and the Economic Commission for Central African States (CEEAC). The main output of that workshop was the development of a regional plan of action on disaster preparedness and response.</li> </ul>
<p><b>Programme component 2:</b></p> <p>NS and community operational preparedness, and disaster, illegal migration and food crisis risk reduction</p>	<p><b>Outcome 1:</b> All the six NS covered have updated their risk maps, and the communities in Congo Brazzaville and CAR have a better understanding of disaster risks and threats within their environment and have developed more efficient preventive actions.</p> <ul style="list-style-type: none"> <li>• The results of the vulnerability and capacity assessment (VCA) that was conducted in CAR towards the end of 2010 were published early this year. In line with the recommendations of that report, a food security project was developed and submitted to the Japanese Red Cross who funded it as PNS. The project is currently being implemented in CAR under the supervision of a regional resource person. It is expected to be completed in September 2011 with the harvest of crops by the beneficiaries.</li> <li>• CARREP participated in an exchange workshop on food security in Nairobi and seized the opportunity to learn new food security techniques.</li> <li>• CARREP attended the meeting of the Africa's disaster management team in Johannesburg. During that meeting, the participants reviewed all the risks to which each African country is exposed. The Africa Zone Office is currently using the data gathered during that meeting to develop a risk map for Africa.</li> </ul> <p><b>Outcome 2:</b> With support of the NS of Gabon, Cameroon and Congo Brazzaville, the communities of targeted areas at risk have carried out disaster, illegal migration and food insecurity risk reduction activities.</p> <ul style="list-style-type: none"> <li>• Cameroon Red Cross volunteers used the communication aids that</li> </ul>

	<p>were developed in late 2010 to sensitize populations in all 10 regions of the country on climate change. The Norwegian Red Cross has decided to support climate change risk reduction activities in Cameroon in 2011. A plan of action is currently being developed with Cameroon Red Cross and will be implemented during the second half of 2011 with this support.</p>
<p><b>Programme component 3:</b>  Disaster response and recovery</p>	<p><b>Outcome 1:</b> All the Red Cross NS of Central Africa covered have responded rapidly and efficiently to emergency situations such as floods, violent winds, epidemics, earthquake, volcanoes, social crises, etc. thanks to the practical measures taken in advance, and thanks to the active participation of the communities concerned.</p> <ul style="list-style-type: none"> <li>• During the first half of 2011, four countries of Central Africa experienced emergency situations. Violent winds and floods occurred in Gabon, cholera and measles in Cameroon, Poliomyelitis, chikungunya and measles in Congo Brazzaville, and violent winds in CAR. With CARREP's support, the respective NS received DREF allocations that enabled them to respond efficiently to the respective situations (for details, see the links to the respective operations on page 2 of this document). The warehouse managed by CARREP in Yaoundé played a key role in the response to those emergency situations as the items prepositioned were immediately sent to the field and have been replenished later on, thereby contributing to saving lives.</li> </ul> <p><b>Outcome 2:</b> In collaboration with their partners within and outside the Movement, the Red Cross NS of Cameroon, Gabon, CAR and Congo Brazzaville have developed an efficient population movement management strategy (including refugees and internally displaced persons) within their respective territories, and have good coordination of their efforts when responding to an emergency situation.</p> <ul style="list-style-type: none"> <li>• CARREP also continued to support Cameroon Red Cross and the Congolese Red Cross with the operations to assist CAR refugees in Cameroon and DRC refugees in Congo Brazzaville. Two regional resource persons (one in Cameroon and one in Congo Brazzaville) have been deployed to both countries to coordinate the implementation of the operations on behalf of the Federation.</li> <li>• About 3,000 people fled Gabon and entered in Cameroon. CARREP provided support to Cameroon Red Cross to conduct an evaluation mission, with the view to provide support to vulnerable people; even though the evaluation team did not meet the displaced people in the field as they had quickly been sent to their respective embassies in Yaoundé by Cameroon authorities. However, the mission realized that the capacities of Cameroon Red Cross along the borders with Gabon and Equatorial Guinea are very weak. People are constantly fleeing from Gabon and Equatorial Guinea into Cameroon. Thus the need to strengthen the capacities of the host NS to manage population movements along the borders. A project to that effect is currently being finalized by Cameroon Red Cross and CARREP and will be implemented during the second half of 2011 provided the funds required are available.</li> </ul>

<i>Planned no. of People Reached</i>	<i>People Reached Directly</i>	<i>People Reached Indirectly</i>	<i>Total People Reached</i>
490,525	159,000	220,000 <sup>1</sup>	<b>379,000</b>

<sup>1</sup> We have assumed that each of the 110,000 people reached directly by the programme has extended the benefit to at least 1 other person considered as indirect beneficiary.

