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Emergency Appeal revision Ethiopia: Drought

 International Federation
of Red Cross and Red Crescent Societies

Revised Appeal n° MDRET016	250,591 people to be assisted	Appeal launched	January 2016
Glide n° DR-2015-000109-ETH	CHF 181,521 DREF allocated	Revision n° 1	June 2016
	CHF 6,108,307 Current Appeal budget	Revision n° 2	March 2017
	24 percent Current Appeal coverage	Revision n° 3	March 2018
	CHF 2,786,072 Funding gap	Appeal ends	October 2018

Summary

This revised Emergency Appeal seeks a total of some **CHF 6,108,307** (reduced from CHF 13,686,550) to enable the **International Federation of Red Cross and Red Crescent Societies (IFRC)** to support the **Ethiopia Red Cross Society (ERCS)** to deliver integrated assistance and support to some **250,591 drought-affected people** (a decrease from 318,325 people), with a focus on the following sectors: **Health, Water Sanitation and Hygiene (WASH), Livelihoods, Nutrition and Food Security**. The Appeal timeframe is extended until October 2018.

This Appeal is being simplified to focus on the smaller geographic area of Kuri woreda of zone 1 Afar, Babile woreda of Fafan zone Somali, Babile woreda of East Harerghe zone, Oromia and Hamer Woreda of South Omo zone, South Nation, Nationality and People region (SNNPR, see attached map) where few agencies are operating; to focus on a more specific set of integrated food security and nutrition, health, water and sanitation, hygiene, and livelihoods interventions based on ERCS capacity, and on a budget that better reflects the funding environment. Against the revised Appeal budget of CHF 6,108,307 (covered at 24 percent), the resulting funding gap is CHF 2,786,072. The planned response reflects the current situation and information available now of the evolving operation and will be adjusted based on further developments and more detailed assessments.



*Restocking program in Bidu. Distribution cards.
Source: IFRC*

Details are available in the [Emergency Plan of Action](#) (EPoA)

The disaster and the response to date

- Late 2015:** consecutive failed *Belg* rains (March to May) and *Kiremt* rains (June to September) combined with erratic weather condition attributed to El Nino result in severe food insecurity, especially in the north and north-east areas of the country.
- November 2015:** Following the recognition of urgent needs the ERCS requests support through an IFRC Field Assessment and Coordination Team (FACT).

January 2016: Emergency Appeal launched for CHF 2,211,085 to support 35,371 people, with CHF 181,521 allocated from the IFRC Disaster Relief Emergency Fund (DREF), as start-up funding for the response.

March 2016: Head of Emergency Operations (HEOps) deployed to work with ERCS to consolidate its National Drought Response Plan.

June 2016: First Appeal revision with the budget increased to CHF 2,773,566 to support supplementary feeding for an additional 30,000 children under-five years and pregnant/lactating women, WASH and community-based health and first aid (CBHFA) in Bidu woreda, in Afar region and other hot spot areas.

October 2016: Mid-term review of the response.

November 2016 to January 2017: Government, ERCS and counterparts conduct assessments in Moyale district in Borena zone, in Oromia region, and Liban zone of Somali region, Southern Nations, Nationalities, and Peoples (SNNP) region in South Omo and Kindo Koysa district.

January 2017: Assessment findings inform a revised Appeal conveyed in Operations Update n°4, with a revised budget of CHF 2,595,467.

February 2017: FACT deployed to support more detailed assessments and Appeal revision.

March 2017: Revised Emergency Appeal launched for CHF 13,686,550 to assist 318,325 people.

October 2017: IFRC Donor Advisory group (DAG) conducts a monitoring visit to Afar region to assess the drought situation, resulting in a recommendation to extend the appeal period by nine months due to the existing vulnerability in the country with a focus on lifesaving interventions and linking emergency to recovery.

