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## Operations Update

### Madagascar: Food Insecurity

 International Federation  
of Red Cross and Red Crescent Societies

<b>DREF n° MDRMG017</b>	<b>GLIDE n° <a href="#">DR-2020-000231-MDG</a></b>
<b>Operation update n° 1: 11 February 2021</b>	<b>Timeframe covered by this update: 29 November 2020 to 05 February 2021</b>
<b>Operation start date: 29 November 2020</b>	<b>Operation timeframe: 5 months (New end date: 30 April 2021)</b>
<b>Funding requirements: CHF 249,900</b>	<b>DREF amount initially allocated: CHF 249,900</b>
<b>N° of people being assisted: 10,000 people from Ambatoabo commune</b>	
<b>Red Cross Red Crescent Movement partners currently actively involved in the operation: IFRC, German RC, Luxembourg RC, PIROI</b>	
<b>Other partner organizations actively involved in the operation: UNICEF, WPF, ACF, CRS, SOS, National Office for Disaster Risk (BNGRC) and the Government of Madagascar</b>	

#### Summary of major revisions made to emergency plan of action:

This Operations Update is issued to inform stakeholders of the need to extend the timeframe of this DREF operation by two months (new end date: 30 April 2021) for an overall timeframe of 5 months.

This request for extension is justified by the delay in implementing the plan of action for which the timeframe was three months (from 29 November 2020 to 28 February 2021). Indeed, the procurement of the items (food supplement, sanitary napkins and panties for dignity kit, face masks, Aqua tabs for water purification and tools for nutritional monitoring) was launched according to the NS's procurement and financial procedures. Unfortunately, due to the end-of-year holidays and the deterioration of COVID-19 context, several of the calls for tender launched were unsuccessful and had to be relaunched, taking almost two months. This delay has thus affected the implementation of some key activities, including the beneficiary's registration, which is a key to any distribution activity, and even the care for moderately acutely malnourished children (as planned).

However, as of the date of this update (08 February 2021), most of the articles and materials have already been acquired. Some have been completely cancelled due to the lack of quality availability and the high cost (compared to the budget) on the market. As such, this timeframe extension will enable MRCS to complete the planned activities (WASH and health promotion, nutrition care, NFI and cash assistance).

The budget for this operation remains unchanged (CHF 249,900) and activities included in the original schedule are maintained, apart from the distribution of WASH and dignity kits that are cancelled due to unavailability of items.

<Click [here](#) for the interim financial report and [here](#) for the Contacts>

## A. SITUATION ANALYSIS

### Description of the disaster

On 14 November 2020, the President of the Republic, following an alarming increase of IPC 3 and 4 areas in Madagascar, called for an international [appeal](#) to all humanitarian actors to join the Government efforts in assisting the affected population in the Great South<sup>1</sup> of Madagascar, comprised of Androy, Anosy and Atsimo Andrefana with a population of 3,535,783 million people to prevent the situation from deteriorating. According to the [IPC4](#), Over the period from October to December 2020, 1.06 million people are identified as acutely food insecure (IPC Phase 3 and above), i.e., 27% of the population screened, including 204,000 people in Emergency (IPC Phase 4) and 859,000 in Crisis (IPC Phase 3). From January to April 2021, the situation is expected to deteriorate with 1.35 million people likely to become acutely food insecure (CPI Phase 3 and above) including, 282,000 people will be in Emergency (CPI Phase 4) and 1.067 million in Crisis (CPI Phase 3). Indeed, FewNet, in its [October 2020 to January 2021 and February to May 2021 Food Security](#)

<sup>1</sup> Referring to southern provinces of Madagascar

[Outlook](#) , anticipates an atypically severe upcoming lean season in the Great South.

According to the results of nutritional surveillance in the fourth quarter of 2020 and the IPC 4, the district of Tolagnaro is still under control but will experience a slight deterioration in its nutritional situation, especially in the communes of Anapatsy and Ambatoabo, where the alert phase will be more stressed.

In October 2020, MRCS and Malagasy Government, assessed the situation, which highlighted that an overall 725,620 people are currently affected by the drought and food insecurity in 10 most impacted districts of the Great South as highlighted in the table below by the Nutrition Cluster of this assessment mission.