## Constraints or Challenges

Communication with some NS such as the Red Cross of Equatorial Guinea was very difficult during the first half of 2011 as their telephone lines were not going through, and they did not react to emails. Another major challenge is the fact that some disaster management officers at NS levels are not qualified enough to perform their job. Consequently, they fail to submit quality projects to alleviate the sufferings of their populations. Moreover, long distances between countries and Yaoundé, and within countries, is a factor that needs to be taken into consideration when planning emergency operations in Central Africa. This explains why the costs for transport are always very high irrespective of the size of the operation. What makes this even more complicated is that most items needed are easily found only in Cameroon, or ordered from Dubai.

## Health and Care

<b>Programme Purpose:</b> Enable healthy and save living	
<p><b>Programme component 1:</b></p> <p>HIV and AIDS</p>	<p><b>Outcome 1:</b> Six hundred and sixty STI or HIV-positive sex workers have received appropriate treatment after communication for the change of behaviour (CCB) activities carried out by Red Cross volunteers in Cameroon, Central African Republic (CAR) and Congo Brazzaville.</p> <ul style="list-style-type: none"> <li>• Within the framework of the PROLUSIDA project 6,969 truck drivers, 8,032 female sex workers (filles libres) and 30,657 people in the localities surrounding the project sites were sensitized on HIV and STIs prevention by 60 trained Cameroon Red Cross volunteers.</li> <li>• PROLUSIDA facilitated the treatment of 3,740 people with STIs. It also facilitated the distribution of 7,568 condoms.</li> <li>• Trained Cameroon Red Cross volunteers conducted 2,774 educative talk sessions to help sensitize populations on HIV and STIs prevention.</li> <li>• PROLUSIDA distributed reactants and drugs to 10 health centres working in partnership with the project on a regular basis, covering their entire HIV screening materials and STI treatment drugs needs for the first half of 2011.</li> </ul> <p><b>Outcome 2:</b> The institutional capacities of six community organizations of sex workers are enhanced in Cameroon, CAR and Congo Brazzaville.</p> <ul style="list-style-type: none"> <li>• PROLUSIDA facilitated the creation of 10 associations of filles libres along the Douala-Ndjamena and Douala-Bangui corridors, mobilizing about 300 filles libres.</li> <li>• These associations have been trained on how to run an income-generating activity (IGA).</li> <li>• PROLUSIDA financed 10 IGA for “filles libres”.</li> </ul> <p><b>Outcome 3:</b> The living conditions of 200 people living with HIV (PLHIV) are improved through home care and support for the implementation of income-generating activities (IGA) in Gabon, CAR, and Sao Tomé &amp; Principe.</p> <ul style="list-style-type: none"> <li>• Within the framework of the Global Alliance to fight against HIV in CAR, 90 CAR Red Cross volunteers were trained on HIV and STISs prevention in Boali. The trained volunteers then convinced 150 PLHIV to join the project.</li> <li>• Staff members of the CAR Red Cross were trained on the management of HIV-related projects.</li> </ul>
<p><b>Programme component 2:</b></p> <p>Community-based health and first-aid promotion</p>	<p><b>Outcome 1:</b> Volunteers and community voluntary workers in Central African countries are actively engaged in sensitization campaigns and work with community-based health and first-aid programme (CBHFA) tools developed at individual country or Movement levels.</p> <ul style="list-style-type: none"> <li>• Within the framework of the polio and cholera operations in Congo Brazzaville and Cameroon respectively, Red Cross volunteers were</li> </ul>

	<p>trained on community-based health and first-aid (CBHFA) approach, with focus on epidemic management. This training enabled them to carry out the activities of both operations smoothly.</p> <p><b>Outcome 2:</b> An increased number of children attending anti-measles and polio massive immunization campaigns are reached through the sensitization of targeted communities by the NS of Central Africa.</p> <ul style="list-style-type: none"> <li>• CARREP supported the NS of Cameroon and CAR to actively participate in immunization campaigns. Cameroon Red Cross was very active during the African immunization week that was organized in Cameroon on 12-15 May, 2011. CAR Red Cross volunteers organized social mobilization within the framework of the anti-measles campaign in CAR that took place from 11 to 17 April, 2011.</li> <li>• Trained Congolese Red Cross volunteers facilitated social mobilization within the framework of the anti-polio operation in Congo Brazzaville.</li> </ul>
<p><b>Programme component 3:</b></p> <p>Emergency health</p>	<p><b>Outcome 1:</b> NS of Central Africa are well prepared and equipped to respond to various epidemic outbreaks, notably cholera in Cameroon, Equatorial Guinea, Congo Brazzaville and Sao tome &amp; Principe, meningitis in Cameroon and CAR, Ebola in Gabon and Congo Brazzaville, yellow fever in CAR, and chikungunya in Gabon.</p> <ul style="list-style-type: none"> <li>• With the support of WFP, a malnutrition project is being implemented in Eastern Cameroon that is hosting CAR refugees. Essential drugs were distributed to targeted health centres. In addition, the project also distributed 42 beds to 17 health centres in Bertoua, Garoua-Boulai and Betare Oya (East region of Cameroon).</li> </ul>