November 2017: A secondary data review is carried out by Movement partners to identify gaps and plan an intervention accordingly. The review includes the Humanitarian Requirement Documents (HRD), the field assessment reports, the ACAPS' review report and the comprehensive *Meher* assessment (main crop season). The outcome of the review results in the ERCS refocusing the operation to ensure that the most affected areas getting limited or no support from other humanitarian agencies are targeted by this operation.

December 2017: Operations Update n° 5 issued to extend the implementation timeframe for three months. With the ERCS receiving significant bi-lateral support from Movement partners complementing this Emergency Appeal, an agreement is reached that the IFRC Appeal be revised downwards in line with income received since the launch of the operation.

March 2018: With the drought situation in the country deteriorating further and the overall number of drought-affected people requiring assistance increasing to 8.5 million in the southern, south-eastern, and north-eastern parts of the country, a revised Emergency Appeal issued to assist 250,591 people reflecting a budget of CHF 6,108,307 and an extended timeframe to October 2018.



Restocking program in Bidu. Each beneficiary received five goats (four female and one male. Source: IFRC

The operational strategy

Key achievements

While the timely and effective implementation of this operation has been challenged by significant funding gaps and risks associated with procurement, since the launch of the Emergency Appeal in January 2016, the ERCS has delivered:

Food assistance:

- Food assistance to 770 pregnant and lactating women (PLW) and 2,415 under-five children i.e. six-month food ration for all 15 kebeles in Afar and Oromia regions.
- ERCS has assisted 93,198 under-five years children and PLW with supplementary feeding with its own funds and through support from Movement and external partners.
- Supplementary food was distributed to selected communities in Oromia.

Water, sanitation, hygiene promotion:

- Hygiene promotion and messages disseminated on how to prepare corn soya blend (CSB) at the distribution sites for 876 households (care givers and beneficiaries).
- ERCS Afar region volunteers conducted household awareness on hygiene and sanitation, acute watery diarrhoea (AWD), identification and monitoring of severe acute malnutrition cases, and referred cases to the health facility.
- A participatory hygiene and sanitation transformation (PHAST) tool kit was developed, printed and used for community/ household awareness.
- A WASH needs assessment was conducted for a sample of 282 households in Bidu district in which the respondents were mainly women.
- Community hygiene was improved with five community latrines, and three hard-substance dumping pits. This has been enhanced with community awareness sessions.



Renovation of Bidu Health centre. Source: IFRC

Health and care:

- The Afar region Bidu Woreda health centre was renovated and provided with a power source to enhance drug and vaccine storage at the centre.
- Health promotion and nutrition messages on exclusive breastfeeding were given during distributions in addition to 770 women reached by the 75 trained and equipped community-based health and first aid (CBHFA) volunteers.
- Household visits were carried out by volunteers and project staff for 4,447 households, including home visits, school health and sanitation clubs in four schools.
- Community-based health and first aid (CBHFA) training was provided for 75 volunteers, including provision of a CBHFA tool kit for all 75 volunteers.

Livelihoods:

- 1,000 households received livelihood reinforcement and support, with each household provided with five goats (four female, and one male) and fodder for six months. The livelihoods package included livestock drugs and vaccines.

Coordination, assessments and monitoring:

- Rapid drought assessment and verification visits were carried out in Kindo koysa, Wolaita zone of SNNPR.
- Favourable and supportive ERCS- local authority partnership was established.

- Joint movement partners secondary data review to assess the needs, gaps and ongoing support was conducted.
- Monthly coordination meetings have been held (ERCS managed).

Needs assessment

The immediate lifesaving and early recovery needs have been growing in Ethiopia following three consecutive years of drought, seasonal flooding and reportedly inter communal conflict in the country. According to ACAPS¹ humanitarian overview, an analysis of key crises into 2018 indicates that food insecurity and high levels of malnutrition are likely to continue in Ethiopia due to the poor rains for three consecutive seasons, loss of livelihoods, and insecurity given the current level of tension along the Oromo and Somali regions border. The same report indicates that food security and livelihoods, WASH and nutritional support will be priority concerns in 2018.

