The International Community for the Relief of Starvation and Suffering

ICROSS

Annual Report 2004
Introduction

In 2004 our work continued to expand. We live in a troubled time with global terrorism, unprecedented natural disasters and increases in absolute poverty. It is a time of World-wide changes and reductions in resources. However, we are fortunate to enter 2005 with more people and institutions wanting to reach out and help.

In 2004 our work has found new friends and partners. We are facing huge challenges in 2005 and it is encouraging to know that we face them stronger and more equipped. Thank you ever so much to all of you who made the achievements of 2004 possible. In 2005 we are positive to increase our efforts and achieve even more and greater results. Once again, thank you for working with us and making a difference in peoples lives. Hope is in the choices we make.

Achievements in brief – a summary

In 2004 we found new friends and partners, making it possible for us to expand our work to five districts in Kenya and two in Tanzania.

Our HIV/AIDS programme saw 662 people being trained to teach trainers on community health and HIV management and 855 community health volunteers to care for terminally ill patients. We have 45,422 orphans in our programme areas, of which 6,420 received direct aid from ICROSS.

Three new clinics were handed over to Maasai communities in our community based health care programme. Our catchment areas saw a 42% reduction in infant deaths, 64% reduction in infant skin infections and had 11,485 malaria patients treated in our facilities. 14,260 nomads were reached in trachoma prevention, resulting in a 42% reduction in trachoma cases.

ICROSS’ Children’s rights programme helped 8 schools with educational materials and assisted 200 students with school fees and uniforms. 72% of the children in our catchment areas were immunized and we reached 17,240 children in our child survival and growth monitoring programme.

Through our poverty reduction, ICROSS distributed over 1,200 goats, 14 donkeys, 7 cows and 3 camels. We provided direct financial support to 16 self-help groups. Supplied 220 destitute families with water containers and planted 4,200 acacia shrubs in Kajiado and Samburu.

In terms of community strengthening, ICROSS provided 14 women’s groups with small grants and legal support. Over 1,000 children received financial assistance to cover medicines, parental funeral costs, basic foods and needs. In addition, we have fenced 12 water sources and started hygiene programmes in 14 schools. 4,980 children got enrolled in our child-to-child health promotion activities.
Poverty in Africa – our work in context

- Kenyan life expectancy 44, Ireland 77
- 31% of under fives suffer from severe / moderate stunting in ICROSS projects
- 63% of pastoral Maasai have no access to safe water
- Kenya GNP per capita $390, Ireland $26,960
- 23% of Kenyans live below $1 a day
- 97% of ICROSS beneficiaries live below $1 a day
- 46% live below $3 a week
- 852 million people are hungry in the poor world and the numbers are raising.
- There are 1.2 million people world wide living below absolute poverty
- There are 5 phones for 100 people in Kenya 127 per 100 people in Ireland

About us – our way forward

“Our aim is to reduce disease, suffering and poverty among the most disadvantaged and marginalised communities through development projects designed and implemented by the people themselves. We work through the people’s languages, their belief and value systems. Using evidence based-planning methodologies we aim to increase community self-reliance, reduce disease and create sustainable responses to poverty.” ICROSS Mission Statement

ICROSS acts as a catalyst; all our projects are run and owned by the communities we serve. We work to improve health and living standards using their languages and belief systems.

ICROSS has operated in rural areas of East Africa since 1980 using anthropological and medical research in all our work; informing existing programmes and identifying areas for future programmes.

We work closely with governments.

ICROSS programmes are growing in a strategic direction guided by ongoing learning and proof of what works.

We are working within a strategic 5-year plan, which is available on our website www.icross-international.net

Our work has expanded to five districts in Kenya and two in Tanzania.

In the rural communities of which we work the majority of people live on less than a US dollar a day and have some of the highest infant mortality rates in the world.
We have strong relationships with local communities lasting decades. These relationships have allowed us to develop innovative and cost-effective solutions to poverty and disease.

ICROSS works on a daily basis with both central and district Ministry of Health. All our programmes are linked to regional health and strategic plans.

**ICROSS Programme Areas**

Keys:
- ★ ICROSS offices
- ○ Regional Programmes
- ○ Other ICROSS Projects
About us – Alliances

Our network of NGO partners comprise of local and international organisations.

