

# Emergency appeal operation update

## Comoro Islands: Flash Floods

### Emergency Appeal n° MDRKM004 GLIDE n° FL-2012-000066-COM Operation update n°2 15 August 2012

Period covered by this Operations Update:

4 May 2012 to 23 July 2012

Appeal target (current): CHF 801,629

Appeal coverage: 86%.

[<click here to go directly to the updated donor response report, or here to link to contact details >](#)

#### Appeal history:

- This Emergency Appeal was initially launched on 4 May 2012 for an amount of CHF 801,629 (in cash, kind or services) over a six month period to assist 20,000 beneficiaries (4,000 families).
- CHF 100,000 was initially allocated from the Disaster Relief Emergency Fund (DREF) to support the National Society in their initial emergency response.
- Operation update No. 1 was issued on 15 June, 2012



Recent joint visit by DG ECHO, Comoros Red Crescent and IFRC to flood-affected communities in Moroni. Photo IFRC.

#### Summary:

Heavy rains inundated the Comoro Islands from 20 April 2012, causing the worst flooding in decades. As of 26 April, over 64,987 people were affected and more than 9,000 displaced on the islands of Grande Comore, Mohéli and Anjouan.

At the request of the Comoros Red Crescent Society (CRCO) and with support from the International Federation of the Red Cross and the Red Crescent (IFRC), the current emergency appeal was launched to assist up to 20,000 affected beneficiaries (4,000 households) through relief distribution of non-food items, water and sanitation hygiene (WASH) kits, hygiene promotion activities, as well as health and care interventions, including first aid and psychosocial support.

To date, 1,620 households have received non-food items (NFIs), including kitchen sets, sleeping pads, lanterns, stoves and mosquito nets. WASH kits, including buckets, jerry cans, soap bars, chlorine tablets and water purification sachets, have also been distributed. The operations update presents the most recent figures for distributions and rectifies previous figures that had been over-

estimated in calculations on the ground. In Grande Comoro 244 water tanks have been cleaned and the water therein treated for safe human consumption.

The CRCO have been the implementing partner for WFP (energy biscuits) and UNICEF (WASH kits) as well as being partner to this emergency operation (including distribution of NFI and WASH kits). Emergency kits were deployed quickly, with Red Crescent volunteers being immediately mobilised in distributions and WASH activities.

The immediate risks and needs related to the floods have been already addressed and the emergency phase is nearing completion. Distribution of NFI has now finished. While the items distributed went some way to meeting the needs of beneficiaries, the remaining needs include food and support to livelihoods. Water and sanitation activities are ongoing, including hygiene promotion and cleaning of water tanks and health-related activities are yet to start.

The CRCO is currently in negotiations with the African Development Bank and the Comoros Government over a project which will deliver food to affected families. Negotiations are expected to conclude shortly and a contract will be signed accordingly. The appeal will be revised to support this important project.

During observance of the Islamic month of Ramadan, work is expected to slow down, however the operation will try and maintain momentum with support from the regional representation and Africa zone. The current operations manager is due to finish her mission shortly and will hand over to a replacement in August. It is anticipated that the appeal will be revised before the end of August. The operations manager will likely be bolstered by additional support, in terms of procurement/logistics, relief and finance.

To date, contributions to this appeal have been received from the British Red Cross, the Canadian Red Cross and the Canadian Government, French, Spanish, Swedish and Japanese Red Cross Societies, European Commission - DG ECHO, Red Cross of Monaco and WHO Voluntary Emergency Relief. On behalf of the Comoros Red Crescent Society, the IFRC would like to thank all partners and donors for their generous support to this appeal.

## The situation

In an already intense rainy season, heavy rains inundated the Comoros islands since 20 April 2012, causing the worst flooding in decades. The heavy downpours resulted in landslides, collapsed bridges, loss of livestock and contamination of rain water tanks, isolating many areas and impeding the evacuation of affected communities.