Based on the ERCS' Afar, Oromia, Somali and SNNPR internal situation analysis reports and secondary data review of the Government Humanitarian Requirement Documents (HRD), the following were identified as the most affected areas with predictions that the situation will remain the same in 2018: Kuri woreda in zone 1 of Afar region, Babile woreda of east Harerghe zone in Oromia region, Babile woreda of Fafen zone in Somali region and Hamer woreda of south Omo zone in SNNPR.

The above regions/zones/woreda have therefore been selected for interventions under this third revised Emergency Appeal in consideration of the major unmet emergency and recovery needs in the sectors of food security, livelihoods, WASH and nutrition. The limited number of humanitarian actors responding to the identified needs in the selected areas provides a compelling rationale.

The overall humanitarian situation is made more complex by the ongoing conflict between the Somali and Oromia ethnic groups. Since July 2017, some 578,000 people have been displaced (458,500 in Oromia, and (119,700 in Somali regions). This is 34 percent of the projected number of IDPs by the government and humanitarian partners across the country. The Horn of Africa-Complex emergency report indicated that out of the 458,500 internally displaced people in Oromia, 40 percent are estimated to need emergency shelter and non-food items, with similar needs applying to the Somali region.

Beneficiary selection

Interventions will be aligned with the IFRC-minimum standard commitments to gender and diversity in emergency programming, for example the selection of beneficiaries will be based on level of vulnerability, including: households that have lost their source of livelihoods (crops and animals), the chronically ill, elderly, female-headed households, lactating mothers and under-five children (malnourished), pregnant women, and/or people with disabilities. The ERCS has been working closely with the Government, stakeholders and other agencies to ensure that there will be no duplication of interventions of activities.

Overall objective

This operation seeks to deliver integrated assistance to 250,591 drought-affected people through the distribution of supplementary food; support to malnutrition screening and referrals; community health services support; improved access to safe water and hygiene promotion; and reinforcement of family livelihoods and coping mechanisms. The supplementary food component in the revised emergency appeal targets families with malnourished children under-five (U5) and pregnant and lactating mothers.

Operational strategy

Based on the operational implementation, key achievements, and recent assessments, the ERCS will carry-out the following integrated interventions: Food security, nutrition and livelihoods (malnutrition screening and referrals, distribution of supplementary food, livelihoods protection and reinforcement of coping mechanisms); Health and care (reinforcement of existing health facilities, household level health screening, health promotion and disease prevention); Water sanitation and hygiene promotion (improved hygiene promotion, rehabilitation and construction of water points) in the following areas: Kuri woreda of zone 1 Afar, Babile woreda of Fafen zone Somali, Babile woreda of East Harerghe zone, Oromia and Hamar woreda, South Omo zone of South Nation, Nationality and People Regions (SNNPR, see [attached map](#)).

¹ ACAPS was established in 2009 as a non-profit, non-governmental project with the aim of providing independent, ground-breaking humanitarian analysis to help humanitarian workers, influencers, fundraisers, and donors make better decisions.

The operation's management team (IFRC and ERCS) and Movement partners will ensure that discussions and advocacy for linking the emergency response to engagement in longer-term resilience programming with affected communities is done through existing movement coordination mechanisms and technical working groups with ERCS in Ethiopia. The operation's team will further focus on community engagement for ownership and to enhance resilience.

Proposed sectors of intervention

Coordination and partnerships


The IFRC supports the ERCS through its East Africa and Indian Ocean Islands (EAIOI) Country Cluster Support Team (CCST) and the Africa Regional Office, in Nairobi, Kenya, and through an IFRC Operations Manager based in the ERCS headquarters in Addis Ababa.

