

Final report



International Federation
of Red Cross and Red Crescent Societies

Syria: Drought

Emergency appeal n° MDRSY001
GLIDE n° DR-2009-000149-SYR
Final report
27 March, 2011

Period covered by this Final Report: 26
August 2009 to 31 December 2010

Appeal target (current): CHF 3,255,615

Appeal coverage: 49%; [<click here to go directly to the final financial report, or here to view the contact details>](#)

Appeal history:

- This Emergency Appeal was initially launched on 26 August 2009 for CHF 3,255,615 for 12 months to assist 260,000 beneficiaries.
- Disaster Relief Emergency Fund (DREF): CHF320,856 was initially allocated from the International Federation's DREF to support the National Society to respond. The allocation was later returned to the DREF.



Almost 110,000 persons in the drought affected areas received hygiene parcels and enhanced awareness on hygiene and health thanks to Syrian Arab RC volunteers. Photo: SARC

- With Operation Update no 3 issued 1 September 2010 the Appeal was extended until 31 December.

Summary: More than **280,000 persons** including around 200 Syrian Arab Red Crescent (SARC) volunteers were supported with activities from this Appeal. Despite 51 percent coverage of the appeal, SARC managed to exceed the number of people reached compared to the initial target. Almost **165,000 individuals received food** assistance. Food was frequently mentioned as a priority by the communities and was much appreciated. The food aid became an important contribution to the families' daily food rations that for many consisted of tea and bread. Almost **110,000 beneficiaries received hygiene items** to maintain basic hygiene which they otherwise could not afford; **279 health awareness sessions** preceded the distributions. Recent follow up visits to some of the affected communities gave an almost surprisingly positive feedback to the health awareness sessions with several examples of sustained behavioural changes. By boiling drinking water diarrhoea among the children have disappeared was The most important feedback received underscored the fact that diarrhoea among children has almost disappeared as a result of the effect of boiling drinking water **100,960 patient consultations** were carried out from the launch in August 2009 to the end of this appeal in the six clinics located in the drought affected area I. These clinics together with additional four were supported and achievements reported under International Federation of Red Cross and Red Crescent Societies (IFRC) appeal for displaced Iraqi populations. The number of patients is therefore *not included in the number of people reached by this appeal* to avoid duplication. With support from British Red Cross to this appeal, the clinics and MHUs were however supplied with supplementary feeding to children and additional medication to cover diseases related to drought, mainly diarrhoea and skin diseases, SARC clinic reports indicate that the number of children seen in the clinics dropped from around 11 percent early 2010 to around 3 percent in December. IFRC continues in 2011 to support 10 Syrian Arab Red Crescent health clinics and

four mobile health units under the Appeal, *Syria: Population Displaced from Iraq (MDRSY002)*: <http://www.ifrc.org/docs/appeals/10/MDRSY002reab.pdf>

SARC is increasingly working to mobilise communities and to enhance community resilience and reduce risks. A gender focus has resulted in increasing numbers of women from the affected communities participating in the actual activities - in particular the health/hygiene awareness - to ensure sustainability of the intervention. There were strong links between the implementation of activities in this appeal and other Disaster Risk Reduction (DRR) activities carried out by the National Society. The planting of 37,500 shrubs to prevent desertification and provide fodder for animals and an income generating project close to Hassakeh, and the chicken project, were supported with funds from this appeal. The drought response has developed capacities within the National Society on water emergencies - a new area for Syrian Arab RC. A national emergency team of 27 staff and volunteers now exists within the National Society trained to be deployed in case of another emergency. Household water treatment and safe water storage have been included in the health/hygiene promotion curricula and a whole set of promotion material has been developed together with the translation to Arabic of the International Federation manual on house hold water treatment. The population has not recovered from the drought and the situation for 2011 is still uncertain.

The objective to rehabilitate water and sanitation installations in schools is still very much needed but had to be cancelled due to limited coverage of the appeal.

The government is increasingly looking to support the people affected by the drought as a priority and the National Society is considering a possible continuation of its support.

