

Appeal 2003-2004



International Federation
of Red Cross and Red Crescent Societies

WEST AFRICA REGION

Appeal no. 01.45/2003

Click on programme title or figures to go to the text or budget

	2003 (In CHF)	2004 ² (In CHF)
1. Health and Care	90,421	80,000
2. Disaster Management	225,198	200,000
3. Federation Coordination	163,893	160,000
4. International Representation	14,973	15,000
Total	494,484¹	455,000

Introduction

World leaders agreed at the United Nations Millennium Summit they would devote special efforts to support sub-Saharan Africa. But the terrorist attacks in September 2001 changed that focus. Africa's problems do not at present head the list of development priorities. Humanitarian problems in West and Central Africa continue to grow - 15 countries in the lowest-ranked 26 countries of the UN Human Development Report are in the region. Increasingly, indicators point to the paucity of health care within the region - sustained by a marked lack of public expenditure on health in most countries in the region.

West and Central Africa lags behind the dramatic improvements in health achieved by other developing countries over the past 40 years. For example, whereas other developing regions achieved over 50% declines in infant mortality between 1960-1990, in this region infant mortality remains an average of 11 deaths per 1,000 births.

But despite high infant mortality, the population in the region is growing at almost 3% a year and likely will double over the next 25 years. Demographic pressures are closely linked to increasing migration, which spans from West to Central Africa. Thirty million people likely will migrate from the interior to the coastal areas between 1990 and 2020. Immigrants make up 33% of the population of Côte d'Ivoire, contributing one percent to the almost 4% growth rate of the country. Côte d'Ivoire - the most important pole of regional economic development after Nigeria - has become the epicentre for the spread of HIV/AIDS throughout the region. The prevalence of HIV is estimated at 10% among the general population, and the combination of seasonal and permanent regional migration for work of young men and women contribute to spread of HIV and other sexually transmitted infections.

¹ USD 339,291 or EUR 336,198.

² These are preliminary budget figures for 2004, and are subject to revision.

The increase of HIV/AIDS (soon to replace malaria as the leading killer in West and Central Africa), frequent epidemics, small- to mid-range disasters reoccurring almost annually and the expanding gap between rich and poor require a sharply evolving response from the Red Cross and Red Crescent Societies of the region in order to avoid irrelevance. This speaks clearly to strengthening volunteer networks and building capacity in the longer-term in order to scale up both the impact and volume of interventions.

The UNAIDS' Report on the Global HIV/AIDS Epidemic 2002

“... In west and central Africa, there is evidence of recent, rapid HIV spread. Senegal appears to still be reaping the rewards of its early and concerted AIDS response while, in Mali, HIV prevalence was measured at 1.7% in a community-based survey in 2001. Although national adult HIV prevalence rates passed the 5% mark long ago in countries such as Burkina Faso, Cameroon, Côte d'Ivoire, Nigeria and Togo, the rates have stayed relatively stable over the past five-to-eight years. The danger was always that this would be mistaken for an enduring trend.

Recent data from Cameroon are confirming the folly of such assumptions. HIV prevalence in Cameroon's urban areas already stood at almost 2% in 1988. Over the following eight years, urban prevalence varied, rising as high as 4.7% in 1996. However, the 2000 round of HIV surveillance found national prevalence rates of around 11% among pregnant women. That this might be the beginning of an ongoing steep rise is indicated by the fact that the highest prevalence rates were found among young people - 11.5% among 15- to 19-year-old pregnant women and 12.2% among those aged 20-24. Also of concern is the fact that prevalence rates were almost equally high in rural and urban areas.

These data sound a loud warning to other countries in the region, and raise strong concerns about the course of the epidemic in, for example, Nigeria, the most populous country in sub-Saharan Africa. Until recently, Nigeria's national prevalence rates remained relatively low (as was the case for neighbouring Cameroon), although growing slowly from 1.9% in 1993 to 5.8% in 2001. But some states in Nigeria are already experiencing HIV prevalence rates as high as those now found in Cameroon. Already, more than 3 million Nigerians are estimated to be living with HIV/AIDS.”