In Ethiopia, the IFRC, ICRC and Partner National Societies (PNSs) participate in regular co-ordination meetings convened by the ERCS. All issues including potential bilateral and multilateral actions are discussed. Additionally, IFRC convenes periodic co-ordination meetings in Nairobi with ICRC and PNS representatives to share updates on the situation in Ethiopia and neighbouring countries, and Movement actions to date. The IFRC region food crisis team holds weekly meetings to discuss food security concerns and strategies and bi-monthly situation reports are developed to enhance sharing of operation updates.

There is an extensive PNS presence (Spanish Red Cross, Netherlands Red Cross, Canadian Red Cross, Swiss Red Cross, Austrian Red Cross, and Finnish Red Cross) in Ethiopia, and all PNS's have different strategies to support the ERCS drought emergency response. All partners' have agreed that their drought response activities will be harmonised with the ERCS National Drought Response Plan.

The overall emergency response in Ethiopia is led by the National Disaster Risk Management Commission (NDRMC) in close coordination with the Disaster Risk Management Food Security Services (DRMFSS) of the Ministry of Agriculture. Sector task forces have been established at national, regional, zonal and woreda level with the participation of all stakeholders including the ERCS.

The Government of Ethiopia, together with partners, has been able to respond to most of the increased health related needs attributed to drought. To maximise the response capacity, the GoE had divided the most affected woredas in each region amongst operational partners. With ongoing drought affecting mostly the southern and south-eastern areas, partners need to consider scaling-up their operational presence in these areas and programme focus to include emergency activities alongside their current development programmes.

	Health and care
Outcome 1: Critical nutritional status of children under-five is improved in five districts of Oromia, Somali, SNNP and Afar region	
Output 1.1: Screening and referral for acute malnutrition carried out for households with children under age five	
<p>Activities achieved:</p> <ul style="list-style-type: none"> • Quick review conducted of the Bidu health centre, community health needs and phase-out strategy by the volunteer and health team • Mobile phones delivered for health/hygiene volunteers for reporting and other equipment for household screening • PLW needs for supplementary feeding (including general household's health assessment) identified and registered • Health/hygiene volunteer's monthly activity and findings report to Bidu health centre and ERCS project office • Two-month food support provided for households with children under-five and Severe Acute Malnutrition (SAM) cases upon discharge of the child in Bidu • Households with under-five age children and SAM and Moderate Acute Malnutrition (MAM) cases in Bidu identified and registered (including general house-holds health assessment) 	

- Intensive CBHFA health/hygiene volunteer's trainings carried out for 75 volunteers in reporting and engagement including use of mobile phone methods for existing and newly recruited to replace dropouts and refreshers

Activities planned:

- CBHFA ToT training (contribution) for key volunteers for regional branches
- Identification and registration of households with U5 SAM & MAM case (including general households health assessment) in four new targeted Woredas
- Household identification and registration of PLW needs for supplementary feeding (including general household health assessment) in four new targeted woredas
- Health/hygiene volunteer's monthly activity and findings report to EA project office (new areas)
- Provide food support for mothers/fathers arriving to health facility with U5 SAM children
- Health/hygiene volunteers continue follow up with SAM case households after successful treatment

Output 1.2: Target population are provided with rapid medical management of drought-related diseases

Activities achieved:

- Bidu woreda health centre (purchase of solar power and air conditioning for drugs and medication storage).
- Quarterly meetings held with implementing partners (health, livestock, water office) in Bidu

Activities planned:

- Establish and strengthen supervision system for volunteers and coordinators and adopt IFRC CBHFA reporting formats and prepare in local language
- Conduct monthly meeting with kebele administration and clan leaders to strengthen volunteer accountability to households and discussion of shortcomings and follow up of any complaints in four targeted woredas.