ICROSS frequently links with other NGOs to ensure that our programmes are targeted and efficient.

Our international role includes public health consultations, disease management and the assessment of the impact of multi- and bilateral development programmes. These have included EU funded women’s health programmes in the Philippines and waterborne diseases after the Tsunami disaster.

We work very closely with international research organisations and universities in all our research and academic studies.

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<th>NGOs</th>
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<td>• Institute of Child health</td>
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About us - Advocacy

ICROSS participated at the World Aids Conference in Bangkok 2004, as well as on three other scientific conferences, with presentations on care, prevention and orphans.

ICROSS has lobbied for further funding and changes in international policy working with international children's alliances and the Inter Agency Coalition on Aids and Development (ICAD). We actively campaign for more equal partnerships and development, more equitable planning of international policy and a paradigm shift of North-South relations.

Additionally, ICROSS has contributed to over 20 TV- and radio programmes in 2004 alone and have a developing programme on advocacy in Ireland, UK and North America running.

ICROSS Core Programmes

A: HIV/AIDS, TB, and Malaria
- Home Based Care
- Orphans and Vulnerable Children
- Voluntary Counselling and Testing
- Malaria Control
- Women’s health/child survival
- Infectious diseases
- Safe Motherhood
- Sanitation and Hygiene
- Education
- Immunization
- Child Mortality Control
- Training Health Workers in Desert Areas
- Women empowerment projects
- Diarrhoeal Control
- Tribal Community Health Programmes
- Disease Surveillance
- Legal and Material Support
- Water and Sanitation Projects
- Partnership Development and Networking
A. HIV / AIDS - Overview

There are 1.2 million people living with HIV/AIDS (PLWHA) in Kenya.

ICROSS has currently over 20,000 AIDS patients in our care and support programs.

662 individuals from various tribes and clans have been trained to teach trainers on community health and on HIV management. In addition, 855 community health volunteers/workers were trained in 2004 to care for terminally patients.

ICROSS is fighting AIDS through caring for the sick in their homes.

Home based care programmes are successfully running in the districts of Bondo and Siaya and Nakuru.

45,422 orphans in both programme areas.

Reaching another 5,000 people living with AIDS and their families through Global Fund to strengthening and improving care and support for people living with AIDS and those living with them.

ICROSS fights against discrimination and the fear of AIDS by working with young people, commercial sex workers and faith based groups in over 200 villages.
There are 1.2 million orphaned children in Kenya, many due to AIDS.

ICROSS works at strengthening the fabric of family and community by creating new alternatives. We break the cycle of poverty and improve the quality of life through education and training. We realise that people need practical help, not just advice and training.

In 2004, 6,420 orphaned children were given direct aid from ICROSS: clothes; support; school books/uniforms; payment of school fees and nutritional supplements. We
are designing new strategies and explaining the complex needs of over 45,000 of these children.

Together with Andrew Tomkins and Geoff Foster we are writing a book to help communities cope with the orphan crisis in Africa.

All home based care patients have gone through voluntary counseling and testing of HIV (VCT).

**In 2004 ICROSS took the initiative to design and build two VCT centers.** JICA has kindly agreed to fund the VCT centre in Kisii in conjunction with the Ministry of Health. Construction is soon to take place. ICROSS hopes to find a donor for its second proposal in 2005 for a VCT center in Ngong.

**B. Community Based Health Care**

We have focused on: child survival; sanitation & hygiene; women’s health; water and water-borne diseases; breast feeding; immunization and communicable disease.

We work in communities that suffer from among the highest morbidity and mortality rates in Africa.

Life time risk of maternal death in Kenya =19, Ireland=8,300.

Maternal mortality ratio=590, Ireland=5

Under 5 yrs mortality rate in ICROSS nomad projects is 173 (Kenya = 123, Ireland=6)

Infant mortality rate in ICROSS nomad projects=132 (Kenya=79, Ireland=6)

All five long-term primary health care programmes continued into their 25th year with new Ministry of Health personnel in three districts.

**Three new clinics were handed over to Maasai communities and six new village health committees were established in 2004.** All our Maasai clinics now have Maasai nurses.