Lessons learned: A lot of time was spent and efforts made to prepare for appropriate community based health awareness sessions that would contribute to sustained resilience among the population. Recent IFRC/SARC follow up visits and discussions with populations from three communities indicate that the preparations have yielded results. Although the number of communities visited was limited, the feedback was unified: The families have changed their behavior and are today following several of the advices that have contributed to improved health, as mentioned above, erasing diarrhea among children turned out as the most positive impact. The women asked for more education sessions. Given that SARC/IFRC already has developed a plan of action for community based health for 2011, the feedback received from the drought affected populations will be incorporated in the activities planned. (The target population was women in the affected communities. Female facilitators from the communities were identified and trained in hygiene promotion and health awareness to be able to support the female SARC volunteers during the sessions and to sustain the knowledge in their local community. The training was followed by sensitization visits to the relevant villages to identify and register the beneficiaries to take part in the health awareness sessions and to receive a hygiene parcel. Promotion and training material to support the sessions were developed by SARC volunteers.).

Financial report: 49 per cent of the total appeal budget was covered. CHF 416,977 was received as in-kind donations and CHF 1,170,862 as cash contribution. All funds have been used and fully reported.

The International Federation of Red Cross and Red Crescent (IFRC) wishes to thank American Red Cross, British Red Cross, Canadian Red Cross and government, Danish Red Cross and government. Finnish Red Cross and government, Iranian Red Crescent, Italian government, Japanese Red Cross, Libyan Red Crescent, Monaco Red Cross, Netherlands Red Cross, Spanish Red Cross, Swedish Red Cross and government and United Arab Emirates Red Crescent and government for their contributions to this Appeal. The International Federation also sends its compliments to Icelandic Red Cross for the deployment of a field assessment and coordination (FACT) delegate to assist the representation in Syria and Syrian Arab RC with a water assessment. The compliments are extended to Spanish RC for supporting the National Society with a water delegate who assisted Syrian Arab RC to enhance capacity in responding to water emergencies. Appreciation also goes to United Arab Emirates (UAE) Red Crescent, Turkish Red Crescent and Egypt Red Crescent for bilateral contributions to Syrian Arab RC's response to the drought affected populations.

The situation

Severe drought has affected an area of 1,3 million inhabitants resulting in many farmers not being able to harvest for four consecutive years, while many herders having lost over 80% of their livelihood due to lack of

pasture and fodder. In the eastern governorates, particularly Hassakeh, Deir al Zor and Raqqah, the drought has had an impact on almost the entire rural population. According to the government and UN's estimate some 800,000 people suffer from severe vulnerability. Over the past four years, their income has decreased by 90% and their assets and sources of livelihood have been severely depleted... Thousands of families from the east have migrated to urban centres or abroad. Some 65,000 families have left their villages with 35,000 families from Al Hassakeh alone. The government has made several important initiatives to support the affected population. A national strategy has been developed with several initiatives aiming at improve the lives of those affected including food distributions, subsidies to support farmers and herders and the establishment of a new early warning system. The population is still suffering from the consequences of the drought and in all villages visited by Syrian Arab RC and IFRC, people asked for continued support.

Red Cross and Red Crescent action

Achievements against outcomes

Overview

All outcomes were achieved except the school activities under water and sanitation that had to be cancelled due to a limited coverage of the appeal. The number of people reached with food assistance, hygiene items, health awareness and capacity building of SARC volunteers, exceeded initial targets.

At a glance:

- Almost **165,000** persons were reached with food assistance.
- More than **107,000** persons received hygiene parcels
- **279** health awareness sessions were organised by SARC volunteers to around 20,000 women.
- Almost **200** SARC volunteers enhanced their capacity in tackling water emergencies (incl. deployment of emergency water units); health awareness, food security, community mobilisation, VCA and logistics.
- More than **10,000** persons were involved in community based risk reduction activities involving tree planting and income generating activities.
- **100,960** patient consultations were carried out during the appeal time frame in the six clinics and mobile health units relevant to this appeal.

The population has still not recovered from the effects of the drought. Syrian Arab RC is coordinating with government structures to ensure an appropriate future role for the National Society.



As mentioned above, the outcome of the health education sessions was particularly positive. This lesson learned will contribute to enforcing SARC CBHFA activities in 2011.