Output 1.3: Community-based disease prevention and health promotion to the target households

Activities achieved:

- Monthly health, hygiene and sanitation promotion sessions conducted in five community centres of Bidu woreda

Activities planned:

- Assess households' health situation based on information gathered during house to house visits by volunteers in four implementing districts
- Adopt IFRC CBHFA supervision and reporting methodology and tools for volunteers in Afar local language to create longer term intervention and define roles between health centre and Red Cross volunteers
- Conduct monthly health, hygiene and sanitation promotion sessions in 40 kebeles in targeted areas
- Conduct volunteers monthly meeting and review of activities

Outcome 2: Health and nutritional status of target population in Priority 1 and 2 hotspots is improved

Output 2.1: Screening and referral for acute malnutrition carried out for households with children U5 and PLW

Activities planned:

- Training of 475 volunteers in CBHFA in four woredas (five per Kebeles, with 75 already trained in Bidu)
- Procurement of PHAST kits
- Procurement of 80 mobile phones for reporting (two per Kebele; to reinforce the monitoring and reporting of community activities)
- Training 80 volunteers on mobile phone data collection and reporting (to reinforce the data collection and management at all levels, 20 already trained)
- Identification and registration of 28,000 new households with U5 SAM & MAM case (including general household's health assessment)
- Identification and registration 12,000 PLW needs for supplementary feeding (including general households health assessment)
- Volunteer monthly reporting to branch and relevant health centre
- Volunteers follow up of SAM/MAM cases

Output 2.2: Community-based disease prevention and health promotion in Priority 1 and 2 hotspots

Activities planned:

- Assess households' health situation based on information gathered during visits in 40 kebeles
- Define roles and responsibilities between Red Cross volunteers and relevant health facility
- Adopt IFRC CBHFA supervision and reporting methodology and tools for volunteers in local languages to create longer term intervention

- Conduct monthly health, hygiene and sanitation promotion sessions in community and selected schools' centres
- Conduct volunteers monthly meeting and review of activities
- Conduct community follow up activities in 40 kebeles



Water; Sanitation; Hygiene promotion

Outcome 1: Immediate reduction in risk of waterborne and water-related diseases in targeted communities

Output 1.1: Continuous assessment of water, sanitation and hygiene situation is carried out

Activities achieved:

- Water, sanitation, and hygiene items (2,000 10 litre buckets, 2,000 20-litre jerrycans, and 4,000 pieces of body soap) procured and distributed to targeted households

Activities planned:

- Water and sanitation needs assessment in 40 selected Kebeles
- Conduct households detailed assessment of existing water sources for rehabilitation or construction in target woredas

Output 1.2: Hygiene promotion activities which meet Sphere standards

Activities achieved:

- Construction of five blocks of communal latrines in public centres (five latrines per block)
- Construction of model waste disposal pits in Sedomta public centre in Afar

Activities planned:

- 80 CBHFA health/hygiene volunteers receive PHAST training (one volunteer for each Kebele, i.e. 20 volunteers / four woredas)
- CBHFA volunteers conduct safe water storage and water treatment promotion through weekly H2H visits
- Households supplied with water purification tools and safe water storage containers and buckets as required
- CBHFA volunteers conduct monthly WASH and health (safe water storage and treatment) promotion campaigns in public places (markets, parks, schools) on proper use of latrines and hand washing
- Training of 80 CBHFA volunteers on water treatment, safe water storage and other WASH related issues
- Assessment of non-functional water points in targeted woredas
- Rehabilitation of 12 identified non-functional water points
- Construction of eight new water points in three woredas



Food security



Nutrition



Livelihoods

Outcome 1: Immediate supplementary food requirements are met for the targeted population in priority 1 hot spots areas²

Output 1.1: Sufficient supplementary food is accessed by children under-five years, pregnant and breast-feeding women in five districts of Oromia, Somali, SNNP and Afar

Activities achieved:

- People to be assisted in Bidu, Afar Region and Arsi zone, Sire and Dodota woredas of Oromia Region identified and registered.
- Supplementary food rations procured and delivered for 2,500 under-five children and 770 PLW per month for six months
- Post-distribution follow-up visits carried out in 15 kebeles in Bidu, Afar region and Arsi zone, Sire and Dodota woredas of Oromia region.
- Bidu branch warehouse assessment and improvements

Activities planned:

- Procurement of supplementary food rations for 28,000 children under-five and 12,000 PLW per month for four months

² All supplementary food items are available for in-country local procurement. CSB and vegetable oil will be procured with existing ERCS arrangements with approved/ recommended suppliers.