<i>Planned no. of People Reached</i>	<i>People Reached Directly</i>	<i>People Reached Indirectly</i>	<i>Total People Reached</i>
1,079,430	5,863,803	-	<b>5,863,803</b>

### Constraints or challenges:

One of the major challenges of this programme was the constant shortage of inputs in Cameroon (shortage of reactants for HIV screening, shortage of drugs for the treatment of STIs/HIV). Another challenge was the difficult access to intervention areas in CAR, and the poor coordination of activities, which is translated by the limited involvement of Red Cross local committees in the project. Most activities planned were not carried out as CARREP was concentrated on the response to emergency situations (cholera in Cameroon, Polio, chikungunya and measles in Congo Brazzaville, and measles in Cameroon).

## Organizational Development/Capacity building

<b>Programme Purpose:</b> Increase Red Cross/Red Crescent capacity to address the most urgent situations of vulnerability	
<p><b>Programme component 1:</b></p> <p>Supporting NS organizational development process</p>	<p><b>Outcome 1:</b> The NS of Gabon, CAR and Equatorial Guinea have improved their resources management, strategic planning and management capacities.</p> <ul style="list-style-type: none"> <li>• The NS targeted have started updating their strategic development plans (SDP) in line with Strategy 2020 with support from CARREP. The legal documents of these NS are also being revised.</li> </ul>
<p><b>Programme component 2:</b></p>	<p><b>Outcome 1:</b> The presidents of all six NS covered by this plan are trained on leadership, and on programme coaching and support.</p> <ul style="list-style-type: none"> <li>• A plan of action to build the management capacities of the targeted</li> </ul>

<p>NS leadership and management development</p>	<p>NS has been developed following the various working sessions organized within the framework of COSNAC (Coordination of Red Cross NS in Central Africa). While the manuals of procedures for most NS are currently being updated, other NS have received support to start the development of their own manuals of procedures. The objective is to have a harmonized manual of procedures for all NS in Central Africa.</p> <p><b>Outcome 2:</b> The secretary generals of the NS of Cameroon, Gabon and Congo Brazzaville are trained on leadership, the NS of Cameroon, CAR and Gabon are engaged in the CAS process, and the NS of Cameroon, CAR, Congo Brazzaville and Equatorial Guinea have evaluated their respective programmes, with the view to set up management teams capable of establishing sustainable organizations in the respective NS.</p> <ul style="list-style-type: none"> <li>• The programme management capacities of the Secretary Generals of the NS of Central Africa were strengthened during the COSNAC meeting that was held in Yaoundé (Cameroon) from 12 to 15 April 2011.</li> <li>• A regional planning workshop was organized in Brazzaville (Republic of Congo) to build the planning, monitoring and reporting capacities of programmes coordinators from the NS of Central Africa. About 30 people were trained and each NS identified their priorities for 2012-2015.</li> </ul> <p><b>Outcome 3:</b> The human, financial and material resources management capacities of the NS of Cameroon, CAR and Congo Brazzaville are improved.</p> <ul style="list-style-type: none"> <li>• CARREP supported the restructuring process of the Congolese Red Cross by deploying its Human Resources Officer in Brazzaville for one month. This IFRC staff facilitated the recruitment of a Secretary General, six national directors, a logistician and an Executive Secretary in line with available procedures. Since then (March 2011), the NS has started showing signs of good management (they are proactive in emergency situations, they now submit improved quality projects to CARREP though efforts still need to be made, they submit reports relatively in time, and they make efforts to follow procedures.</li> <li>• Computers have been put at the disposal of the NS of Congo Brazzaville, CAR, DRC and Gabon, and these computers have been connected to the internet with CARREP's financial support.</li> <li>• The Regional Finance and Administration Delegate contributed to building the daily financial management capacities of the NS of Cameroon, Republic of Congo, and CAR. This effort has contributed to reducing the volume of yet-to-be-justified working advances and the number of supporting documents rejected because of failure to follow procedures at NS levels.</li> </ul>
<p><b>Programme component 3:</b></p> <p>Volunteering development</p>	<p><b>Outcome 1:</b> National volunteer management policies are developed and implemented by the NS of Gabon, CAR and Congo Brazzaville; and the volunteers of the NS of Cameroon, Gabon, CAR and Congo Brazzaville are insured.</p> <ul style="list-style-type: none"> <li>• Red Cross volunteers have been trained on CBHFA in CAR and Congo Brazzaville within the framework of specific projects (food security in CAR, and poliomyelitis in Congo Brazzaville).</li> </ul> <p><b>Outcome 2:</b> The NS of Equatorial Guinea, Sao Tome &amp; Principe and Gabon are supported in their processes to develop a volunteer management system in emergency situations.</p>