The number of affected people remains unchanged. According to UNDAC<sup>1</sup> figures 64,987 people (8% of the total population) have been directly affected by the floods (17,232 in Grande Comore; 30,063 in Anjouan and 17,592 in Mohéli). Another 80,000 people in Moroni and 3,900 in Mitsoudje have been indirectly affected by broken water pumps.

In Anjouan, most of the displaced families have returned and started to rebuild their homes using local material, such as palm fronds. Returning families have taken the initiative to disinfect their own homes. Only a small number of those displaced have not been able to return home and remain with host families.

Communities have suffered loss of livelihoods and means of production. Most small scale farmers have lost their crops, which typically include bananas, coconuts, sweet potato, vanilla and cloves, as a result of the extensive damage caused by rocks and debris as a result of flooding. The floods have covered the affected land with stones and sand, and the flooding has resulted in hydro-geography changes in the landscape, opening new water ways, which poses a risk in terms of future floods. However, there is evidence of some coping strategies, whereby people are filtering the sand to sell, as it is used as a construction material for houses.

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<sup>1</sup> United Nations Disaster Assessment and Coordination - Union of the Comoros. Flash Floods. Situation Report #7- 04 June 2012

Comoros has a rudimentary health system. Only 14% of the population has adequate access to primary health care. This percentage is lowest in Anjouan, where it drops down to 10% coverage.

Comoros suffers from a high incidence of illnesses related to water: 3 cholera epidemics since 1998, with the last one in 2007. They normally occur after Ramadan and the “big/grand wedding” period (July and August), when a large number of people gather together to eat and celebrate.

The number of diarrhoea cases increased directly after the floods. Surveillance systems are weak and there is generally limited information about public health situation, however, feedback is that the number of malaria cases has increased considerably in Anjouan since June 2012.

Availability of potable water is often of bad quality and in the majority of cases not suitable for consumption (due to the lack of water treatment, pollution by agents due to leaks in the water supply system, lack of infrastructures for wastewater treatment and solid waste management), which leads to an increased vulnerability of the population at risk of morbidity and mortality.

Circumstances differ between the islands. In Grande Comore, a large portion of the population depends on rainwater gathered in large cisterns or tanks, that are old and in a bad state of maintenance. Most households dependent on cisterns and rain catchments to cover their consumption needs are exposed to health risks. These water sources are largely open and unprotected and are prime mosquito breeding grounds, thus implicated high rates of malarial infection. They are also easily contaminated and contribute to the spread of diarrhoea. In Anjouan, water source infrastructure has been damaged, particularly in Salamani and Oudzini.

The flood waters inundated and damaged latrines on all three islands, which has led to open defecation. In Moheli and Anjouan human waste poses a risk to communities living in the lower parts of the mountain as defecation is often close to the river, which has become a usual practice after the floods. This constitutes a health risk as some families still use the river as water source.

Awareness raising and advocacy campaign were carried out by CRCO (under DiPECHO) and UNICEF, in 2006, to teach Comorians about good hygiene and sanitation practices, including protection of water resources. Initial interviews carried out post floods with the affected population shows that there is generally a good level of knowledge about hygiene and sanitation practices, but that practices and habits haven't changed accordingly. Knowledge regarding how to avoid malaria and cholera remains very low.

## Coordination and partnerships

Since the last operations update, one coordination meeting has been held, facilitated by the Government's General Direction of Civil Protection (COSEP). Stakeholders include CRCO, OCHA, UNDP, UNICEF and a representative from each of the government ministry representing relevant sectors. Now that the initial emergency phase of the operation is over, meetings will be scaled back to one per month; however stakeholders will continue to share information informally. A three day workshop was organised for sectoral groups (including WatSan, education, shelter, health, disaster risk reduction, infrastructure, food security) on 17 -19 July, to develop early recovery plans for the affected communities. These plans are now in the process of being finalised and will be prioritised in coordination with OCHA and the UN Resident Coordinator.

