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# Sahel Annual Report

 International Federation  
of Red Cross and Red Crescent Societies

**MAA61004**

**30/04/2014**

**This report covers the  
period 01/01/2013 to  
31/12/2013.**

*In Mauritania, market-gardens were part of  
the IFRC assistance to the most vulnerable  
communities.*

*MRC/IFRC*



## Overview

The Sahel region of West Africa includes some of the poorest countries in the world, lacking the capacity for minimum service delivery and harbouring very low nutrition, health and livelihoods indicators. The recurrent crises in the region include: slow onset and recurring food crises linked to repeated droughts; floods linked to extreme events, affecting fertile and often highly populated areas; encroachment on coastal areas vital for biodiversity and fishing communities; conflicts with population movement crises, with thousands of uprooted people seeking refuge in fragile environments.

The National Societies in the region and IFRC primarily respond to a multitude of disasters each year, and undertake risk reduction and organisational development activities. However, humanitarian crises continue to impact the Sahel Region. Food and nutrition situation remains precarious as access to food is difficult for the most vulnerable households; the situation is expected to further deteriorate during the lean season (June to September). In 2013 it was estimated that in overall Sahel, 11 million people remain at risk of food insecurity and nutrition, including 3.6 million people in need of immediate food assistance and livelihood support.

Food crisis is not the only threat in the region. In January 2013, the French army began the intervention in Northern Mali to stop the progression of the rebel groups on their way to Bamako. This Intervention contributed to increasing population movements within the country and to neighbouring countries of Mauritania, Algeria, Niger and Burkina Faso. The situation in Mali especially in the North is still very fragile given the existing tensions among the actors to the conflict. The armed conflict in Central African Republic has created similar tension as it affected one of the countries of the Sahel Region, namely Chad, with population movements. Given the impact of crises and disasters, the Sahel Disaster Risk Department worked in 2013 with National Societies to strengthen their community and institutional preparedness to prepare for and respond to disasters. A particular attention has been paid in supporting the regional disaster response teams to ensure that there is a demonstrably efficient, effective and sustainable system that is operational for mobilizing appropriately skilled regional capacities to respond to disasters requiring international assistance.

In health, tremendous results have been noticed regarding Community-based health and first aid (CBHFA). CBHFA is an integrated community-based approach in which Red Cross/Red Crescent volunteers work with their communities in disease prevention, health promotion, first aid and disaster preparedness and response. With this integrated approach, different aspects of vulnerability are identified

and addressed; the community is at the heart of this process. The training of Red Cross volunteers on CBHFA is part of the Federation core priority towards building a volunteer cohort that is capable of supporting the National Society's interventions. Therefore, the Gambia Red Cross Society (GRCS) felt it necessary to update and increase the knowledge of volunteers on the health information dissemination using the CBHFA approach. As a matter of fact, a total of 55 volunteers across all regions in the Gambia have been trained on CBHFA and can now ensure the National Society's effective contribution to the Millennium Development Goal by implementing its plan of action.

## Working in partnership

The IFRC Sahel Regional Office, the National Societies in the region and the Partner National Societies (PNS) continue to work together to reach the humanitarian goals in the Region. Additionally, partners from outside the Red Cross Movement collaborate and coordinate their work towards these main objectives. The following table lists the most salient operational partners in the Sahel Region.

Partner National Societies (PNS)	Other partner organisations
Swedish, Finnish, British, Japanese, Norwegian, Icelandic, Irish, Canadian, Australian and Danish Red Cross Societies, Kuwaiti and Qatar Red Crescent National Societies.	DFID, ECHO, AECID, European Union, WFP, WHO, UNICEF, UNHCR, Irish Government, ECOWAS, ACMAD, and CILSS.

It is worth mentioning that IFRC maintains external coordination with international humanitarian organisations at regional level and National Societies maintain the same relationships with national counterparts. Various working groups, task forces and other collaboration mechanisms exist and are listed as follow:

- Technical Committee of the Harmonized Framework in West Africa:** is a mechanism to identify and analyse risk areas and vulnerable population regarding food insecurity and is facilitated by CILSS. This framework supports the PREGEC (the mechanism for the prevention and management of food crisis) and the RPCA (the food crisis prevention network) to take decisions at high level (either regional or governmental). IFRC has joined in this technical committee eight other organizations: CILSS, FAO, Fewsnet, WFP, UNICEF, OXFAM, Save the Children, and ACF. IFRC, OXFAM, Save the children and ACF constitute the civil society consortium into the PREGEC. This consortium regularly conducts advocacy on food security, nutrition and livelihoods issues and gives recommendations for actions to be taken. IFRC Sahel regional office also encourages its National Societies to take part to the national harmonized framework exercise conducted every 3 months in all countries throughout Sahel and West Coast regions.
- Regional Food security and nutrition working group:** this group is alternately facilitated by FAO, WFP, UNICEF and ACF. On a monthly basis, the group gives an independent analysis of the main trends on food security in the region (production, markets, nutrition, disasters...). It also ensures the coordination of the interventions between the main humanitarian and development actors.
- Regional Nutrition Working Group** is composed of 20 organizations (NGO's, donors, research institute, and UN agencies) and aims at raising awareness and influencing policies on nutrition and strengthening technical capacities of regional institutions such as WAHO, CILSS, OAS, and ECOWAS. The former President of the Red Cross of Cape Verde is the emissary of the Group. IFRC is particularly active in it and promotes community-based nutrition approaches. Two case studies are ongoing with Belgian Red Cross partnership for evidence-based demonstration (in Burkina Faso and Mali).

- **DRR and Agriculture task-force** is a sub-group of the DRR platform. This task-force has organized a Disaster Risk Reduction and Agriculture regional workshop from 8 to 10 October in Dakar. More than 45 participants (Governments, local NGO's, farmers association, etc.) from the Sahel and West Coast Regions met to make recommendations regarding DRR policies to reduce the risks related to climate hazards (drought and floods), crop pests, price volatility, and social conflicts. A particular attention was paid on early warning systems and the involvement of disabled persons. IFRC was a member of the technical committee with other 6 organizations (NGO's and UN agencies). The final report including key messages was shared with all National Societies.
- **Regional Cash transfer working group** facilitated by CaLP (institutional partner of IFRC). This working group is committed to bring together humanitarian and development actors to reflect on a better quality, scale up response of households' multisectorial needs through cash transfer programming (CTP). Two technical *ad hoc* sessions were led and resulted on recommendations regarding the implementation of CTP in conflict situation (Mali) and market analysis. A regional Cash Learning event was organized in March in Dakar which gathered more than 50 humanitarians' actors and governments.
- **African Food Security Initiative (AFSI):** Sahel National Societies were consulted regarding the AFSI 2013-2017. A workshop was first conducted in Addis Ababa with the participation of National Societies. The opportunity of the workshop was seized to better reflect on a Food Security strategy. A draft of the 2013-2017 AFSI was elaborated and shared with all National Societies for comments and feedbacks. Their inputs were integrated in the strategic document. During the food security training conducted in Burkina Faso in September 2013 and which gathered all Sahel National Societies, a SWOT analysis of the capacities in the field of food security in the region was done. This led to the draft of a Sahel food security strategy which fit in this 2013-2017 AFSI.
- In terms of signed agreements, the International Federation has signed Memorandum of Understanding (MoU) with CILSS and ACMAD. This collaboration led to concrete actions such as information sharing regarding food security through the Harmonized Framework and national Early Warning Systems supported by CILSS at country level. ACMAD regularly shared weather forecasts that the Sahel regional Representation disseminated throughout the region to enhance climate change adaptation and protection of human lives and livelihood against extreme weather events, and to better use weather information for this purpose.
- Following the signature of an MOU between FAO and IFRC in Rome on 16 October 2013, a regional meeting between FAO regional office and IFRC Sahel Regional office held to analyse how to operationalize this MOU. Both organizations agreed on common strategy which targets the "green wall" areas.
- Following the signature of the MoU, the Sahel region fully participated in the knowledge fair on "Strengthening Resilience to Food Insecurity and Malnutrition in Sahel and West Africa" co-organized by CILSS and FAO from 5 to 7 November 2013 in Ouagadougou. The Sahel Region presented a case study on the "twin track" approach developed in Mauritania. The IFRC communication department also set up an information stand which allowed making more visible IFRC food security activities and its achievements in the region.