In addition to providing needed assistance to the drought affected populations, this response has also enhanced SARC capacities in several areas relevant to the appeal. Water emergencies were a new area for SARC. There is now a trained team of 27 persons ready to be deployed and with the know how to use emergency water units in case of another similar

disaster. Disaster risk reduction has been a priority for the National Society for the last five years mainly supported by British RC. By coordinating support

As a pilot, SARC supported 24 families with chicken to enhance their live hood. Photo: IFRC

From this appeal, IFRC global fund for DRR and support from British RC, SARC volunteers took several steps forward by increasingly working directly with the affected communities; involving them in planning, training and decision making, also in geographical areas outside this appeal. SARC ensured access to the affected women by enhancing the presence of female volunteers and involving women facilitators directly from the communities concerned. By including climate change adaptation and food security awareness in VCAs a more holistic perspective of the situation and the response was developed. Supporting people's livelihood through income generating activities was also a rather new activity prior to last year.

Relief distributions (food)

Outcome: Food parcels for 20,000 families (140,000 persons) are distributed in the affected areas

Outputs (expected results)	Activities planned
Drought affected families are provided with food parcels to improve nutrition	<ul style="list-style-type: none"> • Coordinate with local authorities and government to ensure the effective distribution to the most vulnerable and avoid overlapping. • Develop beneficiary targeting strategy and registration system to deliver intended assistance. • Identify families in need in cooperation with the local authorities. • Set up distribution points in coordination with local authorities and UN agencies. • Mobilize branch distribution teams. • Procure 40,000 food parcels (delivered to 20,000 families two times). • Monitor and evaluate the relief activities and provide reporting on relief distributions. • Continue ongoing detailed assessment for emerging needs. • Develop an exit strategy in cooperation with the Syrian government.

25,000 food parcels reached almost 165,000 persons severely affected by the drought, the majority being farmers and herders unable to maintain their livelihood. The food distributions targeted primarily female headed households, disabled, elderly, sick and families with many children. Prior to the distribution, several coordination meetings were arranged with SARC branches to enhance the complementary role of the National Society compared to government and UN efforts. Coordination meetings with WFP minimised the risk for any duplication of efforts.

Table 1: Total quantity of delivered food parcels

Syrian Arab RC Branch	Quantity *in what measurement-
Al Hassakeh	10,000
Raqqa	3,000
Homs	5,000
Deir al Zor	7,000
TOTAL	25,000

Table 2: Aggregated data

SARC branch	No of villages	Beneficiaries			Total families
		Total female	Total male	> 18*	
Al Hassakeh	56	78,854	64,561	21,304	10,000
Raqqa	40				3,000
Homs	32				4,000
Deir al Zor	18				5,000
TOTAL	146	164,719			22,000

*Figures for children below 18 include only the second and third distribution

Prior to the third and last distribution in November, a workshop on food security and nutrition was organised for 27 volunteers, aiming to introduce the concept of food security and its assessment methodology and to raise the capacity of SARC volunteer network to integrate food security within the drought response. The workshop included visits to affected families and partly as a result, the content of the food parcels was slightly modified to be more in line with requests from the families: rice (6 kg) sugar (3 kg), tea (0,5kg), flour (10kg), vegetable oil (2litres) and dates (1kg).



Syrian Arab RC distributed food aid to almost 165,000 persons in the east and north eastern parts of Syria. Photo: SARC

Implementation of the food assistance was carried out by the National Society but IFRC representative made many visits to the affected villages. When talking to members of the population food assistance was

frequently mentioned as a priority and was much appreciated. Although distribution of food parcels does not provide a long term solution for the affected families, the food aid became an important contribution to the families' daily food rations. As mentioned in one of the earlier updates, one man told IFRC his wife and children had not slept since they learned that they were about to receive food.

Emergency health and care

Outcome: The health risks of the emergency on the affected population is monitored and reduced through the provision of preventive, community-level and curative services to 70,000 beneficiaries

Outputs (expected results)	Activities planned
Health status of the affected population is maintained through adequate curative and preventive basic health care services ensured through SARC health clinics and mobile health clinics in coordination with the local health authorities.	<ul style="list-style-type: none"> • Assess the health situation in the affected areas and analyse the information gathered by Syrian Arab RC health clinics. • Reinforce the capacity of the existing five Syrian Arab RC basic health care clinics in the affected areas with the provision of additional medical supplies. • Strengthen and mobilise the two Syrian Arab RC mobile health clinics to conduct screening of patients. • Distribute 26,000 family hygiene kits (delivered to 13,000 families two times). • Conduct training workshops for 75 volunteers of Syrian Arab RC in community based health and first aid. • Train 28 volunteers on nutrition and food security assessment, and on supplementary and therapeutic feeding. • Develop a monitoring system for malnutrition of children in coordination with the local health authorities.