After a successful attachment summer 2004, Dr Marc Franckh MD will join ICROSS medical teams at the end of 2005 in charge clinical programmes.
Women’s Health and Child survival

In 2004, our epidemiological surveillance showed…

- 29% reduction in severe malnutrition in children <5 years
- 84 referrals of babies in remote homes
- 64% reduction in infant skin infections
- 42% reduction in infant deaths
- 8,460 safe births in remote pastoralist homes
- 250 traditional birth attendants being trained leaving us with a total of 948 active traditional birth attendants.
- 23% reduction in below weight babies
- 42% reduction in anemic mothers
- 72% of pregnant women being injected for tetanus

Malaria Control

In 2004, 11,485 malaria patients were treated in ICROSS facilities.

Malaria prevention campaigns reached 140 villages, including activities such as the provision of bed nets, slashing and burning compounds around schools, clinics, dispensaries and markets.
Due to our success and experience, a large-scale malaria prevention programme is being designed in collaboration with the Ministry of Health in Samburu, Bondo, Kajiado and Siaya.

**Trachoma**

Through Community Health Volunteers, **14,260 nomads were reached in trachoma blindness prevention and control.**

We have seen a 42% reduction in incidence of trachoma in the nomad project areas.

We have seen a 28% reduction in re-infections of trachoma.

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**C. Children’s Rights Programmes**

Children are the most vulnerable in any society. The Children we work with are often hungry, malnourished and sick.

Most diseases that kill children strike when children are undernourished. In three areas where we work, we found **43% of children being below weight**, while 11% were severely malnourished.

We work towards protecting orphans and vulnerable children in practical and real ways improving the quality of life and opportunities for the future, including land protection for orphaned children and the establishment of Children’s committees.
We work in some of the most remote areas of Africa. We are improving children's health, sanitation and hygiene.

ICROSS works at reducing malnutrition, preventing diarrhoea, improving nutrition and access to basic health care.
Most of our team are mothers and grandmothers from the local communities.

In 2004 we saw an increase in child health programmes in Bondo, Siaya, and Nakuru.

**ICROSS helped eight schools providing educational materials and payment of school fees and uniforms for over 200 of the most deprived students.**

2004 was the 14th year of our successful child-to-child health promotion program, where children learn from each other.

ICROSS has introduced HIV/AIDS prevention lessons in five community schools in Nakuru. In addition, class activities on stigma and discrimination have been introduced.

**ICROSS trained 30 teachers in stigma and discrimination** for orphans and vulnerable children.

72% of children in the ICROSS nomadic catchments were immunised.

Our immunisation program includes:
Tuberculosis
Tetanus
Polio
Diphtheria
Whooping cough

Our catchment areas have 21% of children with low birth weight, compared to the national average of 11%.

We reach 17,240 children in our child survival and growth monitoring programmes.

We are reducing child mortality improving mothers health with published results in 14 studies since 1998

**D. Poverty Reduction**

ICROSS’ poverty reduction strategy focuses on women, childhood diseases, pastoral groups and endangered tribes.

Our core activities include: Improving the quality of life; improving water resources; training, education, and skills transfer; community ownership of programs; community determination of development policy; legal and technical advice and support; education of legal and land rights.

We create replicable models of effective change. We are in areas of extreme poverty and develop long-term, culturally acceptable systems that demonstrate measurable improvements in the lives of the poor.
In 2004 ICROSS…

- Launched a disabled children’s support programme, which included the distribution of 400 wheelchairs to physically disabled patients in 6 districts.
- Provided direct financial support to 16 self-help groups.
- Set up small scale income generation projects in slum areas of Nairobi.
- Donated a Posho mill – maize meal grinding plant for a women’s group.
- Distributed veterinary medicine to 3 Samburu areas.
- Assisted 485 pastoral nomadic families through direct aid
- 221 old people without means of support or family
- Planted 4,200 acacia shrubs in Kajiado and Samburu
The International Community for the Relief Of Starvation and Suffering

- Distributed over 1,200 goats, 14 donkeys, 7 cows, 3 camels
- Supplied 220 water containers to destitute families
- Provided micro finance to people living with HIV and AIDS in four regions of Nakuru district.

Case Study - Oramatit

There was a very wasted boy in the bush yesterday. He is 9 and is severely malnourished. His skin is gray and dull and he is just bones, weak. Oramitat is a nomad one of thousands in the present drought belt that’s moving in an arc across east Africa below the Sahara.