## Progress towards outcomes

### Business Line 1 – To raise humanitarian standards

**Outcome:** Regional trends on key humanitarian issues are analysed and shared by the Sahel Regional Representation.

**Output:** *Disaster trends collated, analysed and shared with Africa Zone*

Throughout 2013, the Sahel Regional Representation gathered, analysed and shared regional trends on key humanitarian issues. The information gathered included disaster statistics (various events, number of DREFs and Emergency Appeals launched, number of surge capacity staff deployed). The disaster statistics were gathered through discussion with National Societies, Movement partners and IFRC colleagues. The gathered data was then analysed to compare against previous years on types of disasters and risks in the region. The information was subsequently shared with Africa Zone to support in the collection of information from all regions. The collected and analysed information illustrated the Sahel region has been experiencing an increasingly number of hydro-meteorological disasters, specifically related to slow-onset floods. In several countries, such as Chad, Niger, Senegal and Gambia, floods occurred in vulnerable regions as experienced in 2012. A similar trend has been observed in food security area according to the mapping done on food security programmes in the region.

**Outcome:** The Sahel office ensures the participation of National Societies in the Red Cross Red Crescent Academic Network.

In 2013, three food security focal points from Sahel National Societies and the IFRC regional food security delegate achieved the online training on “introduction to the livelihoods programmes” hosted by the Livelihoods Resource Center and developed in partnership with IFRC. A face to face training took place in Las Palmas which gathered 28 participants from 20 National Societies members of the Association of French-speaking African Red Cross and Red Crescent Societies (ACROFA) and from IFRC, ICRC and French and Spanish Red Cross Societies. This training enabled to build the capacity of 6 French speaking trainers in livelihoods programmes.

### Business Line 2 – To grow Red Cross Red Crescent services for vulnerable people

**Outcome:** Provide as a regional hub, the required support to National Societies in the provision of emergency water and sanitation, health, relief, logistics, warehousing, HR, IT, and finance to Sahel, West Coast and Central Africa regions.

**Output:** *Effective procedures, tools and resources are in place to respond to disasters.*

The Sahel Regional Representation is a designated hub providing technical support to other regional and country representations in West and Central Africa. The DRM has therefore provided technical support (including capacity building) to other regions in the areas of development of documents, strategy and even the management of operations. The Africa Zone Disaster Management Unit was also supported in finalizing the Standard Operating Procedures (SOPs) for disaster response. The SOPs were developed after a consultation process with the regional offices, National Societies and Movement partners. Sahel regional office facilitated the discussions in the region through the organization of a disaster management meeting with National Societies and providing technical feedback on the contents of the SOPs.

Besides, a preparedness pilot programme was conducted in Senegal as part of *The Global Cash Programme* managed by the IFRC Secretariat. The pilot programme aimed at strengthening the capacities of the concerned National Societies in delivering quicker and scalable responses through institutionalizing and mainstreaming of cash transfer based-programmes. The Senegalese Red Cross Society (SRCS) seized the opportunity of the pilot phase to test three cash transfer mechanisms in Dakar: voucher, mobile phone, and barcode card (DMDS). A comparison of the three modalities was done and the lessons learnt workshop led to the elaboration of SOP's on cash transfer programming. Recommendations were also made for developing contingency plan with integration of cash transfer programme (CTP) component. SRCS' experience is a reference that can be shared within the region.

**Outcome: Disaster risk reduction capacities of Sahel National Societies strengthened to address floods, health and other related (natural or human provoked) risks at community, branch, and national levels.**

Disaster Management training was organised in early December in Conakry. This training was a good opportunity to bring together Sahel DRM actors at regional and national levels with Geneva technical support. The training reinforced the DM focal points' capacities for emergency rapid assessment and analysed the main challenges they are facing in their countries. ICRC delegate for Restoring Family Links (RFL) attended the training to strengthen DM focal points capacities and knowledge in RFL and to better understand their challenges to include RFL in disaster management as requested by the Movement strategy.

Another important event was the Gambia Community Early Warning System (CEWS) part B. After the part A organized last year, the second part of the training took place in December 2013 in Pakalinding with participants from IFRC zones, National Societies, communities and the Gambia Red Cross. The training was the opportunity to finalize the test of the toolkit and validate the approach. The next step is to expand the approach after the translation into French and other IFRC spoken languages. The tools are expected to be used for the Africa Urban DRR programme starting in 2014.

An 8-day training workshop was organized in Burkina Faso. It gathered 24 participants from 9 National Societies (permanent staff members and volunteers) for better planning and programming of Food Security in the Sahel. The training also included techniques about how to conduct Food Security assessments. This training also enhanced National Societies' capacities on food security. The opportunity was seized to update the IFRC training modules on food security and to reflect on a long term food security strategy for Sahel. NDRT and CDRT trainings were organized in Cape Verde, Burkina Faso, Mali, and Senegal.