District	Hommes	Femmes	Enfants (<18 ans)		Adultes (18-60 ans)		Personnes âgées (60 ans)		TOTAL
			M	F	M	F	M	F	Actuel
Ampanihy	97 446	104 514	48 723	52 257	45 312	48 599	3 411	3 658	201 960
Betroka	35 962	38 648	17 981	19 324	17 969	19 311	12	13	74 610
Tsihombe	18 714	21 836	9 357	10 918	9 349	10 909	8	10	40 550
Beloha	24 766	28 899	12 383	14 449	12 372	14 436	11	13	53 665
Bekily	30 934	36 096	15 467	18 048	15 455	18 033	12	15	67 030
Betioky	12 169	13 051	6 084	6 526	6 080	6 521	4	5	25 220
Ambvombe	53 013	61 857	26 506	30 929	26 484	30 903	22	26	114 870
Amboasary	43 833	47 107	21 917	23 553	21 899	23 535	17	19	90 940
<b>Taolagnaro</b>	<b>12 879</b>	<b>13 841</b>	<b>6 440</b>	<b>6 920</b>	<b>6 434</b>	<b>6 915</b>	<b>5</b>	<b>6</b>	<b>26 720</b>
Tuléar 2	14 502	15 553	7 251	7 777	6 716	7 203	535	574	30 055
<b>TOTAL</b>	<b>344 217</b>	<b>381 403</b>	<b>172 109</b>	<b>190 701</b>	<b>168 070</b>	<b>186 365</b>	<b>4 039</b>	<b>4 337</b>	<b>725 620</b>

Source: Nutrition Cluster, Screening Result Q3, 2020

During the mission, it was also found that the Commune of Ambatoabo, located in district of Taolagnaro in Anosy Region, with its about 10,000 inhabitants (2,000 households) is one of the most affected districts classified as being in emergency phase. Indeed, according to the humanitarian coordination, the commune of Ambatoabo remains among those which have not received any assistance so far, which has worsened its situation since from being under control in 2018 to an emergency in 2020 as seen in [EPoA](#).

In response to Government's call for assistance, MRCS with support from DREF launched this operation on 29 November to meet the urgent needs of all 10,000 inhabitants of Ambatoabo.

## Summary of current response

### Overview of Host National Society

Since the start of this operation, the below activities have been implemented by the NS:

- A field mission for detailed assessment was conducted from 01 to 05 December 2020 as planned in the EPoA to help NS get full understanding of the situation.
- Training sessions were organized for 22 volunteers on the promotion of Humanitarian Principles and values, on community engagement and accountability, on First Aid and Community-Based Health, including community-based surveillance, water, hygiene and sanitation promotion and on MAM monitoring.
- CEA committees have also been established to facilitate the implementation of activities.
- Beneficiary census/registration was also carried out with the assistance of the Centre of Commandment - Kere (CCO-K). A field team (composed of a NS's NDRT member and of an IFRC Suge member) is in place for the planning, the implementation, monitoring and evaluation of the activities and ensures the coordination with field partners.
- Mobilization of 22 MRCS volunteers to collect data during the joint assessment with MoH which provided information for drafting of the EPoA. They equally assessed the mid-upper arm circumference (MUAC) measurement, in the District of Amboasary, Commune Ifotaka, and organized the distribution of food to 500 households in the Commune of Behara. These responses were led by the Presidency of the Republic and the Ministry of Population.

### Overview of Red Cross Red Crescent Movement in country

Please refer to [EPoA](#) for details of RCRC partners actions in country to support NS.

The French Red Cross planned to support the NS by providing non-food items including WASH kits and kitchen kits. Unfortunately, the WASH kits will no longer be provided because they are not available in stock. The dignity kits planned and covered by the DREF will also no longer be distributed because the required sanitary pads and panties are not qualitatively available and are very expensive (compared to the available budget) on the market. The NS will discuss with the stakeholders in the community on alternative for this and appropriate actions will be taken. Through the DREF, the reusable face masks and Aqua tabs have been locally procured to complete the kitchen kit provided by PIROI.

### Overview of non-RCRC actors in country

The government has set up a programme called "Caravane du Sud" where 1,160 tons of rice, 28,800 litres of oil, 700 tons of vegetables and water will be distributed to 60,000 families.

The Ministry of Population, Social Protection and Promotion of Women and the United States Agency for International Development (USAID) through the Bureau of Humanitarian Assistance (BHA) and the Catholics Relief Services (CRS) have set up a programme called "Maharo", to provide 3,000,000 Malagasy currency (approx. CHF 700) to each of 55,880 households as the means to restart their income-generating activities.