DG ECHO made a four-day monitoring visit to the Comoro Islands at the end of June. The team, made up of ECHO, IFRC and OCHA, visited affected communities on Grande Comore and Anjouan and saw the work of the Red Crescent.

Following the visit, the key findings are as follows. Damage caused by the flooding was extensive. The CRCO has led the response and is the only organisation that could effectively work in the Comoros, however the national society requires additional capacity reinforce with technical delegates. The broader emergency response should consider/assess the impact of landslides on

food security and livelihoods for the most vulnerable population, depending on agriculture. Should additional funds be allocated, ECHO would prioritise livelihoods interventions.

DG ECHO has made a multi donor contribution to the emergency appeal. The agreement, signed on 9 July 2012, is for a contribution of EUR 200,000 to the overall appeal. The contract will run for six months, from May to November. The IFRC, on behalf of CRCO, are grateful for this valuable support.

### **National Society Capacity Building:**

This operation will contribute to organisational development and capacity building of CRCO in a sustainable manner which leaves behind a stronger set of skills and capacities at headquarters and branch levels.

With the support of the IFRC and the Plateforme d'Intervention Régionale pour l'Océan Indien<sup>2</sup> (PIROI), systems and procedures will be improved to enhance efficient financial management, logistics, monitoring and reporting. To this end, the appeal will be revised to include technical expertise particularly around logistics and relief, and build core competencies in financial management. The support of an operations manager and Regional Disaster Response Team (RDRT) members have helped to strengthen disaster response. Staff and volunteers have benefited from water and sanitation training as well as relief training. The IFRC and PIROI assistance in terms of technical support will continue during and after this operation.

Since the last update, a relief RDRT member, from Benin, supported the operation for one month, between the 11<sup>th</sup> June and 12<sup>th</sup> July. The RDRT provided technical assistance and capacity building for the national society in collaborated with the logistics department and relief officer. The RDRT provided relief training for 51 staff and volunteers, topics included RCRC history, logistics, relief tools, undertaking assessments and organising distributions.

## **Red Cross and Red Crescent action**

Thanks to the support provided by IFRC (the DREF allocation of CHF 100.000 and the Emergency Appeal launched on 20 April 2012) as well as the support of the PIROI (in kind donations, technical and logistic support since 4 May 2012), the Comoros Red Crescent has been able to assist some of the most affected people immediately after the disaster.

After a first joint rapid assessment together with the government and UN agencies, in-depth sectoral assessments have been carried out by CRCO volunteers with technical support from IFRC and PIROI.

As the situation is now moving to early recovery non-food items (NFIs) and WASH kits are now less necessary than originally planned. This falls short of the target of 4,000 families, however as the situation moves to early recovery, the NFI and WASH kits are less necessary for affected-families. It seems that families have received kits from UNICEF, or didn't have belongs damaged or lost as anticipated. The appeal revision, which should be finalised by the middle of August, will take into account the evolving needs of communities from emergency relief to recovery when updating the appeal plan and budget.

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<sup>2</sup> The PIROI's main objective is to contribute to reduce vulnerabilities of population threatened by disasters and their consequences; to reinforce Institutional, logistic and human capacities, regarding disaster preparedness and response in south west IO national societies. Since 2000 PIROI works building on disaster preparedness and disaster response capacities by training response teams, stocking relief items and equipment in 6 warehouses in the region, supporting national society institutional development and community capacity building.

Water and sanitation activities are progressing well. In Grande Comore 244 water tanks, have been cleaned and the water therein treated for safe human consumption. A total of 30 CRCO volunteers have been trained on hygiene promotion. The WASH RDRT has provided training in water and sanitation for 50 staff and volunteers.

At this stage, short-term interventions includes cleaning of water tanks and hygiene promotion activities, while mid to longer-term support includes epidemiologic control to prevent disease and on community based risk reduction activities, including nine mitigation projects at village level however this will all become clear when the appeal has been officially revised.