Clinic health services and mobile health units

The health situation among patients who visited SARC clinics continued to be followed at SARC HQ through SCIS (SARC clinic information system) which provides a good monitoring tool. Clinic reports indicate that the number of wasted children seen in the clinics dropped from around 11 percent early 2010 to around three per cent in December. Every child under five was followed by the clinics with immediate intervention if necessary. Children in need of more specialised care were referred to MoH hospitals according to established referral procedures. SARC/IFRC follows WHO definition of malnutrition.

100,960 patient consultations were carried out from the launch to the end of this appeal in the six clinics located in the drought affected area relevant to this appeal: Deir al Zor, Al Hassakeh, Al Raqqa, Homs, Al Bokamal and Qamishly. Four MHUs are reaching out to poor rural populations with limited access to other health services. These clinics together with additional four were supported and achievements reported under IFRC appeal for displaced Iraqi populations. The number of patients has therefore not been included in the number of people reached by this appeal to avoid any duplication. With support from British RC to this appeal, the clinics and MHUs were however supplied with supplementary feeding to wasted children and additional medication to cover diseases related to drought, mainly diarrhoea and skin diseases,

IFRC continues in 2011 to support 10 Syrian Arab RC health clinics and four mobile health units under the Appeal, *Syria: Population Displaced from Iraq (MDRSY002)*:

<http://www.ifrc.org/docs/appeals/10/MDRSY002reab.pdf>

Distribution of hygiene parcels

More than 16,000 families, or almost 110,000 beneficiaries, received support to maintain basic hygiene through the distribution of 26,000 hygiene parcels to families who would otherwise not afford the items provided. The distribution followed awareness sessions on household water treatment, safe water storage and health/hygiene promotion (for reporting on the awareness sessions please refer to the objective under water, sanitation and hygiene promotion below).

Distribution of hygiene parcels				
Branch	Targeted communities	Families	Total beneficiaries	Hygiene parcels

Raqqa	42	4,000	24,690	5,000
Deir al Zor	21	4,563	32,291	7,000
Hassakeh	14	4,731	32,832	10,000
Homs	13	2,828	17,608	4,000
Total:	90	16,122	107,421	26,000

During a recent IFRC/SARC follow up visit to three of the affected communities in Deir al Zor and Hassakeh governorates, the discussions with the women indicated not surprisingly that this support was particularly important to the women - who also were the target group for the health awareness sessions. All items in the parcels had been used and the women asked for additional distributions since they still cannot afford hygiene items. The female sanitary pads that were included in the parcels seemed to have been particularly appreciated. When asked if anything else should have been included in the parcels, some women mentioned baby pampers, more sanitary pads and bigger quantities of shampoo, while the men would have appreciated to receive shavers and razor blades.

Hygiene parcel content		
SOAP, body soap, 100g, piece	5	Piece
WASHING POWDER	2	Kilograms
BATH TOWEL, small, 100% cotton,	5	Piece
TOOTH PASTE, tube 75 ml	3	Tube
TOOTH BRUSH,	7	Piece
SHAMPOO, 250 ml	1	Bottle
DETERGENT, household, general cleaning, liquid, bottle 1L	4	Bottle
Washing Sponge	4	Piece
Sanitary pads	4	Box

Challenges: While all items were well received and appreciated, the families can still not afford to buy most of the items included in the parcels.

Capacity building of Syrian Arab RC volunteers

112 volunteers enhanced their capacity in community based health and first aid (CBHFA), hygiene awareness and techniques on reaching out to and mobilising communities. The trainings were organised at different locations and times and included one trainer's (ToT) course for 29 CBHFA volunteers. In one of the workshops, clinic staff joined the CBHFA training. This was the first time branch volunteers and clinic staff participated in a joint training. Enhancing the approach to further integrate SARC different programs, a CBHFA project has been developed for 2011 that will enhance both preventive health/health awareness in the clinics and the outreach of skilled CBHFA volunteers to communities surrounding the clinics, with particular emphasis on communities served by the mobile health units.

A workshop on food security and nutrition was organised for 27 SARC volunteers. The volunteers became acquainted with the concept of food security and its assessment methodology and integrated a food security and nutrition perspective in the needs assessments among the affected communities prior to the third and last food distribution in November

Water, sanitation, and hygiene promotion

Outcome: The risk of waterborne and water related diseases has been reduced through the provision of safe water, adequate sanitation in line with WHO/SPHERE standards as well as hygiene promotion to 40,000 beneficiaries.