	<ul style="list-style-type: none"> <li>Red Cross volunteers have been trained on epidemics management and sensitization tool kits have been distributed in Congo Brazzaville and Cameroon within the framework of emergency operations.</li> </ul>
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<i>Planned no. of People Reached</i>	<i>People Reached Directly</i>	<i>People Reached Indirectly</i>	<i>Total People Reached</i>
50,000	2,000	-	<b>2,000</b>

### Constraints or challenges:

The major challenges during this reporting period were to help the NS of Cameroon, CAR and Congo Brazzaville develop pertinent strategic development plans (SDP), develop efficient management mechanisms by putting procedures in place and following them, develop pertinent projects by training them on planning and monitoring. There was also the need to help NS improve on their working conditions by equipping technical staffs with adequate materials at local and national levels. The major factors that hindered the efforts to meet these challenges were limited funding, and the poor selection of staff to be trained by some NS. The dissolution of all the bodies of the Gabonese Red Cross by Government prevented the implementation of planned activities. A project to revamp the Gabonese NS has been developed, but implementation is pending availability of funding.

### Principles and Values

<i>Planned no. of People Reached</i>	<i>People Reached Directly</i>	<i>People Reached Indirectly</i>	<i>Total People Reached</i>
2,000,000	-	-	-

No activity planned was carried out because of lack of funding.

### New Objectives

#### Disaster Management

**Programme purpose: save lives, protect livelihoods, and strengthen recovery from disasters and crises**

**Programme Component 1: National Society disaster management planning and organizational preparedness**

#### Outcomes:

1. The NS of Cameroon, Congo Brazzaville, CAR and Gabon have disaster preparedness strategic plans, and their response systems are made operational through the updating of their contingency plans and the finalization of the Cameroon-Chad-CAR cross-border contingency plan.
2. IFRC's disaster management (DM) capacities are strengthened to enable her to provide adequate support to NS.
3. The Red Cross NS of Cameroon, Gabon, Congo Brazzaville, Equatorial Guinea, Sao Tome & Principe and CAR have put in place well-structured disaster management departments, with qualified and well-organized volunteers, through the creation of well-trained national and community disaster response teams (NDRT & CDRT).

**Programme component 2: NS and community operational preparedness, and disaster, illegal migration and food crisis risk reduction**

### **Outcomes:**

1. All the NS covered by this plan have updated their risk maps, and the communities in Congo Brazzaville, Equatorial Guinea and Sao Tome & Principe have a better understanding of disaster risks and threats within their environment and have developed more efficient preventive actions.
2. Thanks to the support of the NS of Gabon, Cameroon, Congo Brazzaville and CAR, the communities of targeted areas at risk have carried out disaster, climate change, illegal migration and food insecurity risk reduction activities.

### **Programme component 3: Disaster response and recovery**

#### **Outcomes:**

1. All the Red Cross NS of Central Africa covered by this plan have responded rapidly and efficiently to emergency situations such as floods, violent winds, epidemics, earthquake, volcanoes, social crises, etc. thanks to the practical measures taken in advance, and thanks to the active participation of the communities concerned.
2. In collaboration with their partners within and outside the Movement, the Red Cross NS of Cameroon, Gabon, CAR and Congo Brazzaville have developed efficient population movement management strategy (including refugees and internally displaced persons) within their respective territories, and have good coordination of their efforts when responding to an emergency situation.

### **Programme component 4: Logistics**

#### **Outcomes:**

1. A warehouse is well-managed and enables CARREP to facilitate rapid response to emergency situations by the NS of Central Africa.
2. CARREP has improved on its human and material resources to be able to provide adequate technical and operational support to NS.

## **Health and Care**

### **Programme purpose: Enable healthy and safe living**

#### **Programme component 1: HIV and AIDS**

#### **Outcomes:**

1. Six hundred and sixty STI or HIV-positive sex workers have received appropriate treatment after communication for the change of behaviour (CCB) activities carried out by Red Cross volunteers in Cameroon, Central African Republic (CAR) and Congo Brazzaville.
2. The institutional capacities of six community organizations of sex workers are enhanced in Cameroon, CAR and Congo Brazzaville.
3. The living conditions of 200 people living with HIV (PLHIV) are improved through home care and support for the implementation of income-generating activities (IGA) in Central Africa.
4. At least two "Clubs 25" for blood donation are set up in Gabon and Cameroon.
5. At least 700 secondary school students have undergone HIV screening tests and have collected their results following the sensitization activities carried out by the Red Cross in Equatorial Guinea and in Sao Tome & Principe.
6. The discrimination and stigma against PLHIV in Central Africa and against people affected by genetic diseases in Gabon is reduced thanks to the action by the Red Cross.