In response to these challenges, the Federation Secretariat's regional strategy, based on the Secretariat Priorities for 2002-3, is to support West and Central Africa National Societies in the following crosscutting activities:

- leadership development and volunteer management.
- regional capacity in responding to rapid and slower onset disasters.
- community based preparedness focussing on food security.
- sharply increasing HIV/AIDS interventions.
- national society recognition and partnership.
- cooperation agreement strategies based on national societies' priorities.
- subregional cooperation, pooling expertise amongst national societies.
- replicating success through local pilot projects and development of coaches.

In 2003, it is planned to support national societies in West and Central Africa through four regional offices - Dakar, Lagos, Yaoundé and Abidjan (due January 2003) - and three Country Delegations - Guinea Conakry, Sierra Leone and Democratic Republic of Congo (DRC). In Liberia, a Federation Representation presence is planned for 2003 to meet the redeveloping activities of the national society and support its response to increasing vulnerability and uncertainty in Liberia.

Country Delegations, when required by a complex humanitarian crisis and requested by the host national society, will continue as a temporary country presence, shifting in approach from a

parallel to an integrated structure to enable the national society to make decisions and the Federation taking an advisory and facilitative role. A flexible approach is required in terms of adapting the size and scope of the country presence according to local needs. In the Mano River Union countries, Nigeria and the DRC, where the humanitarian situation remains critical, a Secretariat country presence of between two and four further years is currently planned.

Almost all programmes presented in the 2003 Annual Appeal will provide individual national society support, however three regional programmes are presented which will add value by i) regionally coordinating and representing a rapidly expanding range of HIV/AIDS projects at national society level; ii) enabling and coordinating a regional response to rapid and slow onset disasters where their scale exceeds the capacities of individual national societies (Regional Response Team); and iii) providing support to national societies within each region on specific issues such as governance support, youth development and branch development - according to the needs and requests of national societies (Regional Development Officers). The RDOs appear under the Abidjan, Lagos and Sahel regional programmes.

Regional Programmes

1. Health and Care W [<Click here to return to the title page>](#)

Background and achievements/lessons to date

Background:

- Evidence of recent, rapid HIV spread in West Africa.
- Senegal benefiting from its early and concerted AIDS response (model country in West Africa).
- Côte d'Ivoire, Togo, Burkina Faso, and Nigeria with highest prevalence rates in the region, although these rates have stayed relatively stable over the past five-to-eight years.
- Migration/conflict and growth of towns and cities has encouraged the spread to West Africa of a more virulent strain of the virus, HIV-1, which has been prevalent in Southern Africa.
- HIV-2 has been more prevalent in West Africa, but the more virulent strain is set to push it out.
- UNAIDS situation analysis of discrimination and stigmatisation against People Living With HIV/AIDS (PLWHA) in West and Central Africa revealed: widespread cases of systematic violations of fundamental human rights of PLWHA (e.g.. Medical secrecy, employment, health care, accommodation, property); systematic testing widely practised; magnitude of stigmatisation and discrimination against PLWHA constitutes the most important factor hampering the involvement of PLWHA in prevention, care and treatment actions in the area of HIV/AIDS control; HIV aggravates the woman's social status; medical personnel lack information and adequate training in the area of HIV/AIDS; PLWHA are often powerless in the face of discrimination and stigmatisation, because of fear and shame; rejection of AIDS victims by family; rejection, moral judgement, physical and psychological suffering and attack on their dignity sometimes compel PLWHA, including even those who militate in support of associations, to isolate themselves and go into hiding, which seriously hampers the fight against HIV.
- Increasing number of AIDS orphans in the region.
- Increasing number of PLWHA.
- Political commitment - through first ladies, parliamentarians, religious and traditional leaders.
- Cultural factors favouring the spread of HIV/AIDS (e.g., early marriage/sexual relations, female genital mutilation, cultural scarring).
- Taboo subject/denial/limited access to information also favour the spread of HIV/AIDS.