Outputs (expected results)	Activities planned
Key hygiene messages are disseminated effectively at household and community level to enhance resilience through better awareness, knowledge and behaviour.	<ul style="list-style-type: none"> • Conduct an ongoing water/sanitation assessment and agree on a plan of action with the government. • Design and procure 50 school tap purification units to be distributed to the selected 50 schools in line with the technical procedures agreed with the Ministry of Education. • Procure 13,000 jerry cans. • Based on ongoing assessment, consider the potential deployment of emergency response units (ERUs). • Deploy a water sanitation specialist. • Mobilize a water/sanitation team to support the response operation. • Train Syrian Arab RC staff and volunteers in water supply, sanitation and hygiene interventions. • Design and conduct hygiene promotion campaigns at the most affected areas. • Organize hygiene promotion sessions targeting 50 schools • Repair all the latrines out of use, in the selected schools. • Ensure that all the latrines have enough water points for washing and flushing • Supply soap for hand washing • Ensure coordination with Ministry of Education for sustainable maintenance of the rehabilitated latrines and water points • Carry out maintenance training of relevant staff in school and Syrian Arab RC branches • Coordinate with relevant authorities to advocate for water supply to schools without any access to water • Change water tanks in schools with water supply but with non maintained tanks • Train and involve teachers in the maintenance of the tanks and chlorination • Ensure water analysis is carried out by relevant authorities • Increase water quality in the schools without drinking water from local treatment plants through the connection of Reverse Osmosis Units. • Supply all pupils with water vessels to prevent drinking directly from the tap. • Recruit 2-3 water engineers to lead the rehabilitation project

The launch of this Appeal in August 2009 coincided with an increase in the number of diarrhoeal diseases in the eastern parts of the country. Water and sanitation is a relatively new area for the National Society and a decision was therefore made to ask for the deployment of a Field Assessment and Coordination Team (FACT) delegate, who would support Syrian Arab RC to take appropriate actions. The outcome of the water assessment resulted in a decision not to deploy a water emergency response unit (ERU) but to focus on capacity building of the National Society and community based health awareness. In early 2010, two emergency water kits (for 2,000 and 10,000 persons) were received under the Appeal thanks to Spanish RC and Finnish RC. A Spanish RC water delegate arrived in Syria for almost one month mission to support the National Society in strengthening its capacity in water emergencies. The mission included extensive preparedness training on the deployment, use and maintenance of the water units. The group of 27 staff and

volunteers were trained for almost one week and will be deployed as national intervention team in case of a new emergency on water. Urgent needs in enhancing community awareness related to water, health and hygiene was again confirmed as a priority.

The donation of 26,000 hygiene parcels by Finnish RC became an important element in the development of a plan of action for health awareness that focused entirely on the women in the affected communities. The distributions became an opportunity to attract the women to be present during the health awareness sessions that always preceded the distributions. Time and effort was spent to prepare for an appropriate community based intervention that would contribute to increasing resilience among the population. Training materials was developed (see below). Training in hygiene promotion and health awareness using the WASH cluster curricula was organised for 30 women - with the objective to sustain the knowledge in their local community - and the local Syrian Arab RC branches. The training was followed by sensitization visits to the relevant villages to identify and register beneficiaries to take part in the health awareness sessions and to receive a hygiene parcel. The sessions started as a pilot project with awareness sessions and focus group discussions jointly with the trained women and Syrian Arab RC female volunteers in poor, rural Bedouin communities around Palmyra/Tadmur (Homs governorate). With lessons learned, the sessions moved on to Deir ez-Zor, Raqqa and Hassakeh. The intervention was supported by the relevant authority, the Badia Commission. Recent IFRC/SARC follow up visits to three of the communities in Deir ez-Zor and Hassakeh - indicated an almost surprisingly positive outcome. Several examples of behavioural changes still in force were mentioned; most importantly, the families now boil the drinking water which, according to the women, have *erased* diarrhoea among the children.

Hygiene/Health awareness sessions				
Branch	Targeted communities	Awareness sessions	Families	Direct and indirect beneficiaries *
Raqqa	42	88	4,000	24,690
Deir al Zor	21	40	4,563	32,291
Hassakeh	14	122	4,731	32,832
Homs	13	29	2,828	17,608
Total:	90	279	16,122	107,421

* Only the female members of the total beneficiaries receiving hygiene parcels attended the awareness sessions.