#### **Programme component 2: Community-based health and first-aid promotion**

#### **Outcomes:**

1. RC volunteers and community voluntary workers in the Central African countries are actively engaged in sensitization campaigns and work with community-based health and first aid programme (CBHFA) tools developed at individual country or Movement levels.

2. An increased number of children participating in anti-measles and polio massive immunization campaigns are reached through sensitization of targeted communities by NS of Central Africa.
3. Access to sanitation services is improved in Congo Brazzaville and Equatorial Guinea through the construction of 100 latrines.
4. Access to potable water is improved in Equatorial Guinea and in Congo Brazzaville through the rehabilitation of 50 water points.
5. Central African NS have provided safety information to Communities at risk of waterborne, hygiene and sanitation diseases and other types of potential deadly diseases to help prevent them being contaminated.
6. Fifteen thousand people targeted actually sleep under Long Lasting Impregnated Mosquito Nets (LLIMN) following communication for the change of behaviour (CCB) campaigns and home visits carried out by the NS of Central Africa.
7. Fifteen thousand families are trained by the NS of Central Africa on home management of malaria cases.
8. Four communities targeted in Cameroon and Gabon are further involved in the implementation of Malaria risk reduction strategies through the spraying and disinfection of homes and the promotion of environmental hygiene and sanitation.
9. Sixty excision practitioners have abandoned the practice of female genital mutilations (FGM), thereby contributing to improving the health of women and young girls in Cameroon and CAR.
10. The capacities of three community-based organizations of ex-excision practitioners are built in Cameroon and CAR.
11. Malnutrition is reduced in refugees and host populations in Cameroon and Congo Brazzaville.
12. The number of victims of road accidents is reduced through the promotion of road safety in Cameroon.

### **Programme component 3: Emergency health**

#### **Outcomes:**

1. NS of Central Africa are well prepared and equipped to respond to various epidemic outbreaks, notably cholera in Cameroon, Equatorial Guinea, Congo Brazzaville and Sao tome & Principe, meningitis in Cameroon and CAR, Ebola in Gabon and Congo Brazzaville, yellow fever in CAR, and chikungunya in Gabon.
2. All disaster-prone areas covered by Central Africa NS are provided with a detailed mapping showing the types and characteristics of recurrent health problems (epidemics, difficult access to health facilities, treatment opportunities and referral services).
3. An emergency stock of drugs, IEC and protection materials is built up and prepositioned at CARREP level in Yaoundé to be distributed when necessary.

### **Programme component 4: Coordination of health activities**

#### **Outcomes:**

1. CARREP's Health Department has enough human resources to implement activities as planned.
2. The NS covered by this plan have received technical support from CARREP.

## **Organizational Development/Capacity building**

**Programme purpose: Increase Red Cross/Red Crescent capacity to address the most urgent situations of vulnerability**

### **Programme component 1: National societies finance development**

#### **Outcome:**

1. The financial management capacities of all eight NS of Central Africa are improved.

## Programme component 2: Information Technology

### Outcomes:

1. Measures are taken to ensure the smooth flow of information between NS and CARREP.
2. The IT materials put at the disposal of NS by CARREP are closely monitored and maintained.

## Programme component 3: Planning, Monitoring, Evaluation and Reporting (PMER)

### Outcomes:

1. The leaders of Red Cross NS in Central Africa have understood the essential role of PMER within the process of their conversion into well-functioning NS, and each NS of Central Africa has a PMER focal point.
2. The Planning, Monitoring, Evaluation and Reporting capacities of the NS of Central Africa are strengthened.
3. The 2011 planning process for 2012-2015 is facilitated and the NS of Central Africa have produced quality plans.
4. Each NS of Central Africa has produced quality and timely reports on activities.
5. Baseline studies (vulnerability and capacity assessment "VCA") are conducted in all 6 NS covered by this plan, and the VCA capacities of the NS of Cameroon, Congo Brazzaville, Gabon, Equatorial Guinea, Sao Tome & Principe, and CAR have been strengthened.