But when he looked up at me from the dust he raised his eyes. He has the eyes of a king. He broke into a smile so full of delight and pleasure. Slowly, shakily he stood up and we looked after his medical needs, he had brought his little sister who has malaria, she is 6. Oramitat, despite being unwell laughed and smiled and answered warmly and gracefully, and he was more interested in his sister eating than anything else.

It is the time of I-pods and parties, holidays and holiday blockbusters back home and the sales are about to start. And I look into the eyes of this child... in his quiet dignity. Here wasted, hungry, thirsty, ill, bent but unbroken, dignified. He is so happy simply to have his hunger eased a little. I asked one of the old grandmothers the meaning of his name, it is an old archaic word unfamiliar to me. It means: "I am amazed"

E. community strengthening

ICROSS works to increase local capability through:

- Strengthening existing women’s groups
- Creating community based organizations
- Creating and educating local faith-based organizations
- Strengthening resources of Ministry of Health facilities
- Training within small local initiatives
- Training within formal and informal groups

Disease surveillance
ICROSS supported and strengthened Ministry of Health activities in Bondo, Nakuru, Kajiado, Samburu and Bureti districts.

We trained **1,155 community health workers who will assist in home based care.**

Disease surveillance programs include Malaria, Diarrhoea, Trachoma and intestinal worms.

We support **123 active village health committees across six districts.**

We have created rapid response to increases in malnutrition in our Child Survival Programmes among the Maasai.

![Image: Training health workers in one of our new health programmes in Maasai land.]

**E. Legal and Material Support**

In 2004, ICROSS provided **14 women’s groups with small grants.**

We have provided legal support to women’s group and community organisations in two districts.

We assisted **over 200 orphans with legal help.**

Over a **1,000 children received help to cover expenses incl. medicines, nutrition, basic needs and parental funeral costs.**
E. Water and Sanitation Projects

- ICROSS implemented child to child health promotion activities to 4,980 children.
- We started water protection activities in five districts.
- We fenced 12 water sources.
- We started hygiene programmes in 14 schools.
- ICROSS built over 40 community toilets in 2004.

E. Partnership and Networking

We work with over 300 groups in active partnerships.

We have networked women’s groups to achieve higher deliverables.
Research

ICROSS measures and evaluates everything it does to learn what works. Medical and Anthropological research is central to all our programmes.

We have studies which have taken over 20 years to complete: www.childsurvival.com/features/bookmarks/NeonatalTetanus.cfm

All our studies are published internationally in publications like: ‘Lancet’, ‘Reproductive Health Matters’ and ‘JAMA’.

ICROSS continues to explore new and effective ways of achieving long term results in reducing the burden of disease and improving the quality of people’s lives. Three new studies will begin in January 2005.

ICROSS’ extended research programmes cover the following:

Medical Anthropology: examines medical knowledge and traditions in tribal culture and the acceptability of introducing Western techniques

Public Health: assesses the prevalence of various diseases and developing interventions and treatments.

HIV/AIDS: focuses on the psychological and psycho-social impact

Current studies include:

- Solar disinfection during cholera outbreaks.
- Solar disinfection on diarrhoea.
- Home base care interventions for AIDS patients.
- Psychological needs during home based care.
- Material needs of AIDS orphans and vulnerable children.
• Impact of fly traps on trachoma.

• Risks facing commercial sex workers.

• Practices and beliefs of men who have sex with men.

• Nutrition comparisons in rural and urban Kenya.

For more on ICROSS research please contact us directly on icross@kenyaweb.com or ‘Google’ utilising search words:

ICROSS, Michael Elmore-MeeGAN, Ronan Conroy and/or a disease.

Some of the more useful web-links include:

www.aidlink.ie/case_study02.htm


www.synergyaids.com/caba/documents/Comparison%20study%20of%20children%20 orphaned%20by%20AIDS.doc

www.faith4life.com/ALLWILLBEWELL.htm

www.ajf.gr.jp/hiv_aids/treatment_access/kenya_uganda04.htm

www.ich.ucl.ac.uk/ich/html/academicunits/cich/pdfs/Mikefestschrift.doc

www.jca.apc.org/wsf_support/messages/2514.html

www.hrw.org/reports/2001/kenya/kenya0701-07.htm


www.childsurvival.com/features/bookmarks/NeonatalTetanus.cfm

www.scielosp.org/pdf/bwho/v78n10/78n10a18.pdf

www.adc.bmjjourNals.com/cgi/content/full/81/4/337

www.afronets.org/archive/200011/msg00046.php
ICROSS continues to operate with a small professional staff, and a large network of volunteers, the vast majority of whom are from the communities we work with.