Challenges and future plans: The encouraging feedback on the health education will be incorporated in the current CBHFA project carried out in clinics and communities as an objective under the appeal *Syria: Population displaced from Iraq (MDRSY002)*.

The funding received for this Appeal did not allow for implementation of the water and sanitation activities in the schools as planned.

Capacity Building for Preparedness and Response

Outcome 1: The disaster response capacity of the three Syrian Arab RC branches – Deir az Zor, Al Hasakeh and Al Raqqa – is improved

Outputs (expected results)	Activities planned
The disaster management teams at branch level have trained volunteers who are ready to respond to the emergency	<ul style="list-style-type: none"> Organize disaster management workshops (number to be decided by SARC based on the ongoing assessment). Establish DRR working groups from two branches. Mobilize national DRR working group to support DRR and community based plans and activities. Provide necessary office equipments to branches.

Outcome 2: The capacities of selected communities exposed to drought risks in Deir az Zor, Al Hassakeh, Al Raqqa and parts of Homs governorate are improved

Outputs (expected results)	Activities planned
The resilience of the community	<ul style="list-style-type: none"> Conduct a VCA study at local communities' level to identify DRR

is improved through better awareness, knowledge and behaviour.	micro projects. <ul style="list-style-type: none"> • Support the establishment of local community committees to design DRR projects. • Establish working groups per branch for community intervention activities with clear roles and responsibilities.
Public education is improved through community participation and involvement of national and local media	<ul style="list-style-type: none"> • Organize drought information meetings for the public and the media. • Organize workshops (number to be decided by SARC based on the ongoing assessment) on drought-related topics. • Develop training materials. • Establish community committees at local level and train them in project management

Outcome 1:

SARC national DRR working group has been actively involved to support preparation and implementation of activities related to this Appeal. All branches relevant to the Appeal have developed DRR working groups. The DRR volunteers were instrumental in supporting the drought response.

A number of workshops, planning and working meetings and field visits have taken place throughout the time frame of the Appeal. As a result of the lessons learned from the community interventions, a community based assessment tools guide was developed by the national DRR working group, based on the IFRC guides but adapted to the Syrian context. 56 volunteers were trained in vulnerability and capacity assessment (VCA) and community mobilisation. This training was supported by the IFRC global alliance for DRR and resulted in supporting the development of a revised plan of action for the drought response.

With bilateral support by British RC, two trainings/field exercises on disaster management were carried out for 136 new volunteers with the objective to enhance SARC preparedness at branch and unit level through well trained volunteers.

Supported mainly by British RC, community based risk reduction has for several years been a priority for Syrian Arab RC. In 2010, the national society enhanced its capacity to mobilise communities. With financial support mainly from the IFRC Global Alliance for DRR, a number of projects were implemented by the branch DRR volunteers in coordination with SARC national DRR working group and DRR officer, aiming to saving lives, strengthening and protecting livelihoods; enable safe and healthy living; tackling climate change and expanding sustainable local capacities. Almost 40 per cent of the branches had in 2010 programmes that directly involved the target population in planning and implementation.

Outcome 2:

One of the main tasks for SARC's national DRR working group during the year was to support the development of micro projects jointly with the branches concerned - two of which were supported under this Appeal. Jointly with the local communities, Syrian Arab RC in cooperation with relevant authority Syrian General Commission for Badia Management and Development (the Badia Commission) planted 37,500 shrubs in Al Hassakeh and Deir al Zor governorates. The tree-planting, stretching over approximately 100
Jointly with community members, SARC planted 37,500 shrubs to prevent desertification and to provide fodder for animals. Women were present in high numbers during the planting exercise. Photo: IFRC

hectares in the two locations, reached a total of 10,000 people. This activity combined community mobilisation with long-term efforts for climate change adaptation and mitigation; preventing desertification, providing grazing opportunities for the cattle and firewood for the population.

During the implementation phase, 400 Red Crescent volunteers, members of local communities, Badia Commission staff and other partners were involved in the activity. Syrian Arab RC co-ordinated the project,



mobilised the volunteers and other partners and managed the logistics. The authorities provided the shrubs, allocated specialists to provide direct technical support and ensured watering and follow up of the tree planting sites. A community perspective was present in all phases of the process – from the VCA through to planning and implementation. A particular focus was attributed to encourage the women to be involved throughout the project, in focus-group discussions in the VCA process, and later in the implementation phase.