A post-drought cash transfer assistance programme called "Toseke Vonje Aigne" financed by the World Bank (up to 13,3 million dollars) and implemented by the Development Intervention Fund (FID), under the coordination of the Ministry of Population and the BNGRC, was relaunched on 22 January 2021. It aims to provide cash to 70,000 vulnerable households for five months at a rate of 80,000 Ariary (approx. CHF 20) per month.

The Emergency Prevention and Management Unit (unit under the supervision of the Prime Minister's office) has benefited from an insurance indemnity of USD 2,126,803 from the Pan-African Insurance Company ARC. A part of the fund designated to the National Nutrition Office (ONN), should enable 16,000 of the most vulnerable families to receive food assistance, to facilitate nutritional care for 2,000 children under five years and 1,000 pregnant and breastfeeding women, the supply of drinking water for 100,000 households, the construction of two nutritional and medical rehabilitation centres (CRNM) in Ambovombe and Amboasary and the provision of medicines to the various health centres covering the affected area.

Regular coordination meetings are being held at national and field levels to exchange on the progress of the response, share experiences and ensure that interventions are being implemented in different areas; to avoid overlap or any potential gaps. The Malagasy Red Cross has been assigned Ambatoabo, while partner organisations will focus on other affected areas of the country. This will also inform the targeting strategy in the respective areas, with organizations support in some instances the entirety of the affected population.

A partnership has been established with the Centre of Operational Commandment (CCO-K) to support the operation in the census/registration of beneficiaries.

## Needs analysis and scenario planning.

### Needs analysis.

The needs remain the same as pointed out in the [EPoA](#) of the DREF. They can be summed up as:

1. **Access** to food and basic needs/livelihoods
2. **Health / Nutrition**
3. **Water, Hygiene and Sanitation** with an emphasis on access to drinking water, which is a real problem in the target commune (Ambatoabo).

According to the IPC 4, the projection period "January to April 2021" corresponds to the peak of the hunger gap in the Great South of Madagascar and the preparation period for the main agricultural season. Inflation in the prices of imported staple foods (rice, oil, sugar) is expected due to the devaluation of the Ariary (the local currency), which would make market access more difficult for all the target zones population. Due to a sharp deterioration in food security because of the depletion of household food reserves and poor access to food, an increase in acute malnutrition cases is expected from January onwards, reaching a peak in the first quarter of 2021, with aggravating factors such as an upsurge in cases of fever/malaria, diarrhoea and very worrying levels of mortality cases in some localities, where access to basic healthcare is practically non-existent.

Due to the rainfall forecasts, which range from normal to above normal for the months of January to March, support in terms of agricultural inputs (adapted short-cycle seeds, phytosanitary products) are also important needs identified to accompany the population in the recovery and protection of their livelihood to enable households in rebuilding their assets.

### Targeting and Scenario planning

Please refer to [EPoA](#) for details on targeting and scenario planning for this operation as they remain unchanged.

### Operation Risk Assessment

The current DREF operation is exposed to several risks (**Security Risks, Risks of Inflation, COVID-19 Pandemic**) as highlighted in the [EPoA](#) and for which the mitigation measures are put in place to ensure targeted communities receive the needed support. All the stakeholders are informed and involved to the mitigation measures and ensures that they are respected.

## B. OPERATIONAL STRATEGY

### Proposed strategy

#### Overall Operational objective:

The overall objective of this operation is to contribute to improving the nutritional and food security conditions of 10,000 people (2,000 households) in Ambatoabo, Taolagnaro district (Anosy Region), through a harmonized emergency response while protecting their safety, wellbeing and dignity. Given the possibility of vulnerable groups resorting to negative coping mechanisms, pregnant and breastfeeding women, children under 5 years and other socio vulnerable will be a focus. Operational timeframe will last 5 months with end date on 30 April 2021.

#### Proposed Strategy:

This DREF focuses on the urgency of addressing the issue of food insecurity and malnutrition in the targeted community. These emergency actions will make it possible to follow up with a view to a long-term continuation with resilience activities by mobilizing the necessary resources through upcoming Pan-African Food Security initiatives. In line with these efforts, the Indian Ocean Islands CCST has engaged discussion with the Italian Red Cross East Africa office on potential support to medium - longer term interventions through multilateral cooperation with IFRC and MRCS. French Red Cross will also look at possibilities to advocate for medium to long term activities related to this assistance. All along this DREF operation, Covid-19 preventive measures will be applied to avoid any risk of exposure both to the volunteers and the population. Training and mobilisation sessions, distribution activities will all follow risk prevention measures (wearing a mask, respecting physical distance, ensure regular hand washing, etc.).