Achievements:

- Established network in the region (Regional AIDS network for youth in West Africa (RANY-WA), 10 NS members from the region).
- Good collaboration with associations of PLWHA in certain countries (Togo, Côte d'Ivoire, Ghana).
- Collaboration with UNAIDS/PSI/MoH and other partners in most countries.
- Experience in Blood Donor recruitment.
- Experience in procurement and distribution of condoms.
- Work with religious and traditional leaders.
- Care and support for PLWHA (Togo).
- Working towards an HIV/AIDS workplace policy at the regional level.
- Campaign against HIV/AIDS related stigmatisation and discrimination launched in certain countries, including a CD production in Côte d'Ivoire through the Regional Delegation.
- Experience in youth peer education and women's groups/mothers clubs (Ghana, Togo, Côte d'Ivoire, The Gambia).
- Peer education manual and other HIV/AIDS educational materials developed in the region.

Lessons learned:

- Need to strengthen capacity of national societies to mobilize resources locally and strengthen partnerships at all levels.
- Need to strengthen capacity in developing, implementing and monitoring projects.
- Need to broaden areas of intervention (sex workers, transporters, women...).
- Need to integrate HIV/AIDS programming into other programmes /activities, while developing a volunteer management system accordingly.

Overall goal

To contribute towards reducing the propagation and transmission of HIV/AIDS and STDs in West Africa.

Programme Objective

To regionally coordinate and represent a rapidly expanding range of HIV/AIDS projects at national society level.

Expected result

1. The capacity of National Societies in the region is strengthened through the regional programme to combat **HIV/AIDS** through HIV/AIDS/STDs prevention activities and provision of care and support for PLWHA, targeting high risk groups (youth, sex workers, migrant workers, industrial workers, and small traders).

- Increased collaboration between National Societies in the region and associations of PLWHA in the respective countries in all HIV/AIDS care and prevention activities.
- Networking/exchange of experiences in HIV/AIDS prevention and care in West Africa reinforced through a redynamised, well functioning regional network, RANY-WA.
- Collaboration agreements signed between the Federation and various partners (UNAIDS, associations of PLWHA), at all levels in the region, facilitating complementation and sustainability of activities through resource mobilisation and knowledge sharing.
- National Societies assisted with developing/implementing an HIV/AIDS workplace policy.

2. Disaster Management W *<Click here to return to the title page>***Background and achievements/lessons to date**

With major natural disasters (flooding and drought) in West Africa and the erratic climatic changes in different parts of the world, it is likely that regions considered as safe zones experience natural disasters, thus increasing the number of unsafe zones with its attending

problems of epidemics and population movement. Economic and political instability as well as industrial hazards could also lead to internal and cross-border population movement.

Meetings held in the region in the past two years (Partnership meeting-Dakar 2001 and Regional Disaster Preparedness Workshop-Abidjan 2002) have provided participants the opportunity of identifying two main areas of concern in disaster management:

- How can we be more efficient in responding to disasters?
- How can we take preventive and development programmes closer to the communities?

Answers to these questions are found mainly in the “Strategy for the International Movement of Red Cross and Red Crescent”, and particularly in one of the subheadings of the strategic objective 2: Improve and co-ordinate the Movement’s response to emergencies.

The Regional Disaster Management programme will encourage intra-regional assistance among the National Societies should the need arise. One multidisciplinary Regional Response Team will be on standby to assist any National Society at their request. The Response Team will work with the Regional Health and Organisational Development programmes as well as the ICRC.

Overall Goal

Improved Red Cross disaster response capacities within the region.

Programme Objective

Improve the National Societies response to emergencies through an intra-regional assistance (Regional Response Team).

Expected Result

1. The **Regional Response Team** will be made up of three persons and are the technical complement to the Central Africa Response Team.

- Selected members of the team have the required competence to carry out emergency activities in the following areas: radio and telecommunication, relief-administration and health.
- Well-functioning back-up equipment (laptop computers with printer, satellite telephones, GPS, medical equipment) will encourage the rapid exchange of information needed for the execution of emergency activities.
- Other partners and organisations involved in emergency operations also benefit from the competence of the team.
- National Societies in need receive considerable assistance from other National Societies in the region.
- The professionalism and efficiency displayed during an emergency has encouraged partners, donors and the government to have a positive impression of the National Societies.
- The government authorities are sensitised on the International Disaster Response Law.
- The entry of the members of the team and their materials into the country is facilitated by the government.
- The National Societies organise a rapid intervention in disaster areas.
- Members of the RRT help build the capacity of the partner National Societies through their competence.
- National Societies have the opportunity to use members of the RRT as resource persons in training their staff and volunteers in view of building their institutional capacity both on national and regional levels.

