

# Appeal 2003-2004



International Federation  
of Red Cross and Red Crescent Societies

## NORTH AFRICA REGION

**Appeal no. 01.92/2003**

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

	<b>2003</b>	<b>2004<sup>2</sup></b>
	<i>(In CHF)</i>	<i>(In CHF)</i>
<b>1. Health and Care</b>	<b>264,406</b>	<b>492,219</b>
<b>2. Disaster Management</b>	<b>384,639</b>	<b>615,273</b>
<b>3. Organizational Development</b>	<b>540,157</b>	<b>676,801</b>
<b>4. Humanitarian Values</b>	<b>81,283</b>	<b>104,597</b>
<b>5. Federation Coordination</b>	<b>152,170</b>	<b>246,110</b>
<b>Total</b>	<b>1,422,656<sup>1</sup></b>	<b>2,135,000</b>

### Introduction

The International Federation office for North Africa is based in Tunis and covers five countries: Morocco, Algeria, Tunisia, Libya and Egypt. It currently consists of one expatriate Federation Representative and one administrative local staff. North Africa is one of the three sub-regions of the Middle East and North Africa (MENA) region - the other two being the Middle East and the Gulf. The Tunis office reports to the Regional Delegation (RD) based in Amman, and works closely with the Amman RD in areas of Finance, Health, Disaster Preparedness, Organizational Development and Information.

Two and a half years after being set up the Tunis office has seen its working relations with the National Societies (NS) turn from cautious observance to increased interaction and demands for more and better services. Much of this has resulted from training events and encounters organized by the office and hosted by the NS of this region. These have allowed representatives of these five National Societies to meet and exchange experiences as well as to discover new approaches and capacity building tools developed by the Federation. A consultation meeting of the leaders of North African NS held in Tunis in September 2002, strongly encouraged the Federation to strengthen its office in Tunis so that it can provide the necessary technical expertise to follow-up and support various programme initiatives started in North Africa during the last two years, especially relating to Disaster Management, HIV/AIDS Youth Education and Branch Development.

The five North African countries together occupy an area of more than seven million square kilometres, with a total population of about 143 million, almost half of which live in Egypt (67.9 million), followed by Algeria (30.3 million) and Morocco (29.8 million), Tunisia (9.5 million) and Libya (5.3

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<sup>1</sup> **USD 976,164 or EUR 966,165.**

<sup>2</sup> **These are preliminary budget figures for 2004, and are subject to revision.**

million). The official language is Arabic, but due to their colonial past Morocco, Algeria and Tunisia have French as their second language, whereas Libya and Egypt are more anglophone. Islam is the prevalent religion.

In regards to the socio-economic situation, the countries rank between 0.58 to 0.75 (medium) on the Human Development Index (HDI) of the United Nations Development Programme (UNDP) - (HDI,1998). This index measures overall progress of a country on three dimensions of human development: health, knowledge and standard of living.

A recent study on the Middle East and North Africa region carried out by a group of distinguished Arab scholars (Arab Human Development Report 2002, UNDP together with Arab Fund for Economic and Social Development) concluded that while significant progress has been made in fields such as health, housing and education, there are important “deficits” in three areas: freedom (including good governance), empowerment of women, and knowledge. It talks about a “poverty of capabilities and poverty of opportunities” which undermines human development. This manifests itself in various ways, such as high illiteracy rates (from 33-65 per cent among women of age 15 or older in North Africa), economic disparities, desire to emigrate (especially among young people), declining work productivity and low Internet connectivity. The report calls for investment “in Arab capabilities and knowledge, particularly those of Arab women, in good governance, and in strong cooperation between Arab nations.” Translated into Red Cross/Red Crescent language this reaffirms the importance of capacity building, good governance, gender awareness and regional cooperation.

The effect of the events of 11 September for the region cannot be underestimated. The impact has been both psychological and economic. It has been shocking for many ordinary North Africans to realize how the rest of the world looks at them, and it has had significant consequences for the tourism industries of Egypt, Tunisia and Morocco. The violence in Algeria has not receded. It is estimated that around 800 people, most of them civilians, were killed during the first six months of 2002 in acts of violence related to the confrontation between Islamic fundamentalist groups and the military. The unrest in the Berber region of Algeria, especially in Kabylia, has continued.

North Africa continues to be affected by disasters. Major earthquakes struck Egypt (1992), and Algeria (1994). Earthquakes will continue to be a threat as the North African countries are located on an earthquake fault line. Flooding occurred in Egypt (1994) and Morocco (1995), and more recently severe flooding struck Algeria towards the end of 2001 and middle of 2002. The alteration of droughts and floods seem to be part of a climatic pattern. In the last three years most of North Africa has received very little rain, which has obliged the governments to import food. A considerable section of the population in parts of North Africa is also vulnerable to local health hazards.