## New Budget summary (in CHF)

Programmes	Original 2011	Revised 2011
Disaster Management	2,250,248	2,250,284
Health and Care	750,002	499,864
Organizational Development/Capacity Building	300,001	150,000
Principles & Values	150,000	10,000
Coordination	311,502	100,000
<b>Total</b>	<b>3,761,753</b>	<b>3,010,148</b>

## Working in partnership

Inside the Movement, CARREP received contributions from the Swedish, Norwegian, Japanese and Finnish Red Cross societies. While the Swedish Red Cross contributed for the Disaster Management, Health, Organizational Development and Coordination components of the regional budget, the Norwegian Red Cross contributed for disaster management, the Japanese Red Cross contributed for malaria prevention and food security in CAR, and the Finnish Red Cross contributed for HIV-AIDS in CAR. The Canadian Red Cross also deployed a delegate to Cameroon to help CARREP with the implementation of the cholera emergency operation for three months from June 2011. The major contributions to the plan budget came from outside the Movement, precisely from the United Nations High Commission on Refugees (UNHCR) to facilitate the implementation of refugees operations in Cameroon and Congo Brazzaville. WFP has also been supporting the nutrition initiatives of Cameroon Red Cross within the framework of the operation to assist CAR refugees in Cameroon.

These contributions have really given CARREP and its NS means for providing long-awaited assistance to vulnerable people. Nevertheless, there are still numerous vulnerable people in Central Africa expecting to be assisted. A Vulnerability and Capacity Assessment was conducted in CAR in late 2010, and a project was developed to respond to the immediate needs that were identified by then. CARREP is still looking for potential donors to finance that project. Moreover, WFP stopped providing food to keep the distribution activities to CAR refugees in Cameroon. Contributions are also welcome to help continue food distribution to the refugees who really need it.

## Contributing to longer-term impact

The new strategy put in place by CARREP in accordance with the NS of Central Africa to ensure the smooth implementation of activities in favour of vulnerable people implied the use of regional resource persons to ensure the monitoring and evaluation of projects and programmes.

During the first half of 2011, CARREP deployed 4 regional resource persons in 3 countries to coordinate projects with the host NS. A regional resource person from the Congolese Red Cross is presently in Cameroon assisting Cameroon Red Cross with the implementation of the project to assist 82,000 CAR refugees in the East and Adamaoua regions of Cameroon. Another regional resource person from the Togolese Red Cross is in CAR assisting the host NS with the implementation of a food security project in favour of 3,000 vulnerable people. A regional resource person from Chad Red Cross is in Congo Brazzaville assisting the host NS with the implementation of the project to assist more than 10,000 DRC refugees in Congo Brazzaville. Another regional resource person from the NS of DRC is presently in Congo Brazzaville coordinating the emergency operations to respond to polio, chikungunya and measles outbreaks.

The presence of those resource persons is an added value in the sense that it helps CARREP keep a close eye on what is happening in the field and facilitates the collection of data for proper reporting and justification of expenses. That presence also benefits the NS because the resource persons are from NS and are bound to return to their respective NS after their missions. We believe that the experience gathered during their respective missions will help improve programmes planning and implementation at NS levels.

Within the framework of the operations to assist CAR and DRC refugees in Cameroon and Congo Brazzaville respectively, gender issues are taken into consideration as special attention is paid to women and children in the refugees' camps. Special activities such as the distribution of hygiene kits to girls and women are carried out in the camps. The lessons learned during programme implementation are shared in interagency meetings.

We believe that the food security project in CAR will contribute to the CAR's Poverty Reduction Strategy in the sense that it will provide the country with people that are strong enough to concentrate on development issues. The same applies to the operations to assist refugees as they are progressively prepared to become self-reliant and ready to embark on development initiatives whether in host countries or back in their respective countries.

## Looking ahead

During the first half of 2011, much effort was concentrated on the launching of emergency operations in various countries of Central Africa and completing the process to sign agreements with UNHCR for the refugees operations. Now that the operations have been launched, CARREP will now be able to focus on the development programmes planned in the 2011 plan. Considering the present reduced funding trends for Central Africa, CARREP is revising its objectives and budget for the second half of 2011. Focus will be on the capacity building of NS and the implementation of the most urgent priorities of NS as highlighted in the "New Objectives" section above. During the second half of 2011, CARREP will also intensify its resource mobilization efforts by helping NS to develop quality projects to be submitted to potential donors.