In line with this strategy, activities have started on the ground and for the most part, provided the ideal framework for a successful intervention. The first situation assessment mission led by a joint NS and CCST delegation allowed to meet the authorities at various levels, to better understand the needs and to present the context and objectives of the RC intervention. This assessment confirmed the needs listed above with a focus on access to them minimum food basket, livelihood assets and drinking water. The below activities have been implemented to date:

- The population registration has been carried out by Government and the data analysis and treatment are in progress. This will enable to know the exact number of beneficiaries to be counted regarding the different components of the intervention.
- A total of 22 volunteers targeted in the 11 villages (fokontany) have been trained on humanitarian principles and values to make the population aware of the mission and principles guiding RCRC's action.
- The training of 33 members of the target communities on community engagement and accountability led to the setting up of a CEA committee in each village (fokontany) to facilitate the active involvement of the community in the preparation and implementation of activities and to facilitate the reporting and management of complaints as well.
- An advisory committee composed of local authorities and community leaders has been set up to support the technical team in resolving potential problems that may arise during the implementation of activities. This approach is also a channel for reporting on the state of the operation implementation.
- Participation in the various sectoral group's meetings enables the update of achievements to be shared with the relevant government services and other actors working in the field.
- It should be noted that particular attention is given to the involvement of different social groups and the respect for the gender approach at all levels of the implementation of the operation.

## C. DETAILED OPERATIONAL PLAN



### Livelihoods and basic needs

People reached: 5,300<sup>2</sup>

Male: 2,597

Female: 2,703

#### **Outcome 1: Communities, especially in disaster and crisis affected areas, restore, and strengthen their livelihoods**

Indicators:	Target	Actual
Percentage of targeted households reached with Cash Assistance for food and basic needs	100%	17%

#### **Output 1.1: Households are provided with unconditional/multipurpose cash grants to address their basic needs**

Indicators:	Target	Actual
Number of households assisted with cash for food	2,000	0
Number of volunteers briefed and involved in the cash for food activities	50	0
Number of market assessments conducted	2	1
Percentage of community feedback acted upon	60%	0%
Percentage of target population aware of how to interact with RCRC and its feedback mechanism	60%	53%
Number of PDM conducted	2	0

#### **Progress towards outcomes**

The needs of the affected populations were assessed in depth during the mission organised for this purpose. During this mission and through the other activities ongoing, it has been revealed that the needs in terms of food and livelihood remain a major concern in this target commune, with high probability of the situation worsening during the lean season. The population registration, organised with the support of the CCO-K, will make it possible to refine the needs and the exact number of beneficiaries per intervention sector.

Activities have been delayed mainly due to the registration of beneficiaries' process, which is the starting point for the main activities (the distribution of cash and kitchen kits) in this intervention sector. This is linked to the non-availability on the national market of some materials (weight scales, height gauge and MUAC) that must be used to carry out the registration. However, they were acquired, enabling the registration to be carried out effectively, and the data is currently being analysed and processed.

The activities carried out here are a market assessment, the training of 22 volunteers on Principles and Humanitarian Values Promotion, the training of 33 community members on community engagement and accountability, the setting up of 11 CEA committees and the organisation of 11 community sessions (1 per village) on the Principles and Humanitarian Values Promotion, the presentation of the operation and the feedback system put in place for complaints management. A total of 5,300 people (about 53% of the target population) has been reached through those Principles and Humanitarian Values Promotion sessions.

It should be noted that a conformity will be made regarding the amount of cash to be distributed per family. In fact, the Government, through the Cash Working Group, recommended the amount to be provided per household per month to be 80,000 Ariary (approx. CHF20). So instead of the 127,150 Ariary per household per month planned through this DREF operation, NS will align its assistance and disburse 80,000 Ariary per household per tranche. The remaining funds will be used to cover additional households in case there are more than expected. The Financial Service provider has been mobilized and is on stand-by to conduct disbursements once beneficiary lists are finalized.