<ul style="list-style-type: none"> • Identification and registration of beneficiaries in four new woredas • Post-distribution follow-up visits/activities in four new woredas
Output 1.2: Sufficient supplementary food is accessed by children under-five years, pregnant and lactating women in other priority 1 and 2 hotspots
<p>Activities achieved:</p> <ul style="list-style-type: none"> • Supplementary food rations (CSB and vegetable oil) procured and delivered for 65,782 children U5 and 28,193 PLW for eight months <p>Activities planned:</p> <ul style="list-style-type: none"> • Coordination with the Government of Ethiopia and nutrition partners on gaps and identification of beneficiaries. • Distribution of supplementary food rations (CSB and vegetable oil) for 28,000 under-five children in four new woredas for four months • Distribution of supplementary food (CSB and vegetable oil) rations for 12,000 pregnant and breastfeeding mothers four new woredas • Post-distribution follow-up visits/activities
Outcome 2: Livelihoods of affected populations are protected through targeted livestock interventions.
Output 2.1: Livestock assets are protected
<p>Activities achieved:</p> <ul style="list-style-type: none"> • Supplementary feed for livestock for milking livestock procured and delivered for six months for 5,000 animals in Bidu (five animals (goat) per 1,000 house-holds) • Supplementary feed (molasses/multi-nutrient blocks/" concentrate") delivered to milking livestock depending on conducive weather for restocking • Livelihoods/restocking assessment and implementation work planning in Afar/ Bidu • People to be assisted for restocking in Bidu identified and registered • Restocking carried out for 1,000 households (five goats per household) through cash transfer in Bidu <p>Activities planned:</p> <ul style="list-style-type: none"> • Experience learning and sharing on cash transfer program/ establishment of CTP in two pilot woredas • Orientation of key staff on CTP program (training and or exchange visits in four woredas) • Develop and operationalize ERCS CTP procedures • Identification of animal fodder/nutrient-block suppliers • Identification of 2,000 households for fodder voucher distribution in East Harerghe, Fafen and south Omo • Provide CTP training for staff • Conduct CTP feasibility and market assessment in implementation areas (four woredas)-at the beginning of the program • Introduction of Cash transfer program in implementation areas e.g. voucher program • Provision of pasture and fodder seed for four targeted Woreda • Procurement and provision of animal drugs for four targeted Woreda • Distribution of agricultural seeds to 3,000 households in three regions • Beneficiary feedback and follow-up
Quality programming / Areas common to all sectors
Outcome 1: The management of the operation is informed by continued assessments and a comprehensive monitoring and evaluation system
Output 1.1: The findings of evaluations lead to adjustments in on-going plans and future planning as appropriate
<p>Activities achieved:</p> <ul style="list-style-type: none"> • Appeal revision concluded based on on-going assessment and relevant new data to ensure activities remain in line with the needed response • Mid-term review conducted <p>Activities planned:</p> <ul style="list-style-type: none"> • Carry out needs assessments and monitoring in five districts • Partners review and planning meeting in March and June 2018 • Monthly joint Movement coordination meetings and updates.

- Inception workshop (set-up PMER tools, structure and scheduled including SOPs) with ERCS headquarters and field staff and IFRC Coordinator
- Drought learning review workshops
- Conduct mid-term review including a beneficiary satisfaction survey with targeted population in four woredas
- Conduct a final evaluation of the operation
- Monthly technical support monitoring and supervision by ERCS headquarters coordinator and line managers
- Periodic monitoring and technical support
- Exchange visits to other similar project areas to learn lessons on livelihoods implementation
- Community engagement and accountability (CEA) training for 25 volunteers and staff (focusing on how to manage feedback and complaints) is provided to ERCS staff and volunteers.
- Feedback systems are set up and managed (for all programs).
- Customize feedback sessions with the concerned stakeholders and beneficiary representatives with a focus on the intervention areas (WASH, livelihoods, nutrition and health)



Programme support services

To ensure effective and efficient technical coordination the following support functions are required: human resources, logistics and supply chain; information technology support (IT); communications; security; planning, monitoring, evaluation, and reporting (PMER); partnerships and resource development; and finance and administration. More details are available in the Emergency Plan of Action.