## Progress towards outcomes

Relief distribution ( non-food items)	
Outcome: 20,000 displaced persons (4,000 households) in Ngazidja, Mohéli and Anjouan are provided with emergency assistance for a period of one month	
Outputs (expected results)	Activities planned
4.000 households are provided with appropriate non food items	<ul style="list-style-type: none"> <li>• Develop beneficiary targeting strategy and registration system to deliver intended assistance</li> <li>• Purchase and distribute non-food items (kitchen sets, sleeping pad, lantern, stove) to 4,000 households (2,450 in Grande Comore, 650 in Mohéli and 900 in Anjouan)</li> <li>• Monitor and evaluate the relief activities and provide reporting on relief distributions</li> <li>• Conduct a lessons learnt workshop</li> </ul>

### Progress / Achievements:

- Households that have received NFIs since the start of the operation:
  - 425 households in Grande Comore
  - 645 households in Mohéli
  - 564 households in Anjouan
- There was reported incorrectly in the last operations update, the number should actually be 1620, this was an error in calculation. Other organisations, (such as UNCEF) have also undertaken distribution to affected households, meaning that there is no longer need to distribute NFIs to the affected communities.
- Three relief trainings were held on each of the three affected islands for some 51 staff and volunteers. 21 participants were trained on Grande Comore, 16 on Anjouan and 14 on Mohéli. The relief trainings were held between 26 June – 6 July, and covered topics such as RCRC history, logistics, relief tools, undertaking assessments and organising distributions.

### Challenges:

- Distribution to a further 1,915 families was scheduled to be completed by the end of July 2012, this was an ambitious plan to achieve in this period.
- Part of the NFI stock was provided by PIROI, and part was for local procurement; however the market could not meet the operations demands. For example, while sleeping mats were available, the market was unable to provide to the scale and timeframe required for the operation.
- In Comoros is quite difficult to follow IFRC procurement and logistics standards: suppliers are not used to pro-formas, real invoices or bidding processes and the local culture is to give the invoice only if you ask for it, and after you have paid.

### Water, sanitation and hygiene promotion

<b>Outcome: The risk of water-borne and water-related diseases is reduced through the provision of drinking water and hygiene promotion to 4,000 households for one month</b>	
<b>Outputs</b>	<b>Activities planned</b>
Safe water is provided to 4,000 households as damaged systems are restored.	<ul style="list-style-type: none"> <li>• Train volunteers on water and sanitation activities</li> <li>• Procurement and distribution of WASH kits consisting of 1 bucket, 1 jerry can, 2 soap bars, 50 chlorine tablets and 50 water purification sachets to 4,000 households: 2,450 in Ngazidja, 650 in Mohéli, and 900 in Anjouan</li> </ul>
The health status of the population is improved through behaviour change and hygiene promotion activities.	<ul style="list-style-type: none"> <li>• Undertake community awareness campaigns of prevention of communicable and water borne disease in the three islands</li> <li>• Hygiene promotion and information dissemination on the safe use of water treatment chemicals</li> </ul>
Sanitation activities are undertaken within affected communities, including disinfection of habitats and water storage facilities	<ul style="list-style-type: none"> <li>• Identification and disinfection of houses in the three islands</li> <li>• Identification and cleaning of 300 rain water collection tanks in Ngazidja</li> </ul>
The risk of water tanks being damaged by floods is reduced for targeted 30 households	<ul style="list-style-type: none"> <li>• Identification of 30 most damaged rain water collection tanks in Ngazidja</li> <li>• Protection of these tanks by either elevating the structure or covering the tank</li> </ul>