### How we work

*All Federation assistance seeks to adhere to the [Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations \(NGO's\) in Disaster Relief](#) and is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable.*

<p>The IFRC's vision is to:</p> <p>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>
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## Contact information

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# International Federation of Red Cross and Red Crescent Societies

MAA62001 - Central Africa Region

Mid-year Report

Selected Parameters	
Reporting Timeframe	2011/1-2011/6
Budget Timeframe	2011/1-2011/12
Appeal	MAA62001
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>	<b>2,250,284</b>	<b>499,864</b>	<b>150,000</b>	<b>10,000</b>	<b>100,000</b>	<b>3,010,148</b>
<b>B. Opening Balance</b>	<b>-12,349</b>	<b>26,798</b>	<b>303</b>	<b>6,115</b>	<b>11,985</b>	<b>32,852</b>
<b>Income</b>						
<b>Cash contributions</b>						
<i>European Commission - Europe Aid - Tripartite</i>		35,716				35,716
<i>Finnish Red Cross</i>		18,130				18,130
<i>Finnish Red Cross (from Finnish Government)</i>		102,738				102,738
<i>Japanese Government</i>	-34,657					-34,657
<i>Japanese Red Cross</i>		42,598				42,598
<i>Norwegian Red Cross</i>	1,144					1,144
<i>Norwegian Red Cross (from Norwegian Government)</i>	27,447					27,447
<i>Other</i>		64				64
<i>Swedish Red Cross (from Swedish Government)</i>	130,234	65,117	97,675		32,558	325,584
<i>UNHCR - UN Refugee Agency</i>	1,159,155					1,159,155
<i>WFP - World Food Programme</i>		42,780				42,780
<b>C1. Cash contributions</b>	<b>1,283,323</b>	<b>307,143</b>	<b>97,675</b>		<b>32,558</b>	<b>1,720,700</b>
<b>Other Income</b>						
<i>Balance Reallocation</i>		-1			1	0
<i>Services Fees</i>					6,754	6,754
<i>Sundry Income</i>					1,787	1,787
<b>C4. Other Income</b>		<b>-1</b>			<b>8,542</b>	<b>8,541</b>
<b>C. Total Income = SUM(C1..C4)</b>	<b>1,283,323</b>	<b>307,142</b>	<b>97,675</b>	<b>0</b>	<b>41,101</b>	<b>1,729,241</b>
<b>D. Total Funding = B + C</b>	<b>1,270,974</b>	<b>333,940</b>	<b>97,978</b>	<b>6,115</b>	<b>53,085</b>	<b>1,762,093</b>
<b>Appeal Coverage</b>	<b>56%</b>	<b>67%</b>	<b>65%</b>	<b>61%</b>	<b>53%</b>	<b>59%</b>

## II. Balance of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
<b>B. Opening Balance</b>	<b>-12,349</b>	<b>26,798</b>	<b>303</b>	<b>6,115</b>	<b>11,985</b>	<b>32,852</b>
<b>C. Income</b>	<b>1,283,323</b>	<b>307,142</b>	<b>97,675</b>	<b>0</b>	<b>41,101</b>	<b>1,729,241</b>
<b>E. Expenditure</b>	<b>-753,112</b>	<b>-257,692</b>	<b>-73,095</b>	<b>-5,530</b>	<b>-49,780</b>	<b>-1,139,209</b>
<b>F. Closing Balance = (B + C + E)</b>	<b>517,862</b>	<b>76,248</b>	<b>24,883</b>	<b>585</b>	<b>3,305</b>	<b>622,884</b>