Budget

EMERGENCY APPEAL OPERATION

15/02/2018

Ethiopia - MDRET016

Budget Group	Budget CHF
500 Shelter - Relief	0
501 Shelter - Transitional	0
502 Construction - Housing	0
503 Construction - Facilities	8,000
505 Construction - Materials	3,000
510 Clothing & Textiles	0
520 Food	1,337,500
523 Seeds & Plants	805,360
530 Water, Sanitation & Hygiene	1,256,760
540 Medical & First Aid	8,453
550 Teaching Materials	29,550
560 Utensils & Tools	98,056
570 Other Supplies & Services	0
571 Emergency Response Units	11,250
578 Cash Disbursements	14,130
Total RELIEF ITEMS, CONSTRUCTION AND SUPPLIES	3,572,059
580 Land & Buildings	0
581 Vehicles Purchase	0
582 Computer & Telecom Equipment	24,800
584 Office/Household Furniture & Equipment	27,000
587 Medical Equipment	0
589 Other Machinery & Equipment	0

	Total LAND, VEHICLES AND EQUIPMENT	51,800
590	Storage, Warehousing	40,875
592	Distribution & Monitoring	22,400
593	Transport & Vehicle Costs	162,141
594	Logistics Services	4,500
	Total LOGISTICS, TRANSPORT AND STORAGE	229,916
600	International Staff	531,504
661	National Staff	382,067
662	National Society Staff	312,158
667	Volunteers	57,581
	Total PERSONNEL	1,283,310
670	Consultants	8,900
750	Professional Fees	53,800
	Total CONSULTANTS & PROFESSIONAL FEES	62,700
680	Workshops & Training	171,652
	Total WORKSHOP & TRAINING	171,652
700	Travel	153,000
710	Information & Public Relations	28,700
730	Office Costs	119,163
740	Communications	35,000
760	Financial Charges	19,200
790	Other General Expenses	9,000
	Total GENERAL EXPENDITURES	364,063
599	Programme and Supplementary Services Recovery	372,807
	Total INDIRECT COSTS	372,807
	TOTAL BUDGET	6,108,307
	Available Resources	
	Multilateral Contributions	3,322,744
	TOTAL AVAILABLE RESOURCES	3,322,744
	NET EMERGENCY APPEAL NEEDS	2,785,563

Elhadj As Sy
Secretary General

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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 (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian 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.

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



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



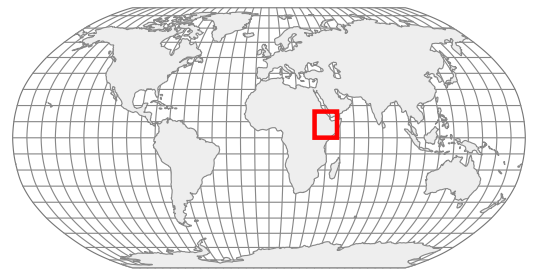
Enable **healthy**
and **safe** living.



Promote social inclusion
and a culture of
non-violence and peace.