## **Regional Strategy**

The region’s relative proximity to Europe and its medium level standard of living contribute to the general lack of interest of major donor governments. This has repercussions on the work of the Federation, which had great difficulty in identifying donors for its programmes in North Africa, and resulted in the NS being left out of the capacity building support of the Federation.

The main UN agencies at present include: UNDP, UNICEF, WHO, and EU. Only a few international NGOs are active in North Africa; except for in Algeria as a result of the 2001 flood relief activity. Some of the countries have a large number of national NGOs, many of recent origin and often closely monitored by their respective governments. Among these, many work in the field of HIV/AIDS, which might be a possible area of cooperation with the RC, as the issue is very sensitive in the Islamic countries, and the Red Crescent societies could use their proximity to the people to pass the message. Also, the WHO has a Disaster Preparedness (DP) programme, with which RC activities could be

linked as well as activities in the field of HIV/AIDS. On a national level, the biggest actor in DP in all of North Africa is the Civil Defence, a governmental body with significant material resources and capacity. However, what the Civil Defence does not have is flexible, well trained volunteers. This would be the value added by the RC Societies, provided they are ready for it. The willingness is there, but the capacity is not in all cases. Discussions are currently underway in several countries to define the complementary role of the Red Crescent in national DP plans, including a closer cooperation with the Civil Defence.

According to the Regional Assistance Strategy (RAS) for North Africa, the Federation's support will focus on capacity building of National Societies, and in particular on Organizational Development (OD) and DP. The latter would be closely linked with health activities, in particular HIV/AIDS prevention. This strategy, drafted in 1999, continues to be relevant for the societies in the region. These two areas not only top the list of priorities expressed by the societies themselves but would also strengthen their capacities to better cooperate with other actors, in particular the health authorities and the Civil Defence. This support would mainly be provided by technical experts from the Tunis office and the Amman RC.

In 2003, the development of CAS (Cooperation Agreement Strategies) will be started with two or three societies. The Tunis office will also work together with them to identify local and regional expertise in order to establish a pool of experts that could be used for training and monitoring programmes in their own and neighbouring societies. All five NS will be part of the regional programmes, but in the individual societies the focus will be as follows:

- The Moroccan Red Crescent (MRC) will be supported in Disaster Management and Organizational Development as well as its social programmes, including literacy classes for women. It could be the first society in North Africa to work on a strategic plan and a CAS.
- In Algeria the role of the Secretariat will be coordination and facilitation. Coordination relates to bilateral initiatives and support, co-ordinating Federation support with that of the ICRC, and ensuring that the use of eventual funds remaining from the flood operation correspond to the wishes of both donors and the priorities of the Algerian Red Crescent (ARC). Facilitation relates to assisting ARC to build capacity in different fields, such as training of *wilaya* (provincial) committee leaders, disaster management, and HIV/AIDS youth programmes. The CAS process will be started.
- The Federation office is located in Tunis, and this has helped in working together with Tunisian Red Crescent (TRC) on various practical issues, such as organizing sub-regional training and meetings. The Tunis office will encourage institutional development in the TRC through branch leaders' training, by initiating strategic planning and eventually a CAS process.
- The Libyan Red Crescent (LRC) will be supported by facilitating exchange and sharing of experiences with other societies in the region and elsewhere. Technical support in areas of OD, DP and health will also be extended to Libya. In addition, the LRC will be encouraged to contribute human and financial resources.
- The Egyptian Red Crescent (ERC) will be assisted through training opportunities and technical support for its Health and Community Development programmes. The ERC holds the Vice Presidency for the Federation in Africa, and it will be supported in this role.

## **National Society Priorities**

Four out of five societies in North Africa have completed the Self-Assessment Questionnaire, initiating a process of evaluation. However, only one society has so far produced a strategic plan, and all societies would benefit from a clear definition of their vision and priorities. The following priorities reflect the current activities and developmental needs in this region.

### ***Moroccan Red Crescent***

Morocco has a population of almost 30 million, out of which more than one third is under 15 years of age. The Gross National Product (GNP) is US\$ 3,546, and is among the lowest in North Africa. There is widespread rural and urban poverty, and high unemployment among the youth. More than 60 per cent of adult women are illiterate. The health services and social security are not well developed. Morocco is prone to earthquakes, floods and drought.