**Output: Senegal River Basin initiative project aimed at strengthening community resilience in food security, livelihoods and climate change adaptation aspects.**

The Senegal River Basin Initiative (IRIS) is a cross-border, integrated regional programme elaborated by the Sahel Region for community safety and resilience. Its goal is to promote and protect healthy and safe lives and livelihoods in vulnerable communities in the Senegal River Basin, now and in the future. Three Vulnerability and Capacity Assessments (VCA) have been conducted in each of the countries targeted in the IRIS project (Senegal, Mali, Mauritania and Guinea). These VCAs were geared towards identifying the most emerging hazards within the selected communities, causes and effects, coping mechanisms, available capacities at household, community and Community-Based Organizations (CBOs), capacity gaps at all levels, and conclusions generated from respondents. It was essential to first identify and analyse the main challenges of the targeted communities and see how these are connected to each other. With a holistic overview of challenges, it is possible to design and implement activities to address the challenges and thus increase community safety and resilience, as well as environmental sustainability.

In Senegal, the VCAs have helped to “kill two birds with one stone”. They led to an urban Disaster Risk Reduction (DRR) programme in Pikine and Guédiawaye followed by a Community Early Warning System (CEWS) put in place. The process for the CEWS brought together around the table communities, scientists, meteorologists, local authorities, Red Cross volunteers, and hydrologists.

**Outcome: Support Africa Zone to review the effectiveness and operationalization of the disaster response teams (RDRT and NDRT).**

***Output: RDRT system reviewed***

The Sahel Regional Representation led the process to develop the Africa RDRT strategy in 2013. The process was initiated through the Sahel office hosting the four regional offices and Africa Zone DMU to discuss RDRT topics in late 2013. During the meeting, the Sahel office was selected to undertake the development of the RDRT strategy and SOPs and the process was halfway complete by the end of 2013. It is expected the strategy to be developed during the first quarter of 2014.

Besides, Sahel region, in collaboration with the West Coast and Central Africa organized a joint RDRT training in Cameroon. The training’s curriculum, in addition to the training that occurred in Zimbabwe and in La Reunion, will be used by the Africa Zone to standardize the training package for all RDRT induction trainings.

**Business Line 3 – To strengthen the specific Red Cross Red Crescent contribution to development**

**Outcome: Five National Societies are supported to reduce the risks associated with communicable diseases, and identify and address risks from new and emerging diseases.**

***Output: Sahel National Societies are able to evaluate the impact of their interventions in reducing risks from communicable diseases and identify new and emerging diseases.***

The greatest strength of the Red Cross Movement is its diverse volunteer roll at community level. Training of volunteers on the CBHFA is a priority strategic objective for five years (2013-2017). Growing a healthy community is a lifelong process that requires persistence and constant nurturing. Therefore, the Community-Based Health and First Aid (CBHFA) commitment is a long-term engagement to build safety and community resilience. CBHFA is an integrated community-based approach in which Red Cross Red/Crescent volunteers work with their communities in disease prevention, health promotion, first aid and disaster preparedness and response. With this integrated approach, different aspects of vulnerability are identified and addressed. The community is at the heart of this process.

The example of the Gambia Red Cross Society (GRCS) is relevant. The National Society adopted “Health Is Wealth” policy of the Ministry of Health committing itself to contribute in addressing the common health desires of Gambians through concrete and implementable strategies. Thus the National Society’s health intervention strategy 2013-2017 is anchored to this policy. Among the key strategic direction and approaches to achieving this national health blueprint, the Community Based health and First Aid (CBHFA) strategy is one of its main intervention approaches. In this drive, the National Society provides community service through its network of volunteers, targeting the most vulnerable communities and using the Red Cross/Red Crescent CBHFA approach. In lieu of the above GRCS with support from the IFRC and Irish Aid conducted CBHFA training with 30 volunteers from West Coast region and Kanifing Municipality Council and 40 from North Bank and Central River regions respectively in September and December 2013. The training lasted 06 days and allowed capacity building for volunteers. The volunteers after being trained went back to their communities, gathered participants to:

- exchange information,
- share personal stories and experiences,
- express perspectives,
- prioritize issues, and
- develop plans for solutions to community concerns.