In 2004, ICROSS opened three new offices: a resource centre in the provincial health headquarters of the Ministry of Health in Nakuru; a new finance office in Nairobi and a primary health unit in Sinkiraine.

We have invested in building the management capacity of ICROSS in 2004 acquiring new staff, training existing teams and streamlining reporting and technical systems.

Dr Joe Barnes Clinic started functioning in 2004, but will officially be opened in March 2005
2005 Developments

As we expand to meet new challenges and growing programmes in 2005 we are developing new fundraising strategies in Ireland, UK and North America.

ICROSS web sites will be linked and updated monthly starting in January 2005.

All web sites will have capacity for online donations by April 2005.

ICROSS gift catalogue will be developed enabling donors to choose what they would like to support from a range of items and projects ranging from goats and trees to clinics and schools.

In 2005 “All will be well” will be published in France, Ireland, North America and Australia. You can order this book through ‘Waterstones’ or ‘Amazon.com’. Three other books will be ready by Autumn 2005.

A full-time fundraiser will be in place in Dublin by March 2005. The ICROSS IT department will network the 5 Kenyan and 2 Tanzanian offices in 2005 to streamline feedback and reporting.

ICORSS UK, Ireland, Canada and USA will all have visits by Directors in July 2005. Canadian and Irish TV documentaries will both be aired in March 2005 which creates a platform for further fundraising and support to projects.

ICROSS – who is who?

International Director, Dr Michael Elmore-Meecan
Director of Research, Dr Evan Sequeira
Monitoring and Evaluation, Reuben Rotich
Chairman Board of Directors, Muya Ng’ang’a
Government Liaison, Agala Otieno
Country Manager, Bangi Ochenge
IT & Project Co-ordinator, Janet Lasoi
Women’s Programmes, Bare Ali Sheikh
Turkana Liaison, Lantano Nabala
Samburu Field Officer, Elle Kihara
Volunteer Co-ordinator, Nemama Senamwala
Chief Traditional Birth Attendant, June Omollo
Project Officer Nakuru, Ngwiri Ndwaru
Project Officer Bondo/AIDS support line, Sentero Lasoi
Project Officer Kajiado, Johnson Maseker
Chief Community Health Workers Trainer, Programme Development ICROSS UK, Morten Skovdral
ICROSS – Contact Details

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ICROSS USA
Dr T. O’Riordan or Erik Rodriguez
toriordan@notes.cc.sunysb.edu or erikrodriguez@ureach.com
www.icross-international.net
How you can help?

We need your help and we need it now…

Our programmes are expanding to meet growing needs across vast areas, the numbers alone are challenging.

You can help by getting involved through fundraising, sponsoring a project or area. Helping with awareness or lobbying.

Creating an ICROSS group in your area.

Buying a copy of *all will be well* – [www.icross.ie](http://www.icross.ie) (all proceeds go to the AIDS orphans project).

From March 2005 you can donate online through our web sites

[www.icross-international.net](http://www.icross-international.net)
[www.icross.ie](http://www.icross.ie)
[www.icross.ca](http://www.icross.ca)

And the ICROSS UK web site which will launch in February 2005

What can I do with €10?

40 cents can provide foot wear for a mother walking long distance in the desert looking for water.

80 cents can provide a mother with a water-container to carry clean water

€1 can treat a child’s trachoma/eye infection preventing blindness. Trachoma is one of the leading causes of blindness.

€1 will buy 7 plastic bottles that can be used to sterilize contaminated drinking water.

€1.30 buys a treated bed net to prevent children being bitten by mosquitoes.
€1.50 can rehydrate a dehydrated child by supplying oral dehydration therapy treatment. Dehydration kills over 2 million children a year worldwide.

€1.75 can treat a mother suffering from anaemia.

€4 will vaccinate one child against the 6 killer diseases.

€5 can provide essential drugs to treat malaria which kills 4 million Africans a year.

€5 a month helps us educate a child orphaned by AIDS.