The Moroccan RC has a good image, is well known, and has good relations with the government and authorities. Recently, MRC concluded national partnerships with other agencies and schools. Its social work activities included training, sewing classes, and more recently literacy classes for women, first-aid/rescue training and volunteer motivation. The challenges include strengthening the headquarters structure, including governance and management roles, planning capacity, disaster management and volunteer recruitment, training and retention.

The Moroccan RC has defined its priorities as follows:

- strengthening Disaster Management capacity through training and organizing of first-aiders and upgrading DP-stocks;
- increasing the capacity of MRC basic health care centres (rural, mother and child care, vaccination, health education) and organizing HIV/AIDS and sexually transmitted disease (STD) preventive education for youth;
- OD, including volunteer recruitment, training, retention and financial resource development;
- regional cooperation to exchange experiences and share resources. The MRC has also proposed a regional warehouse to be established in Morocco; and
- fighting poverty and illiteracy.

### ***Algerian Red Crescent (ARC)***

Algeria has a population of around 30 million, of which more than one third is under 15 years of age. The economic indicators are medium level, with a GNP of US\$ 5,306, but the economy faces difficulties, and there is high unemployment among the youth. More than one third of adult women are illiterate. The past decade of violence caused the deterioration of public health and educational services. It is estimated that well over 100,000 persons have lost their lives in the internal violence related to Islamic fundamentalism and ethnic tensions (Berber uprising), and while the situation has been improving significantly, it is estimated that during the first half of 2002 alone, some 800 persons were killed. Algeria is also prone to earthquakes, floods and drought. In November 2001 flash floods hit Algiers killing more than 700 people and leaving many homeless.

The ARC has an extensive network of 48 *wilaya* committees, good experience in disaster response (first-aid, rescue services, relief), large scale social work (Ramadan meals, summer camps, training and rehabilitation centres for women victims of violence) and a good image. The ARC is well known, has good relations with the government and the Civil Defence. The challenges include: a highly centralized headquarters structure that limits the society's implementation capacity; a need for clarification of the roles of governance and management; and the absence of a strategic plan for the society. The ARC is yet to work on its self-assessment.

The Algerian RC has defined its priorities as follows:

- organizational development, especially training of branch leaders (in management and general RCRC knowledge) and development of financial resources;
- Disaster Preparedness/Disaster Response, in particular disaster management training (national, regional, international), training in donor reporting (tracing of goods, accountability);
- HIV/AIDS youth prevention campaign to be developed, vocational training centres for women to be expanded and developed.

### ***Tunisian Red Crescent (TRC)***

Tunisia is a relatively small country between its two large neighbours. It has a population of 9.5 million, with a growth of only 1.2 per cent and less than one third of it is under 15 years of age. The socio-economic indicators are reasonably good, with a GNP of US\$ 6,363. The health care level for the whole population and social security are well developed. Still, 29 per cent of adult women are illiterate, but general education is above-average. Disasters do happen, but usually they are of a small scale, mainly floods and drought.

Among the strengths of the TRC are its social activities (Ramadan meals and distributions of school equipment), first-aid training, a small blood bank, and radio programmes on health education. Relations with the government and authorities are good. The challenges include: a limited capacity of the national headquarters, having only a few administrative staff but lacking professional full-time people to support the work done by volunteers; a weak financial base; and a poor public image, especially among young people. The NS faces severe competition from numerous new NGOs. The TRC has not yet started to develop a strategic plan.

The Tunisian RC has defined its priorities as follows:

- strengthening of regional structures by constructing six branches at RC headquarters, including a small warehouse;
- strengthening Disaster Preparedness, including clarification of role of the TRC in a national DP programme; currently not mentioned, training of volunteers in disaster management and intervention (logistics and sanitation), DP stocks for the TRC central warehouse and training in warehouse management;
- HIV/AIDS prevention training (change of behaviour), health education (stop smoking, drug addiction) and training in social aspects of disaster response; and
- dissemination and communication (change of behaviour, fund-raising).

### ***Libyan Red Crescent (LRC)***

Libya is large in size and has a population of 5.3 million, of which more than a third is under 15 years of age. The GNP is US\$ 7,570, the highest in North Africa, and the health services are well developed. About 20 per cent of adult women are illiterate. There are many refugees and immigrants from sub-Saharan Africa, but no figures are available. There were no major disasters since the drought that affected all of North Africa between 2000-2002. As the economic embargo is easing up, contacts to outside sources are increasing.

The Libyan RC has good human and financial resources, well developed planning and training, blood services and clinics, and good relations with the government. Among the challenges are that the public perceive the LRC as part of the Ministry of Health, and its role in DP is not recognized. General RCRC knowledge in branches needs to be strengthened.