As with the farmers, the drought has had a particular effect on Bedouin communities in the semi-desert Badia area, covering more than 55 per cent of Syria. Although many have settled in villages and towns, there are still groups that are nomadic, living in handmade tents and following grazing and water to keep their sheep, which are the main livelihood.

For more information on the tree planting, please refer to *Operations update no. 2* <http://www.ifrc.org/docs/appeals/09/MDRSY001eu2.pdf> and to the special case study available at http://www.climatecentre.org/downloads/File/CCA/Syrian_RC_CCA_2010_CS_EN.pdf

Livelihood: In the village Tel Jazeera, west of Hassakeh, SARC provided 24 families with 20 chickens each as an income generating and livelihood support to cope with the effects of the drought. Although this village is not located in the areas suffering the most, lack of rain had prevented the families from proper harvesting for several years. The proposal from the families to be supported with chickens, to have egg for their own nutrition and for sale to add to the family income, was well received by SARC. In addition to providing the chickens, SARC volunteers supported the population with building materials to keep the chickens within a fenced area. During visits to the village, SARC DRR volunteers discovered that a large electric generator stood unprotected and could be a possible danger to children. Support to build a fence around the generator was therefore included in the activity. Upon request by the villagers, the volunteers provided as well first aid

training to 15 members of the village. A recent follow up visit was made to the village by IFRC/SARC team. The chickens have started to give eggs although still only for the families' daily consumption

In relation to the community awareness sessions on health and hygiene (see above), SARC volunteers from the health/hygiene promotion task force developed health promotion posters and stickers and household water treatment posters relevant to the region. The International Federation's household water treatment guide was translated to Arabic. There is now a whole set of promotion materials in Arabic on CD and as hard copies that have been shared with IFRC headquarters in Geneva and the MENA zone office to be used by other National Societies as needed. The vulnerability and capacity assessments (VCA) performed prior to every intervention have been further developed to ensure an enhanced focus on consequences of climate change. Household water treatment and safe water storage have been included in the health/hygiene promotion curricula



Logistics

Outcome: The logistics capacity of the Syrian Arab Red Crescent is reinforced)

Outputs (expected results)	Activities planned
The incoming goods are received, recorded and efficiently dispatched to the final distribution points.	<ul style="list-style-type: none"> • Support the establishment of logistics systems in two branches. • Support SARC in establishing and maintaining an adequate resource mobilisation table and relief system. • Distribute relief supplies and control supply movements from point of dispatch to end user. • Coordinate actions with the local authorities

A rapid assessment was carried out to identify needs to enhance logistics support in three of the branches relevant to this Appeal. As a follow up of the recommendations, 30 logistician staff and volunteers from all SARC branches participated in a workshop organized in November. The workshop, that was facilitated by SARC logistics officer and supported by the drought project coordinator, followed IFRC manuals and logistics standards, focusing on purchase procedures, warehouse and fleet management to strengthen a unified approach within the National Society. One of SARC regional warehouses was visited during the training to perform a role play inventory. The workshop will be followed in 2011 with on the job training through visits to the branches by the logistics officer.

SARC has over the last years carried out large distributions following the Lebanese crisis in 2006 and the assistance programme to Iraqi displaced since 2007. The National Society supports several UN agencies in relief programmes to Iraqi displaced and is handling thousands of tons of relief each year. In 2010, SARC provided international humanitarian assistance to Gaza, Haiti and Pakistan.

[<Final financial report below and contact details below; click here to return to the title page>](#)

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 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.