3. Federation Coordination W [*<Click here to return to the title page>*](#)

Background and achievements/lessons to date

Per Strategy 2010, the International Federation is committed to the development of regional cooperation, pooling expertise amongst National Societies in the region and offering forums for joint problem-solving.

As the Federation Regional Delegation initiated its regionalization plan in 2002, the West African National Societies, supported by the Federation delegation, initiated regional working groups to encourage cooperation, coordination and direction for the National Societies in the region, to ensure regional coherence in Federation action in the region, and to assist the National Societies to access and diffuse useful information.

Just as the Secretariat support was decentralised into three regions, the West Africa National Societies formed themselves into three regional working groups:

Sahel working group: Burkina Faso, Cape Verde, The Gambia, Mali, Mauritania, Niger and Senegal

Abidjan working group: Côte d'Ivoire, Guinea, Guinea-Bissau, Liberia and Sierra Leone,

Lagos working group: Benin, Ghana, Nigeria and Togo

To further ensure national society commitment to Federation action in the region, each regional working group was to assign three representatives to join sectoral working groups - working groups on each of the Secretariat-supported sectors in the regions.

Sectors:	Health	Development	Disaster Management
<i>Sahel working group</i>	ARCHI 2010	Financial Management and Resource Development	Food Security
<i>Abidjan working group</i>	to be determined	Technical Assistance	to be determined
<i>Lagos working group</i>	to be determined	to be determined	to be determined

Per their terms of reference, the regional working groups and sectoral working groups are to meet twice a year and their chairs are to meet once a year. Meetings began to take place in June when funding was confirmed. Though the full complement of meetings may not be able to be achieved this year, it is expected that all working groups will have elected their officers and sectoral representatives, and at least one sectoral working group meeting and regional working group meeting will have taken place before the end of 2002.

The West African National Societies are fully committed to this regionalization process and are keen to see the process continued in 2003 and perfected in 2004. As the Regional Working Groups take full ownership of the process, it is expected that they will reshape the ToR from a generic model created by the Regional Delegation, into a fine-tuned model driven by experience and needs.

In 2003, the Secretariat plans to support two meetings for the members of the three regional working groups (six meetings), which will include the attendance of the heads of the Federation regional offices and any country delegations.

The Secretariat will also support two meetings for the members of the three sectoral working groups (six meetings), which will include the attendance of Federation technical advisors from the regional offices.

Finally, the Secretariat will support one meeting for the three chairs of the regional working groups and the three chairs of the sectoral working groups (one meeting), at which a Federation observer will attend.

In addition to the significant work completed in advancing the Regional Working Groups for West Africa in 2002, this past year also marks the first year that the Regional Delegation has systematically engaged National Societies in developing their CAS processes. In October of 2002, a Regional meeting was held for West and Central Africa with 25 participants from 14 National Societies, including 3 representatives from ICRC. The focus of this workshop was to provide the participants with a theoretical understanding of the importance of CAS as well as the tactical skills required to engage in a successful CAS process. This workshop also provided participants with theory and tools for developing a VCA and Strategic Development Plan which are the precursors to the CAS process.

Overall Goal

Use the combined knowledge experience and resources of the International Federation more efficiently and effectively by serving as a coordinator, linker, facilitator and guide to support National Society development and programmes.

Programme Objective

The West African National Societies will increasingly develop their own local expertise, and share information and resources with each other, in addition to coordinating their plans and work with all important Stakeholders.

Expected Result

1a. **Regional Working Groups** contribute towards a better service provided by the member national societies to vulnerable persons in West Africa

Decentralization through Regional Cooperation

a. The decentralisation will take place through the formation of three Regional Working Groups, consisting of National Society elected representative, which will correspond and interface directly with the three newly established Federation Regional Offices.