The Libyan Red Crescent priorities include:

- training of local branch personnel (technical support for curriculum, methods);
- exchange of experiences in Disaster Management, including Sphere training (did not participate in Cairo 2002); and
- exchange and sharing of knowledge between other NS in the region.

### ***Egyptian Red Crescent (ERC)***

Egypt is the largest country in North Africa, with a population of 67.9 million, of which 35 per cent is under 15 years of age. The socio-economic indicators (GNP US\$ 3,635) reflect widespread rural and urban poverty, high adult illiteracy (45 per cent of adult women illiterate and 34 per cent of men) and limited access to health services for the poor. Egypt is prone to disasters, with a history of earthquakes (1992), floods (1994), droughts and accidents (a train fire 2002).

The ERC has an extensive branch network and good disaster response capacity and the post-disaster rehabilitation and community development experience is unique in the region, along with a developed blood service, and close relations with the government. Among the challenges are a highly centralized decision-making structure and limited financial resources.

The Egyptian RC has defined its priorities as follows:

- upgrading of Disaster Preparedness/Disaster Response systems, communication tools, warehouses and First Aid training, and developing psychological support for victims of disasters;
- providing Health education materials (First Aid manuals, mannequins); HIV/AIDS and reproductive health education; blood banks and recruitment of blood donors;
- community development among the youth, women, working children, children at risk, and slums; and
- training of youth in International Humanitarian Law (IHL).

### **Red Cross and Red Crescent Priorities**

The North African Red Crescent Societies (NARCS) did not yet formulate respective Cooperation Agreement Strategy (CAS) documents since the technical cooperation with the Secretariat is quite recent, and the strategic planning processes are in their early stages. North Africa has only a few traditional donors. However, the ICRC has been present in the region for a decade and has developed strong working relations with all the North African societies. The ICRC Maghreb delegation is based in Tunis, in the same building as the Federation's office, and this facilitates communication and coordination. The situation regarding the individual NS is the following:

- In Morocco, the Spanish RC (SRC) is a traditional supporter of the MRC. Recently, the SRC Andalusia branch discussed supporting a first-aid training centre project. ICRC is supporting training of IHL in schools as well as keeping contacts with Moroccan prisoners in western Sahara and their families in Morocco.
- In Algeria, the ARC has historical close links to the French Red Cross (FRC). These links have recently been reinforced, and the FRC is currently planning to support the ARC in the following areas:
  - specialized training of first-aid instructors;
  - expansion and development of work centres for women; and
  - psychological support in co-operation with the ICRC.
- The ICRC has supported the ARC in the last three years in the following areas:
  - dissemination of IHL;
  - training of first-aid instructors in cooperation with the Federation and Amman RD, and in the production of a first aid manual;

- technical advice in psychological support, together with various ministries (the French RC provides personnel);
  - work centres for women (financing and equipment); and
  - a prothesis making workshop for western Sahara prisoners (the ICRC carries out prison visits, and recently established a delegation in Algiers).
- In addition, various PNS who participated in relief efforts after the floods in November 2001 may still have some unused funds, which are principally earmarked for DP.
  - In Tunisia there are no significant traditional donors, besides the support from the ICRC in training and dissemination of IHL.
  - In Libya there is no significant outside support requested or expected. Libya tends to act rather as a Participating National Societies (PNS). The ICRC continues to support IHL training.
  - In Egypt the American RC supports Disaster Preparedness in an important way. The ICRC has an office for publications in Cairo and supports IHL training of ERCS youth.

### **Priority Programmes for Secretariat Assistance**

Disaster Management has been defined as a priority by all five North African societies: Morocco, Algeria, Tunisia, Libya and Egypt. DM has been selected as one of the Secretariat's priority areas of support as the region is disaster prone, even if the seriousness of risk varies. Algeria, Morocco and Egypt experience frequent disasters. The capacities of the RC societies to prepare for and intervene in disasters need to be upgraded in order for them to play a relevant role as auxiliaries to the public authorities, especially the Civil Defence. This goes both for training of staff and volunteers in risk assessment and disaster management, and for physical structures. In countries with less frequent large scale disasters such as Tunisia and Libya, the main challenge is to raise the DP capacity of the societies to a level that will enhance the trust of the people as well as ensure the recognition of the Red Crescent as a viable partner by the authorities.