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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MDRSY001 - Syria - Drought

Appeal Launch Date: 26 aug 09

Appeal Timeframe: 03 aug 09 to 31 dec 10

Final Financial Report

Selected Parameters	
Reporting Timeframe	2009/8-2011/3
Budget Timeframe	2009/8-2011/3
Appeal	mdrsy001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Funding

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
A. Budget	1,415,508	1,840,107				3,255,615
B. Opening Balance	0	0				0
Income						
Cash contributions						
<i>American Red Cross</i>	92,585					92,585
<i>British Red Cross</i>		38,992				38,992
<i>Canadian Red Cross (from Canadian Government)</i>	49,525					49,525
<i>Danish Red Cross (from Danish Government)</i>	66,187					66,187
<i>Finnish Red Cross</i>		35,121				35,121
<i>Finnish Red Cross (from Finnish Government)</i>		4,693				4,693
<i>Iranian Red Crescent</i>	51,500					51,500
<i>Italian Government Bilateral Emergency Fund</i>	75,540	75,540				151,080
<i>Japanese Red Cross</i>	107,400					107,400
<i>Libyan Red Crescent</i>		2,940				2,940
<i>Monaco Red Cross</i>	30,221					30,221
<i>Netherlands Red Cross (from Netherlands Red Cross Silent Emergency Fund)</i>	75,882					75,882
<i>Spanish Red Cross</i>		1,452				1,452
<i>Swedish Red Cross (from Swedish Government)</i>	321,733	121,733				443,466
<i>Unidentified donor</i>	-0					-0
<i>United Arab Emirates Red Crescent</i>		19,820				19,820
C1. Cash contributions	870,572	300,290				1,170,862
Inkind Goods & Transport						
<i>Finnish Red Cross</i>		394,084				394,084
<i>Spanish Red Cross</i>		22,894				22,894
C4. Inkind Goods & Transport		416,977				416,977
Other Income						
<i>Voluntary Income</i>		300				300
C6. Other Income		300				300
C. Total Income = SUM(C1..C6)	870,572	717,567				1,588,139
D. Total Funding = B + C	870,572	717,567				1,588,139
Appeal Coverage	62%	39%				49%

II. Movement of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
B. Opening Balance	0	0				0
C. Income	870,572	717,567				1,588,139
E. Expenditure	-870,572	-717,567				-1,588,139
F. Closing Balance = (B + C + E)	0	0				0

International Federation of Red Cross and Red Crescent Societies

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III. Consolidated Expenditure vs. Budget

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A							B	A - B
BUDGET (C)		1,415,508	1,840,107				3,255,615	
Supplies								
Clothing & textiles			17,560				17,560	-17,560
Food	1,205,721	781,583	103				781,686	424,035
Seeds,Plants			2,320				2,320	-2,320
Water & Sanitation	917,195		157,641				157,641	759,554
Medical & First Aid	70,000		32,355				32,355	37,645
Teaching Materials	4,000							4,000
Utensils & Tools	10,000		9,212				9,212	788
Other Supplies & Services	380,000		270,206				270,206	109,794
Total Supplies	2,586,916	781,583	489,398				1,270,980	1,315,935
Land, vehicles & equipment								
Computers & Telecom	11,000		1,236				1,236	9,764
Office/Household Furniture & Equipm.	8,500							8,500
Total Land, vehicles & equipment	19,500		1,236				1,236	18,264
Transport & Storage								
Storage	16,000	2,414	9,228				11,642	4,358
Distribution & Monitoring	65,000	23,206	24,275				47,481	17,519
Transport & Vehicle Costs	56,000	781	2,399				3,180	52,820
Total Transport & Storage	137,000	26,401	35,902				62,303	74,697
Personnel								
National Staff	8,000	100	6,714				6,814	1,186
National Society Staff	92,000	2,134	18,072				20,205	71,795
Consultants	5,000							5,000
Total Personnel	105,000	2,234	24,786				27,019	77,981
Workshops & Training								
Workshops & Training	115,000		66,153				66,153	48,847
Total Workshops & Training	115,000		66,153				66,153	48,847
General Expenditure								
Travel	15,000	600	2,270				2,869	12,131
Information & Public Relation	29,500	526	35,715				36,241	-6,741
Office Costs	12,000	795	577				1,372	10,628
Communications	12,000	142	1,887				2,030	9,970
Financial Charges	20,000	705	14,680				15,386	4,615
Other General Expenses	5,000							5,000
Total General Expenditure	93,500	2,768	55,129				57,898	35,602
Programme & Service Support								
Programme & Service Support	198,699	57,586	43,769				101,355	97,344
Total Programme & Service Support	198,699	57,586	43,769				101,355	97,344
Services								
Services & Recoveries			1,195				1,195	-1,195
Total Services			1,195				1,195	-1,195
TOTAL EXPENDITURE (D)	3,255,615	870,572	717,567				1,588,139	1,667,476
VARIANCE (C - D)		544,936	1,122,540				1,667,476	