Develop Local Expertise

b. Local expertise will be developed through establishing Sectoral Groups specializing in Health, Disaster management and Organisational Development. This expertise will later serve as regional resources for West Africa.

Knowledge Sharing

c. Both Regional Working Groups, and Sectoral Groups will ongoingly share their knowledge and experiences with members of their group. Additionally, in a more formal sense, the sectoral groups will serve as resource centres for the West African Region in their specific area of knowledge.

1b. **Cooperation Agreement Strategy (CAS)**

a. CAS enables the Movement's international cooperation efforts to maximise their collective impact.

b. CAS enables partners to jointly plan and manage an effective flow of resources and will ensure that their use is targeted and coordinated with non-Red Cross and Red Crescent partners.

c. CAS offers a National Society and other donors a clear framework with which to maximise the impact of their assistance without fear of overlap or conflicting interests, as well as ensuring a solid rationale for intervention in the eyes of their donors and constituencies.

d. Cooperation Agreement Strategies will continue being elaborated on by 8 national societies in 2003, the remaining national societies in 2004.

4. International Representation W [<Click here to return to the title page>](#)

Background and achievements/lessons to date

The participation of the offices and delegations of the International Federation in West and Central Africa has been minimal to date resulting in less profiling of the National Societies and their Secretariat's offices and delegations than could be possible. The opportunity to contribute more significantly to the humanitarian debate and to mobilise resources in so doing, needs to be exploited. This will be addressed in the Cooperation Agreement Strategies.

Overall Goal

Service provided to beneficiaries is improved through more effective and efficient humanitarian planning and coordination in West and Central Africa.

Programme Objective

The quantity and quality of International Federation participation in interagency coordination and planning is increased and an advocacy strategy *based on a specific issue* is agreed with the Humanitarian Advocacy Department applicable 2003-4.

Expected Result

1. International Federation participation in **interagency coordination and planning** is increased and a strategy shared with national societies and other partners.

- Identification of advocacy issue and agreement with Humanitarian Advocacy Department, checked against national society needs (CAS), communication line in place, plan of action developed and implemented, results monitored.
- Full participation in all UN CAPs in West and Central Africa in 2003, duplication of planning is minimised and CAS is gradually introduced as the Federation's tool in joint planning.
- Share knowledge to and from IASC and its working groups coordinating with ICRC.
- Gradually involve National Societies in coordination and planning, including CAP, aiming towards increased involvement by end 2003.

5. Field Management W

Background and achievements/lessons to date

The Regional Delegation in Abidjan is now in its tenth year and is undergoing significant developments both in its geographical scope and its area of responsibilities in line with the Change Strategy for the Secretariat.

Overall Goal

The Secretariat is providing efficient and effective service in West and Central Africa.

Programme Objective

The Regional Delegation, regional offices and country delegations in West and Central Africa are:

- Strengthening National Societies to deliver services and advocate on behalf of vulnerable people
- Ensuring effective representation and advocacy
- Building Coordination, cooperation and strategic partnerships

Expected Result

1. Regional offices and country delegations are providing an optimal level of service to national societies in West and Central Africa by managing common Federation resources, representing the Federation, coordinating and communicating with National Societies, supporting National Societies in responding to disasters as they occur and in managing multilateral programmes for which the Secretariat has responsibility.