# International Federation of Red Cross and Red Crescent Societies

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Selected Parameters	
Reporting Timeframe	2011/1-2011/6
Budget Timeframe	2011/1-2011/12
Appeal	MAA62001
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>2,250,284</b>	<b>499,864</b>	<b>150,000</b>	<b>10,000</b>	<b>100,000</b>	<b>3,010,148</b>	
<b>Relief items, Construction, Supplies</b>								
Shelter - Relief			-975				-975	975
Construction Materials	4,243		883	418			1,301	2,942
Clothing & textiles		1,422	-4,755	-446			-3,780	3,780
Food	1,348	2,953	1,348				4,301	-2,953
Seeds & Plants	31,517							31,517
Water, Sanitation & Hygiene		2,048	-9,081	357			-6,675	6,675
Medical & First Aid	1,448	13,257	1,448	-939		389	14,155	-12,707
Teaching Materials	500,000	101,356	30				101,386	398,614
Utensils & Tools		21	98				120	-120
Other Supplies & Services	808,536	13,072	13,810				26,882	781,655
Cash disbursement			472				472	-472
<b>Total Relief items, Construction, Supplies</b>	<b>1,347,092</b>	<b>134,129</b>	<b>3,278</b>	<b>-610</b>		<b>389</b>	<b>137,187</b>	<b>1,209,906</b>
<b>Land, vehicles &amp; equipment</b>								
Land & Buildings	1,170		1,170				1,170	0
Vehicles	21,452							21,452
Computers & Telecom		4,177		2,989			7,166	-7,166
Office & Household Equipment		513	-6,698	4			-6,181	6,181
<b>Total Land, vehicles &amp; equipment</b>	<b>22,623</b>	<b>4,689</b>	<b>-5,527</b>	<b>2,993</b>			<b>2,155</b>	<b>20,468</b>
<b>Logistics, Transport &amp; Storage</b>								
Storage		3,035	-1,782			-1,642	-389	389
Distribution & Monitoring	526,000	2,518	-2,951			145	-288	526,288
Transport & Vehicle Costs	21,931	79,967	20,877	12,079	861	12,107	125,891	-103,961
<b>Total Logistics, Transport &amp; Storage</b>	<b>547,931</b>	<b>85,519</b>	<b>16,144</b>	<b>12,079</b>	<b>861</b>	<b>10,611</b>	<b>125,215</b>	<b>422,716</b>
<b>Personnel</b>								
International Staff	149,631	73,535	22,723	10,475	5,500	9,984	122,217	27,414
National Staff	183,536	74,712	26,261	5,638	15,100	7,050	128,760	54,776
National Society Staff	92,384	148,009	18,933				166,942	-74,557
Volunteers		137,111	58,227	80			195,418	-195,418
<b>Total Personnel</b>	<b>425,550</b>	<b>433,366</b>	<b>126,144</b>	<b>16,193</b>	<b>20,599</b>	<b>17,034</b>	<b>613,337</b>	<b>-187,787</b>
<b>Consultants &amp; Professional Fees</b>								
Consultants	3,439	1,480	3,439				4,919	-1,480
Professional Fees	14,905	22,689	3,265	2,534	141	3,713	32,342	-17,437
<b>Total Consultants &amp; Professional Fees</b>	<b>18,344</b>	<b>24,168</b>	<b>6,704</b>	<b>2,534</b>	<b>141</b>	<b>3,713</b>	<b>37,261</b>	<b>-18,916</b>
<b>Workshops &amp; Training</b>								
Workshops & Training	225,076	28,248	35,173	7,066	4,321	8,947	83,754	141,321
<b>Total Workshops &amp; Training</b>	<b>225,076</b>	<b>28,248</b>	<b>35,173</b>	<b>7,066</b>	<b>4,321</b>	<b>8,947</b>	<b>83,754</b>	<b>141,321</b>
<b>General Expenditure</b>								
Travel	33,945	12,771	11,386	3,546	856	3,479	32,037	1,908
Information & Public Relation	83,235	2,954	2,798	313	102	1,517	7,685	75,550
Office Costs	86,250	36,530	21,165	7,357	315	2,207	67,575	18,675
Communications	24,778	16,791	4,741	10,005	10	951	32,498	-7,720
Financial Charges	1,432	-4,027	1,378	9	-18,408	-5,081	-26,129	27,561
Other General Expenses	10,175	655	1,149	1,333	68	1,272	4,477	5,698
<b>Total General Expenditure</b>	<b>239,814</b>	<b>65,675</b>	<b>42,617</b>	<b>22,563</b>	<b>-17,057</b>	<b>4,345</b>	<b>118,144</b>	<b>121,671</b>
<b>Depreciation</b>								
Depreciation						2,407	2,407	-2,407
<b>Total Depreciation</b>						<b>2,407</b>	<b>2,407</b>	<b>-2,407</b>
<b>Operational Provisions</b>								
Operational Provisions		-74,173	15,364	5,792	-3,704	-752	-57,472	57,472
<b>Total Operational Provisions</b>		<b>-74,173</b>	<b>15,364</b>	<b>5,792</b>	<b>-3,704</b>	<b>-752</b>	<b>-57,472</b>	<b>57,472</b>

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**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>2,250,284</b>	<b>499,864</b>	<b>150,000</b>	<b>10,000</b>	<b>100,000</b>	<b>3,010,148</b>		
<b>Indirect Costs</b>									
Programme & Service Support	183,718	45,604	15,592	4,460	344	3,035	69,035	114,683	
<b>Total Indirect Costs</b>	<b>183,718</b>	<b>45,604</b>	<b>15,592</b>	<b>4,460</b>	<b>344</b>	<b>3,035</b>	<b>69,035</b>	<b>114,683</b>	
<b>Pledge Specific Costs</b>									
Earmarking Fee		4,938	1,450				6,388	-6,388	
Reporting Fees		947	753	25	25	50	1,800	-1,800	
<b>Total Pledge Specific Costs</b>		<b>5,885</b>	<b>2,203</b>	<b>25</b>	<b>25</b>	<b>50</b>	<b>8,188</b>	<b>-8,188</b>	
<b>TOTAL EXPENDITURE (D)</b>	<b>3,010,148</b>	<b>753,112</b>	<b>257,692</b>	<b>73,095</b>	<b>5,530</b>	<b>49,780</b>	<b>1,139,209</b>	<b>1,870,939</b>	
<b>VARIANCE (C - D)</b>		<b>1,497,172</b>	<b>242,172</b>	<b>76,905</b>	<b>4,470</b>	<b>50,220</b>	<b>1,870,939</b>		