#### Progress:

- Training on Water and Sanitation activities has been conducted for 50 volunteers (30 in Grande Comore, 10 in Mohéli, and 10 in Anjouan). This activity was completed on 16 May 2012.
- 1620 households (425 in Grande Comore, 637 in Mohéli and 558 in Anjouan) out of the 4.000 which were targeted have received WASH kits.
- To date, 30 CRCO volunteers have been trained on hygiene promotion in Grande Comore. Two further trainings are planned for Anjouan and Moheli at the beginning of August.
- A total of 300 water tanks (out of the 458 identified) have been targeted across 17 villages of Grande Comore. To date, 244 water tanks have already been cleaned in 15 villages. This activity is on track for completion at the end of the month.
- A Knowledge Attitude and Practice interview survey has been designed and piloted on 47 respondents. This was completed 13 July. The results have been satisfactory and the pilot will be used to refine the health activities and communication material. It seems that people have adequate levels of knowledge of hygiene practices; however they don't always practice good hygiene. Awareness needs to be improved related to disease prevention such as malaria and cholera. This pilot will help to hone the hygiene promotion activities.
- Identification of the 30 most damaged water tanks. This activity has not started yet.

#### Breakdown of water tanks cleaned by village, region and date

<b>REGIONS</b>	<b>Villages</b>	<b>N° of water tanks cleaned</b>	<b>Date/Period</b>
<b>HAMBOU</b>	Mitsoudjé	22	11/06 - 16/06
	Djoumoichongo	25	16/06 - 28/06
	Bangoi	15	24/06 - 03/07

REGIONS	Villages	N° of water tanks cleaned	Date/Period
	Chouani	20	04/07 - 11/07
	Mdjoiezi	20	29/06 - 01/07
	<b>SUB TOTAL HAMBOU</b>	<b>102</b>	
<b>BAMBAO</b>	Mkazi Bambao	8	19/07- ongoing
	Vouvouni	10	17/05 - 21/05
	Boeni	11	22/05 - 25/05
	Ndrouani	7	24/05 - 24/05
	Moindzaza Mboini	12	26/05 - 27/05
	Séléa	44	28/05 - 05/06
	Nioumadzaha	18	06/06 - 10/06
	Dzahani	7	12/07 - 12/07
	Daweni	15	13/07 - 15/07
	Mboudé Adjou	10	16/07 - ongoing
	<b>SUB TOTAL BAMBAO</b>	<b>142</b>	
<b>TOTAL</b>		<b>244</b>	

- **Challenges:** The timeframe for disinfecting houses has now past. In order to be effective the work should have been done within the first few weeks after the flooding. The local population have gone ahead and disinfected their own houses before returning. Though there is no post disaster health control in place, no significant incidence of water borne diseases have been reported, except in Anjouan, where the number of malaria cases has increased since mid June.

#### Emergency health and care

<b>Outcome: The risk of deaths, illnesses and impact from diseases is reduced among affected communities through the provision of preventive measures at community-level</b>	
<b>Outputs</b>	<b>Activities planned</b>
First aid and rescue provided to those affected by the disaster.	<ul style="list-style-type: none"> <li>• Provide the first aid and rescue and refer those affected to the health facilities</li> <li>• Provide psychological support to affected people</li> </ul>
Health services are supported on the primary and possibly secondary levels to meet the health needs and fill the health service gaps resulting from the emergency.	<ul style="list-style-type: none"> <li>• Support health authorities in health centre to treat and refer patients</li> </ul>
The scope and quality of the Comoro Red Crescent health and care services are improved and the risk of epidemic outbreaks reduced.	<ul style="list-style-type: none"> <li>• Procure and distribute mosquito nets to 4,000 households (2 per household) in Ngazidja, Mohéli and Anjouan</li> <li>• Conduct 3 trainings on ECV for 100 volunteers already trained in CBHFA in Ngazidja, Mohéli and Anjouan</li> <li>• Monitor epidemics for six months</li> <li>• Health education</li> </ul>

#### Progress

- More than 200 volunteers were rapidly deployed to support local authorities in the evacuation of the population at risk. Approximately 1,600 people were evacuated with the support of the CRCO volunteers.

- Three paramedics from CRCO were deployed to support health services in assisting the population with first aid and referrals to health centres and hospitals. Around 100 wounded persons were attended to through the support of CRCO.
- Psychological support was provided to wounded and evacuated population in high distress
- 3,240 mosquito nets have been distributed to 1,620 families in Grande Comore, Mohéli and Anjouan. .