- a. HoRD providing overall direction and management to regional delegation, offices and country delegations.
 - Head and manage regional delegation
 - Profile the International Federation and national societies regionally
 - please see also International Representation programme
- b. **Administration** and accounting and **financial** management in the Regional Delegation is performed efficiently.
 - Training and implementation of new Standard Operating Procedures
 - Administration of professional and support personnel in the regional delegation
 - Administration of accommodation for international personnel
 - Office management
 - Accurate and timely financial reports are provided by the regional delegation to the RFU and made available to donors.
 - The regional delegation has well-trained and competent staff supporting financial management in the region.
 - Federation financial procedures are understood and followed by all relevant staff based on training.
- c. **Information** activities contributing to enhancing credibility, image and regional persona of the delegations and offices in Central and West Africa.
 - Relations with the media are upheld through formal (invitation to visit Delegation) and informal contact for collaborative efforts such as interviews and field trips to cover stories.
 - Missions are taken in the region with the aim of documenting Red Cross activities via articles, photography, and video and other low cost publications.
 - Under supervision of the Regional Information Officer, a project to combat child exploitation through social mobilisation activities is launched by the Côte d'Ivoire Red Cross.
 - A Regional web site is built and maintained.
 - An English radio programme is created to combat the stigma associated with HIV/AIDS.
 - Active dissemination of the information.
- d. Timely, donor-oriented **reporting** is supporting Regional Delegation, Regional Offices and Country Delegations.
 - Write and edit emergency appeals, operations updates, annual reports for the region as well as donor-specific reports and ensure the reports are available for partners and donors.
 - Undertake missions to the region to see national society activities and coach reporting officers and others (including programme coordinators) involved in reporting.
- e. **Information Technology** (including Telecom) is providing the Regional Delegation, regional offices and country delegations with effective tools to ensure rapid and effective communication.
 - maintaining computer and telecom equipment
 - supporting administration in managing contracts with IT suppliers and fixed assets register for IT equipment
 - ensuring maintenance and development of radio system throughout the region
- f. **Welcome service** is providing efficient service to visitors and staff.
 - air travel schedules maintained regularly and distributed to users
 - visitors provided with accurate information on visas, reception on arrival, transport and accommodation facilities prior to travel
 - maintain and distribute Welcome Kit to all visitors
 - preparation of briefing and debriefing programmes.

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BUDGET 2003

PROGRAMME BUDGETS SUMMARY

Appeal no.: 01.45/2003

Name: Western Africa Regional Programmes

PROGRAMME:	Organisational Development	Health & Care	Disaster Management	Humanitarian Values	Federation Coordination	International Representation	Total
	CHF	CHF	CHF	CHF	CHF	CHF	CHF
Shelter & construction	0	0	0	0	0	0	0
Clothing & textiles	0	0	0	0	0	0	0
Food	0	0	0	0	0	0	0
Seeds & plants	0	0	0	0	0	0	0
Water & Sanitation	0	0	0	0	0	0	0
Medical & first aid	0	0	0	0	0	0	0
Teaching materials	0	0	0	0	0	0	0
Utensils & tools	0	0	0	0	0	0	0
Other relief supplies	0	0	0	0	0	0	0
SUPPLIES	0	0	0	0	0	0	0
Land & Buildings	0	742	186	0	186	0	1,113
Vehicles	0	0	0	0	0	0	0
Computers & telecom	0	4,322	11,750	0	9,750	0	25,822
Medical equipment	0	0	0	0	0	0	0
Other capital exp.	0	2,191	3,000	0	0	0	5,191
CAPITAL EXPENSES	0	7,255	14,936	0	9,936	0	32,126
Warehouse & Distribution	0	0	0	0	0	0	0
Transport & Vehicules	0	4,316	7,130	0	2,030	0	13,475
TRANSPORT & STORAGE	0	4,316	7,130	0	2,030	0	13,475
Programme Support	0	5,877	14,638	0	10,653	973	32,141
PROGRAMME SUPPORT	0	5,877	14,638	0	10,653	973	32,141
Personnel-delegates	0	8,551	68,216	0	8,551	0	85,318
Personnel-national staff	0	42,484	43,747	0	7,079	0	93,309
Consultants	0	3,572	2,500	0	0	0	6,072
PERSONNEL	0	54,607	114,463	0	15,630	0	184,699
W/shops & Training	0	0	15,000	0	119,600	3,000	137,600
WORKSHOPS & TRAINING	0	0	15,000	0	119,600	3,000	137,600
Travel & related expenses	0	0	17,600	0	0	5,000	22,600
Information	0	13,373	6,000	0	0	0	19,372
Other General costs	0	4,993	35,431	0	6,044	6,000	52,468
GENERAL EXPENSES	0	18,366	59,031	0	6,044	11,000	94,441
TOTAL BUDGET:	0	90,421	225,198	0	163,893	14,973	494,484