€6 allows us to identify patients and supply them with donated wheelchairs.

€9 provides a school classroom with a blackboard.

€10 can provide a home care kit to help patients with basic needs each month.

What can I do with a little bit more?

€12 can provide traditional birth attendants with safe kits to deliver babies and prevent infection.

€12 will train a local midwife to deliver babies safely.

€12 will provide bedding for a terminally ill patient dying at home.

€15 can provide a milking goat to give patients and their families important nutrients.

€16 will train a local village health worker who can treat basic diseases in the village.

€22 will rehabilitate a seriously malnourished child.

€38 will provide a health worker with a bicycle to visit sick children and mothers in remote villages.

€40 can provide a poor family with a milking cow for income.

€60 can provide a basic water filter for a family.

€70 will provide school desks for 30 children.

€80 will provide a primary school with a safe spray machine to treat
mosquito infected areas keeping children safe from malaria.

€80 can provide a nurse to serve 3000 community members.

€95 will provide school text books for 35 children for a year.

€150 will provide water troughs for wild and domestic animals and a safe supply of water for people.

€180 will protect a community water hole from wild animals.

€200 provide a school with a water tank to store water from the school roof.

What would a small project cost and what could it achieve?

€1200 will build a primary school classroom in a rural area.

€1,800 will provide a motor bike to visit 420 patients a week.

€2100 will establish an income generating project for a women’s group.

€2400 will run a dispensary for a year.

€3200 will setup a child to child promotion programme preventing killer diseases.

€4800 will train 11,000 people in HIV/AIDS prevention.

€5000 can prevent Diarrhoea for over 6000 nomads and treat all water borne diseases.

€5000 can implement a child survival program in a remote area reaching 11000 people.

What else can be done and what does it cost?

€6500 can provide nutritional care and support to 800 malnourished mothers and 2200 children.

€7000 can establish a reproductive health/women health project reaching 12,000 women.

€7050 can establish a breast feeding project for 6000 mothers.

€8,000 will provide a community with a dispensary to serve a community of 2,400 people.
€10,000 can run a disease control and prevention programme in a district reaching 21000 people and reducing rates of malaria, cholera, malnutrition and blindness.

€11,200 will provide a direct response to 3800 vulnerable children living in HIV homes.

€26,000 will establish community support groups to help over a thousand patients with AIDS.

**Closing remarks**

Our HIV, orphan, nomad and disease control projects need urgent support. We have great teams, dedicated volunteers, low-cost dynamic projects and we look forward to 2005 with optimism and excitement.

We look forward to creating new opportunities and new solutions to old problems – together we will make a difference.

*If you remember only one thing – remember that you can change the world!*
ICROSS – Income 2004

Donations in kind 55.04%

ICROSS Ireland 21.37%

Irish Government 5.63%

Community Reach - Pact 10.75%

Global Fund 4.04%

Elizabeth Taylor-AIDS Foundation 1.62%

Aidlink 1.44%

Interest Income 0.03%

ICROSS – Expenditure 2004

HIV/AIDS, TB AND Malaria 24%

Community Based Primary Health Care 33%

Children's Rights 1%

Poverty Reduction 15%

Community Strengthening 10%

Management/Operations, Field support/medical research 17%
## Income and expenditure 2004 breakdown

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</table>

**Donations in kind (non monetary)**

<table>
<thead>
<tr>
<th>EUR estimated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Surplines</td>
</tr>
<tr>
<td>Human Resources</td>
</tr>
<tr>
<td><strong>Total Income</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>EXPENDITURE</th>
<th>EUR</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV/AIDS,TB AND Malaria Programme</td>
<td>€68,460.00</td>
</tr>
<tr>
<td>Community Based Primary Health Care Programme</td>
<td>€88,913.00</td>
</tr>
<tr>
<td>Children's Rights Programme</td>
<td>€2,350.00</td>
</tr>
<tr>
<td>Poverty Reduction</td>
<td>€43,300.00</td>
</tr>
<tr>
<td>Community Strengthening</td>
<td>€29,109.00</td>
</tr>
<tr>
<td>Administration/Operation &amp; Field Support.</td>
<td>€48,100.00</td>
</tr>
<tr>
<td><strong>Total expenditure</strong></td>
<td><strong>€280,232.00</strong></td>
</tr>
</tbody>
</table>