### Challenges

- No major challenges have been reported regarding this outcome.

### Disaster risk reduction

**Outcome: Floods and landslide risk is reduced for targeted communities in Ngazidja and Mohéli and Anjouan.**

Outputs	Activities planned
Flood and landslide affected communities are better prepared to predict, respond and recover to disasters.	<ul style="list-style-type: none"> <li>• Train 50 volunteers on Vulnerability Capacity Assessment (VCA) guidelines and tools.</li> <li>• Conduct VCA with communities in targeted districts.</li> <li>• Develop community hazard maps for each of the communities</li> <li>• Development community contingency plans and community based early warning systems</li> <li>• Develop mitigation micro projects in targeted communities based on VCA findings</li> <li>• Public awareness and public education for DRR activities</li> </ul>

### Progress:

- Disaster risk reduction activities are planned to start later on the appeal timeframe.

### Logistics

Logistics for this operation have been challenging. Local procurement was hampered. Goods are available in the local market, however not in the quantities required for an operation of this scale. The geographic remoteness of the country and the three affected islands has resulted in additional effort and cost for the operation.

The mobilisation table will be closed because NFI distributions will cease. Any other material needed for water and sanitation, health and disaster risk reduction activities will be procured locally.

### Communications – Advocacy and Public Information

The aim is to maintain a regular flow of reliable information between the field and other key stakeholders. This will be vital for fundraising, raising awareness of the work of the Red Cross Red Crescent and in maintaining a strong profile of emergency operations. We recognise the importance of maintaining effective communication during the operation, between affected populations and structures of the Red Cross Red Crescent, media and donors, as an essential mechanism to ensure greater quality operations, accountability and transparency. Communications activities described here are intended to support the National Society to improve their own communication skills and develop appropriate communication tools.



To date eight press releases have been distributed to the national and international media and CRCO will continue to produce communication pieces to ensure it continues to retain high level of visibility for the work of its volunteers as well as its prominent position in terms of nationally coordinated disaster response.

Some additional outreach material including hygiene promotion leaflets or posters will be produced and distributed.

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## Contact information

**For further information specifically related to this operation please contact:**

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

- **IFRC Zone:** Robert Ondrusek, PMER/QA Delegate, Africa phone: +254 731 067277; email: [robert.ondrusek@ifrc.org](mailto:robert.ondrusek@ifrc.org)

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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 (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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Saving lives, changing minds.



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

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
  2. Enable healthy and safe living.
  3. Promote social inclusion and a culture of non-violence and peace.
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MDRKM004 - Comoro Islands

Appeal Launch Date: 04 may 12

Appeal Timeframe: 04 may 12 to 31 oct 12

Interim Report

Selected Parameters	
Reporting Timeframe	2012/4-2012/6
Budget Timeframe	2012/4-2012/10
Appeal	MDRKM004
Budget	APPROVED

All figures are in Swiss Francs (CHF)

## I. Funding

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL	Deferred Income
<b>A. Budget</b>	<b>801,629</b>					<b>801,629</b>	
<b>B. Opening Balance</b>	<b>0</b>					<b>0</b>	
<b>Income</b>							
<u>Cash contributions</u>							
<i>British Red Cross</i>	29,732					29,732	
<i>European Commission - DG ECHO</i>	240,240					240,240	
<i>Japanese Red Cross Society</i>	26,500					26,500	
<i>Red Cross of Monaco</i>	6,007					6,007	
<i>Swedish Red Cross</i>	66,024					66,024	
<i>The Canadian Red Cross Society</i>	73,248					73,248	
<i>VERF/WHO Voluntary Emergency Relief</i>	300					300	
<b>C1. Cash contributions</b>	<b>442,051</b>					<b>442,051</b>	
<u>Other Income</u>							
<i>DREF Allocations</i>	100,000					100,000	
<b>C4. Other Income</b>	<b>100,000</b>					<b>100,000</b>	
<b>C. Total Income = SUM(C1..C4)</b>	<b>542,051</b>					<b>542,051</b>	
<b>D. Total Funding = B + C</b>	<b>542,051</b>					<b>542,051</b>	
<b>Coverage = DJA</b>	<b>68%</b>					<b>68%</b>	