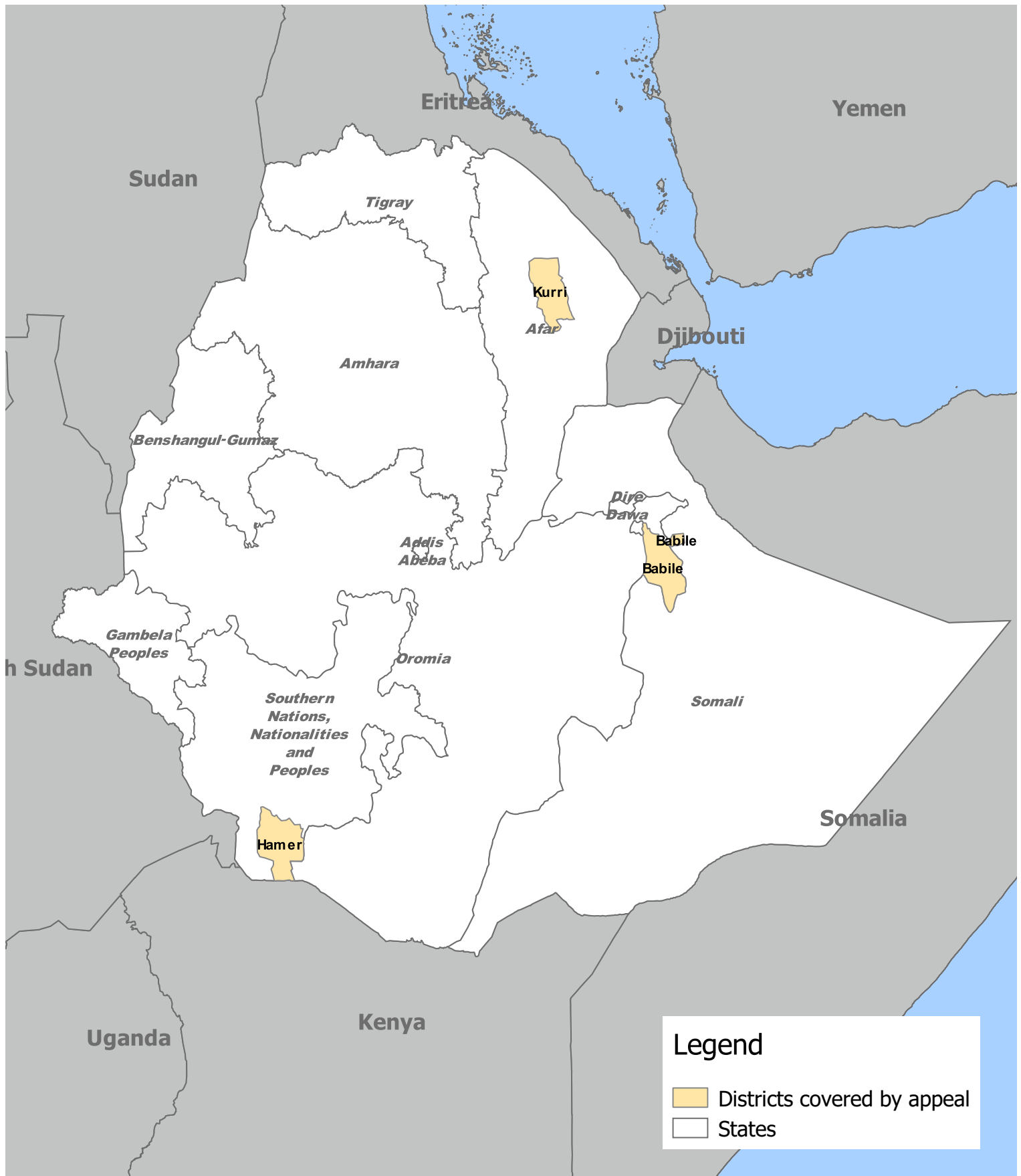


International Federation of Red Cross and Red Crescent Societies
Fédération internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر



Ethiopia: Food Security

28 February 2018 • DR-2015-000109-ETH



The maps used do not imply the expression of any opinion on the part of the International Federation of the Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities.

Map data sources: IFRC, GADM. Map produced by: IFRC Africa Regional Office, Nairobi.

0 100 200 300 400 km