This CBHFA training followed by its plan of action has enabled communities to reduce vulnerability to disease and injury, and to prepare for and respond to public health crises. The Red Cross presence in the community played an important role in achieving improved health behaviours, especially among the most vulnerable people.

**Outcome: MNCH strengthened through five NS community based activities, including safe motherhood and child health initiatives, nutrition activities, immunization services during both mass vaccination campaigns and routine immunization services for measles and polio.**

**Output: The National Societies of Gambia, Niger, Mali and Guinea Bissau increased their capacities on use of the MNCH Framework.**

The Red Cross Society of Niger in collaboration with the health services in the region and with the financial support of the International Federation implemented a Mother and Child Health Project Promotion in health areas identified in the Integrated Health Centres (CSI) districts of Dosso and Niamey regions. The project also aimed to support maternity services with material and human resources in reproductive health area. Two volunteers and facilitators were recruited in each health centre. A total of 34 people were thus trained on Reproductive Health to conduct awareness sessions at community level for the promotion of Mother and Child Health.

Besides, the National Society also supported maternity services by strengthening the capacity of 34 matrons in Reproductive Health with 2 matrons per health centre. It also provided equipment and materials such as aseptic delivery rooms to encourage and facilitate the accessibility of services for pregnant women. The project's activities were essentially related to raising awareness on the importance of exclusive breastfeeding up to 6 months, the importance of family planning, HIV/AIDS precisely mother to child transmission, environmental hygiene and washing hands with soap, child medical examinations, prenatal medical examinations, and vaccinations.

A total of 7,149 beneficiaries were reached through sensitization sessions in Niamey in November 2013. The number of beneficiaries reached was most important in Dosso (11,291). The sensitization sessions were related to many topics as earlier indicated however there was a particular focus on exclusive breastfeeding. The Red Cross volunteers conducted active screening sessions and could therefore refer 168 under five years children to the nearest nutritional recovery centres. Through their strong involvement many community members contributed to the success of the project: regional health authorities, member staff of the integrated health Centres (CSI), and leaders of villages who supported the awareness screening activities.

**Outcome: Practical trainings on good governance and management are organized for NS to improve collaboration between Governance and Management**

**Output: The region will continue to work closely with global initiatives in mapping of NS capacities by using the different assessment tools developed by the IFRC to evaluate the NS strengths and weaknesses**

The results of OCAC evaluation /assessment tools have allowed Sahel Regional Representation team to support NS in the Sahel region to do the follow up on recommendations and elaborate a plan of action to address identified weaknesses. This plan of action led to the identification of priorities in country linked to the needs of the NS capacity building to develop relevant programmes for an effective response to the expectations of vulnerable people. In the framework of the follow up on OCAC results, the following progress is recorded:

- The Senegalese Red Cross (SRC) has been supported to reorganise its financial management system and procedures by the IFRC Regional Office. The NS was facing problems to consolidate financial information coming from branches to establish an efficient monitoring system and have close control of financial procedures. The NS will be financially supported in 2014 by Danish Red Cross to recruit a finance analyst for better transparency. An external audit is expected and discussions ongoing with an external audit cabinet. Three

SRC staff members attended a PMER training supported by both French and Luxembourg Red Cross in Dakar. This training will be replicated at branch level for better PMER practices. The position dedicated to resource mobilization has been filled and is working closely with communication focal point which will help improve the good image of the NS. The National Society management is on discussion with an expert to assist for staff development and staff career perspective management.

- The Gambia Red Cross Society (GRCS) has been supported to improve financial and logistic systems and procedures and reinforce its structure with the recruitment of a resource mobilization focal point for better mobilization and management of resources. The NS also needs to develop domestic partnership including stronger relationship with government specifically ministry of health for more support. The GRSC is facing a real funding gap to reorganize the NS and proceed to restructuring process and staffing (e.g. hiring a Finance manager).
- Guinea Bissau Red Cross: the OCAC recommendations pointed out financial structures, processes, systems and procedures. The National Society is also facing programming and reporting challenges and still needs support for resource mobilisation and volunteering management. The National Society is in urgent need to attract more donor support, supported by the Regional Representation Office. This support should focus on convincing donors to invest with the Society in expanding existing and creating new income generating activities that would bring in long term sustained additional income. Such a need could be addressed by hiring a dedicated Resource Mobilisation staff. In late 2013 the NS received an OD support for 6 months with a resource person in the framework of the peer to peer support but there is still room for improvement. An OD resource person deployed for 6 months and cofounded by IFRC and ICRC and has provided a tailor made support to reorganise the structures of the NS. The resource person has implemented the plan of action agreed with the senior management and governance
- Mali Red Cross had few recommendations that need external support. Most of them are linked to organisational development and structures. IFRC Sahel Regional Office has supported the Mali RC in strengthening its operational capacities through, financial, material and human resource capacities in 2013. Mali Red Cross has a good reputation at country level mostly before government and also local populations, nevertheless there is a need for the NS to reinforce its positive image through prompt and more proactive communication on Red Cross activities towards external partners, and by showing that it is a reliable and dynamic organization to mobilize more resources and strengthen its response capacities.