<sup>2</sup> Reached with awareness



## Health

People reached: 0

Male: 0

Female: 0

### **Outcome 1: Less severe cases of disease or malnutrition are treated in the community, with referral pathways for severe cases established**

Indicators:	Target	Actual
Percentage of people reached by nutrition activities	100%	0%

### **Output 1.1: Acute malnutrition cases are managed in the community, with referral established for severe cases.**

Indicators:	Target	Actual
Number of volunteers trained in CBHFA and nutrition (Target: 50 volunteers)	50	49
Number of people reached by CMAM	10,000	0
Percentage of children screened and referred	20% of children under 5yrs from targeted communities	0% of children under 5yrs from targeted communities
Number of children provided with supplementary food	1,500	0

The in-depth assessments carried out and the IPC 4 data confirm the urgent needs for nutritional support (initially identified), but which are likely to increase during this lean season. The number of malnourished children planned to be supported remains unchanged as it is in line with the data collected from the community health centres. The census, whose data is currently being processed, will provide more information on the exact number of malnourished children to be cared for through the provision of food supplements. It should be noted that during the registration, nutritional screening was carried out for the entire population, including children. The result will help guide the action to be taken.

A total 49 volunteers (30 males and 19 females) out of the 50 planned have been mobilised and trained in emergency First Aid and Community-Based Health and nutrition to support the detection and care of malnourished children and the promotion of good nutritional practices through the implementation of a community-based surveillance system. There is also a question of strengthening collaboration between health structures and the community, where trained volunteers will act as an important bridge for the detection and reporting of health events or risks within the community to enable early action to be taken.

The challenges encountered here are mainly related to the delay in registering beneficiaries and acquiring food supplements due to the lack of suppliers available on the market. Fortunately, this has been solved and the planned MAM care should start soon.



## Water, sanitation and hygiene

People reached: 0

Male: 0

Female: 0

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

Indicators:	Target	Actual
Percentage of targeted people reached with hygiene promotion	100%	0%

### **Output 1.1: Continuous assessment of water, sanitation, and hygiene situation is carried out in targeted communities**

Indicators:	Target	Actual
Number of volunteers trained in hygiene promotion	50	49
Number of assessments conducted	1	1
Number of coordination meetings	5	3

### **Output 1.2: Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population**

Indicators:	Target	Actual
Number of households provided with safe water according to SPHERE standards	2,000	0
Number of treatment product tablets distributed	120,000	0
Percentage of target population with knowledge on safe water storage and safe use of water treatment products	100%	0%
<b>Output 1.4: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population</b>		
Indicators:	Target	Actual
Number of hygiene promotion sessions conducted during the implementation period	24	0
Number of IEC materials produced and distributed	20	20
Percentage of targeted population reached by hygiene promotion sessions	100%	0%
<b>Output 1.5: Hygiene-related goods (NFIs) which meet Sphere standards and training on how to use those goods is provided to the target population</b>		
Indicators:	Target	Actual
Number of households provided with WASH kits	2,000	0
Number of reusable face masks distributed	10,000	0
Number of months during which 1,500 women and girls receive dignity kits	3	0
<b>Progress towards outcomes</b>		
<p>The needs in terms of water, hygiene and sanitation remain as planned but with an emphasis on the lack of access to drinking water for the target populations. All the 11 villages in the commune have practically no drinking water points, which is a real problem for the population and puts their health at risk.</p> <p>A total of 49 volunteers have been trained on the WASH-Nutrition approach to mobilise the community on good practices in water, hygiene and sanitation. However, the implementation of certain good practices will be hampered by the unavailability of water, which will require hygiene promotion messages to be adapted.</p> <p>The hygiene kits promised by the PIROI, are no longer available. The dignity kits could not be acquired because they are not qualitatively available at the market. The only one supplier meets the desired the technical specifications but the cost he proposed is more expensive compared to the available budget for this item. These two kits will therefore no longer be available for distribution. To note, possibility of reducing number of beneficiaries was discussed with the NS who preferred to cancel these items because it would require a resumption of the tendering process, which would still take at least one month. In addition, the WASH kits are no longer available at the country level.</p> <p>Hygiene promotion sessions have been delayed because there are some materials such as image boxes, masks and alcohol-based hand sanitizers, that were not available on time. The training of the volunteers took place on first week of February and the HP sessions are starting on the week of 8 to 12 February.</p> <p>The reusable masks and water treatment products (aqua tabs tablets) have already been purchased and are on their way to the field for distribution.</p>		

## Strengthen National Society

**Outcome 1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competences and capacities to plan and perform**

Indicators:	Target	Actual
Number of volunteers involved in the operation	50	49
<b>Output 1.4: National Societies have effective and motivated volunteers who are protected</b>		
Indicators:	Target	Actual
Number of volunteers insured and briefed on their roles and risk control	50	49
<b>Outcome 2: Effective and coordinated international disaster response is ensured</b>		
Indicators:	Target	Actual
Percentage ratio of people supported versus people affected	100%	53%