## II. Movement of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL	Deferred Income
<b>B. Opening Balance</b>	<b>0</b>					<b>0</b>	
<b>C. Income</b>	<b>542,051</b>					<b>542,051</b>	
<b>E. Expenditure</b>	<b>-106,743</b>					<b>-106,743</b>	
<b>F. Closing Balance = (B + C + E)</b>	<b>435,307</b>					<b>435,307</b>	

MDRKM004 - Comoro Islands

Appeal Launch Date: 04 may 12

Appeal Timeframe: 04 may 12 to 31 oct 12

Interim Report

Selected Parameters	
Reporting Timeframe	2012/4-2012/6
Budget Timeframe	2012/4-2012/10
Appeal	MDRKM004
Budget	APPROVED

All figures are in Swiss Francs (CHF)

### III. Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A							B	A - B
<b>BUDGET (C)</b>		<b>801,629</b>					<b>801,629</b>	
<b>Relief items, Construction, Supplies</b>								
Clothing & Textiles	55,429						55,429	
Water, Sanitation & Hygiene	136,546	6,963				6,963	129,583	
Teaching Materials	14,286						14,286	
Utensils & Tools	129,143	944				944	128,199	
Other Supplies & Services	90,000						90,000	
<b>Total Relief items, Construction, Su</b>	<b>425,403</b>	<b>7,907</b>				<b>7,907</b>	<b>417,496</b>	
<b>Logistics, Transport &amp; Storage</b>								
Storage	1,143	71				71	1,072	
Distribution & Monitoring	51,429	6,340				6,340	45,089	
Transport & Vehicles Costs	30,871	15,599				15,599	15,272	
<b>Total Logistics, Transport &amp; Storage</b>	<b>83,443</b>	<b>22,010</b>				<b>22,010</b>	<b>61,433</b>	
<b>Personnel</b>								
International Staff	82,000	200				200	81,800	
National Society Staff	2,143						2,143	
Volunteers	110,200	23,400				23,400	86,800	
<b>Total Personnel</b>	<b>194,343</b>	<b>23,600</b>				<b>23,600</b>	<b>170,743</b>	
<b>Consultants &amp; Professional Fees</b>								
Consultants	7,143						7,143	
<b>Total Consultants &amp; Professional Fe</b>	<b>7,143</b>						<b>7,143</b>	
<b>Workshops &amp; Training</b>								
Workshops & Training	11,429						11,429	
<b>Total Workshops &amp; Training</b>	<b>11,429</b>						<b>11,429</b>	
<b>General Expenditure</b>								
Travel	15,086	11,251				11,251	3,835	
Information & Public Relations	5,071						5,071	
Office Costs	6,000	3,058				3,058	2,942	
Communications	3,157	601				601	2,556	
Financial Charges	1,629	18,449				18,449	-16,820	
<b>Total General Expenditure</b>	<b>30,943</b>	<b>33,359</b>				<b>33,359</b>	<b>-2,416</b>	
<b>Operational Provisions</b>								
Operational Provisions		13,353				13,353	-13,353	
<b>Total Operational Provisions</b>		<b>13,353</b>				<b>13,353</b>	<b>-13,353</b>	
<b>Indirect Costs</b>								
Programme & Services Support Recov	48,926	6,515				6,515	42,411	
<b>Total Indirect Costs</b>	<b>48,926</b>	<b>6,515</b>				<b>6,515</b>	<b>42,411</b>	
<b>TOTAL EXPENDITURE (D)</b>	<b>801,629</b>	<b>106,743</b>				<b>106,743</b>	<b>694,885</b>	
<b>VARIANCE (C - D)</b>		<b>694,885</b>				<b>694,885</b>		