Communication is also a real challenge. The lack of internal communication between HQ and branches which created tensions and misunderstanding is being treated by the NS through the uniformity of its different communication tools and regular interaction with the field. Mali Red Cross has processes, systems and procedures in place but needs a better monitoring of its financial situation through an internal audit. Mali Red Cross is also in urgent need to convincing donors to invest in creating new income generating activities for longer term sustainability of the National Society. Resource mobilization focal point exists at HQ level but a clear strategy needs to be in place. More and efficient human resources are in place now however human resources policy and career development are still missing to guaranty professional quality services.

Volunteering development being one of the main priorities of the Mali Red Cross, the management and motivation of volunteers is still a challenge. The newly elaborated Volunteering policy needs to be adopted by the board and implemented.

### Constraints or Challenges

Disaster response activities represent a large percentage of National Society and IFRC actions in the region; however the disaster response system, from national to regional level, is fragmented and not functioning at maximum efficiency. There is a need for strengthening and standardizing emergency assessments and planning of operations, and review and improve deployment of regional personnel, including speed of deployment. Other areas in need for strengthening include

the NDRT and RDRT systems, contingency planning and early warning systems, integration of DRR components in programming and specific DRR initiatives. Few resources are available for risk reduction and preparedness activities, although highly needed. There is a need to enable linking the experience from disaster response operations with preparing and reducing risks in the high risk areas where the recurrent disasters and crisis take place.

## Stakeholder participation and feedback

Sahel National Societies were consulted regarding the African Food Security Initiative (AFSI) 2013-2017. A workshop was first conducted in Addis Ababa in which some National Societies took part. The opportunity of the workshop was seized to better reflect on a Food Security strategy. A draft of the AFSI 2013-2017 was elaborated and shared with all National Societies for comments and feedbacks. Their inputs were integrated in the strategic document. Besides during the food security training conducted in Burkina Faso in September 2013 and which gathered all Sahel National Societies, a SWOT analysis of the capacities in the field of food security in the region was done. This led to the draft of a Sahel food security strategy which fit in this AFSI 2013-2017.

## Key Risks or Positive Factors

Key Risks or Positive Factors	Priority High Medium Low	Recommended Action
There is an issue related to the weak capacity of National Societies in timely reporting.	M	Despite the fact there is no formal monitoring & evaluation position at the Sahel region, the team develop a monitoring system which help to mitigate the risk of late reporting or implementation

## Lessons learned and looking ahead

A key focus in 2014 will be the implementation of the Senegal River basin project (IRIS). The Sahel Regional Representation together with the concerned National Societies (Guinea, Mali, Mauritania, and Senegal) has developed this initiative in response to priorities and community needs identified through VCAs. This initiative is planned to be replicated on the Gambia and Niger rivers. The overall goal of the project is to reduce the impact of disaster risks and climate change which are facing the most vulnerable communities living alongside the Senegalese River Basin by mainstreaming DRR/CAA into national policy and planning through comprehensive and sustainable, Disaster Management, Food Security, Shelter, Organizational Development Health and Care Programmes. This initiative is premised on the assumption that integrated and coordinated programmes are more effective and that they have further impact on community livelihoods than stand-alone disaster response operations, which are limited to immediate needs.

Another lesson learnt regarding IRIS is related to the digital mapping tool in support of all the activities. Indeed, as a base, the data from initial VCAs and externally sourced providers will be used to build an interactive mapping data-base, allowing essential visualization of key risk and vulnerability factors and also the capacities of each vulnerable community involved in the program.

## Financial situation

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

## How we work

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

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.

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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 nonviolence and peace.

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