<b>Output 2.1: Effective response preparedness and NS surge capacity mechanism is maintained</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
Number of conducted monitoring missions	2	0
Number of Surge deployed for support	1	1
Number of lessons learned workshop	1	0
<b>Progress towards outcomes</b>		
Of the 50 volunteers planned, 49 were able to be rolled up and trained to support the implementation of the field activities. They are multi-sectoral and will be able to support all areas of intervention of the operation. The Surge member has been recruited and is in the field to support and coordinate the implementation of the operation.		

## **D. Financial Report**

The overall budget for this operation is CHF 249,900 of which CHF 2,798 (1.11%) had been expended by 31 December 2020 as detailed in the [interim financial report](#). It should be noted that some budget lines will be reallocated according to the needs resulting in a budget review but without additional costs.

## Reference documents



Click here for:

- [Emergency Plan of Action \(EPoA\)](#)

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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.**

# DREF Operation

INTERIM FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2020/11-2020/12	Operation	MDRMG017
Budget Timeframe	2020/11-2021/02	Budget	APPROVED

Prepared on 11/Feb/2021

All figures are in Swiss Francs (CHF)

## MDRMG017 - Madagascar - Food Insecurity

Operating Timeframe: 29 Nov 2020 to 28 Feb 2021

### I. Summary

<b>Opening Balance</b>	<b>0</b>
<b>Funds &amp; Other Income</b>	<b>249,900</b>
DREF Allocations	249,900
<b>Expenditure</b>	<b>-2,798</b>
<b>Closing Balance</b>	<b>247,102</b>

### II. Expenditure by area of focus / strategies for implementation

Description	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction			0
AOF2 - Shelter			0
AOF3 - Livelihoods and basic needs	144,947	4	144,942
AOF4 - Health	43,311		43,311
AOF5 - Water, sanitation and hygiene	20,533		20,533
AOF6 - Protection, Gender & Inclusion			0
AOF7 - Migration			0
<b>Area of focus Total</b>	<b>208,791</b>	<b>4</b>	<b>208,787</b>
SFI1 - Strengthen National Societies	19,383	2,622	16,761
SFI2 - Effective international disaster management	21,726	172	21,554
SFI3 - Influence others as leading strategic partners			0
SFI4 - Ensure a strong IFRC			0
<b>Strategy for implementation Total</b>	<b>41,109</b>	<b>2,794</b>	<b>38,315</b>
<b>Grand Total</b>	<b>249,900</b>	<b>2,798</b>	<b>247,102</b>

# DREF Operation

INTERIM FINANCIAL REPORT

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## MDRMG017 - Madagascar - Food Insecurity

Operating Timeframe: 29 Nov 2020 to 28 Feb 2021

### III. Expenditure by budget category & group

Description	Budget	Expenditure	Variance
<b>Relief items, Construction, Supplies</b>	<b>181,600</b>		<b>181,600</b>
Food	37,500		37,500
Water, Sanitation & Hygiene	12,500		12,500
Teaching Materials	1,000		1,000
Cash Disbursement	130,600		130,600
<b>Land, vehicles &amp; equipment</b>	<b>1,000</b>		<b>1,000</b>
Medical Equipment	1,000		1,000
<b>Logistics, Transport &amp; Storage</b>	<b>7,250</b>	<b>2,430</b>	<b>4,820</b>
Storage	2,750		2,750
Transport & Vehicles Costs	4,500	2,430	2,070
<b>Personnel</b>	<b>37,648</b>	<b>176</b>	<b>37,472</b>
International Staff	16,500	161	16,339
National Staff		5	-5
National Society Staff	5,400	9	5,391
Volunteers	15,748		15,748
<b>Workshops &amp; Training</b>	<b>3,900</b>		<b>3,900</b>
Workshops & Training	3,900		3,900
<b>General Expenditure</b>	<b>3,250</b>	<b>22</b>	<b>3,228</b>
Travel	1,500		1,500
Office Costs	750		750
Communications	500	18	482
Financial Charges	500	4	496
<b>Indirect Costs</b>	<b>15,252</b>	<b>171</b>	<b>15,081</b>
Programme & Services Support Recover	15,252	171	15,081
<b>Grand Total</b>	<b>249,900</b>	<b>2,798</b>	<b>247,102</b>