To ensure that these needs are met, the Tunis office will be reinforced by a DP delegate. Assistance will be provided through training in Disaster Management on a national, regional and international level, and also include monitoring and reporting on relief. Expertise will be provided to assist NS in the definition of their respective roles in the governments' national DP and RP. The upgrading of the DP infrastructure, including the training of staff and replenishment of relief stocks in regional and central warehouses, will be done in Algeria as a priority. Vulnerability and capacity assessment (VCA) training will be followed-up by visits to each country to help initiate implementation. Social aspects of disaster response are addressed through the NS network in the Psychological Support Plan (PSP).

HIV/AIDS has been selected as a priority area of Secretariat support due to the fact that only very recently the North African societies have come to recognize that HIV/AIDS represents a real threat to the region, and are now ready to act in order to help prevent the problem from becoming as serious here as in other parts of Africa. The Secretariat needs to use this momentum to build on the enthusiasm and commitment of the societies in an area which is very sensitive in the Islamic world. The emphasis will be on following-up and complementing the HIV/AIDS and STD Youth Peer Education training of trainers (ToT) conducted in Libya and Lebanon in 2002. Through technical assistance from the Tunis office and Amman RD, the NS will be assisted with production of project proposals on how they will utilize the recently acquired skills, as well as in the implementation of these projects.

The Egyptian RC will be supported in its Polio Eradication campaign, where they are co-operating with the Ministry of Health and the WHO since 2002. This is a programme that will enhance the partnership of the ERC with the public authorities and build the capacities of some 900 volunteers, who would have benefited from the training provided by the NS in cooperation with the Federation.

Support is also sought for NS community development and literacy classes benefiting women in Morocco, Algeria and Egypt. While this may seem an uncommon area of activity for a society - it is of highest importance in these countries, where poverty is coupled with illiteracy. Women are in a very vulnerable situation as 64 per cent of adult women (over 15 years of age) in Morocco, 43 per cent in Algeria and 56 per cent in Egypt are illiterate. All these NS have ongoing literacy programmes, linked to their social or community development activities, and all are capable of expanding the programmes.

Respect for and implementation of the Movement's Fundamental Principles and Humanitarian values are the basis of action of the Federation and its member national societies. After 11 September, the promotion of these values took on new importance all over the globe but especially in the Arab world, which is going through a difficult time. A pilot project of "changing behaviour in the community" will be implemented in North Africa, aiming at applying the principles on a community level by reducing discrimination and violence.

Organizational development and DP are the common priorities for all North African societies. This is a sensitive area of the programmes, since it influences how it is governed and managed (and that is traditionally done in a centralized manner in the Arab world). The North African NS would benefit from support in this area, assuming a stronger role as part of a civil society in their respective countries, and that support should be tailored to fit each society's particular needs. In discussions with the NS leaders it was decided that the emphasis in 2003 will be on training of branch leaders in RC/RC policies and approaches, including volunteer recruitment, management and retention. Development of NS financial resources will be pursued, as it is a need identified by several of the societies, and could significantly enhance their capacity. For this reason, an expertise in French language skills is sought. The MENA gender network, created during the third MENA Conference in Teheran in 2001, will be supported through training and technical advice, using the new Federation training tool. Self-assessment and production of strategic plans will be encouraged and facilitated.

An important element of the Federation's coordinating role will consist of introducing the CAS process to the North African NS, with an emphasis on strategic planning and donor coordination. Follow-up will be given and assistance provided in facilitation of another North Africa leaders' consultation meeting, a technical meeting to help define a North African Health strategy in line with African Red Cross and Red Crescent Health Initiatives (ARCHI) for the rest of Africa is also planned. Since it was defined as a high priority by the society leaders, identification and organization of a regional pool of experts from the NS in the region in the different technical areas such as OD, VCA, Health, volunteers and development will be initiated early in 2003.

Representation will focus on positioning the Federation in the North African context, where little is known by the authorities or other actors. Work will continue towards achieving a status agreement with the Tunisian government.

Field management will consist of assuring the Tunis office as a sub-regional delegation linked with the Amman RD and having the minimum necessary human and material resources to service the five societies of North Africa. Currently, the office consists of one Federation representative and one local staff member, and this has proved to be insufficient for the increasing demands of the NS and activities already underway.

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

### **Background and achievements/lessons to date**

The overall goal for this programme in 2002 is to develop the health and social services of North African societies in line with the Federation's Strategy 2010: health and care in the community and to support social welfare activities in societies focusing on disadvantaged women. The preventive aspect of health care is another area, and will include education on HIV/AIDS to enable the societies to strengthen their activities on a local level. This goal was only partially achieved due to lack of funding and special circumstances. The approach for 2003 was modified based on last year's experience.

For example, in 2002, in Algeria, the expansion and upgrading of work centres for women did not take place due to the limited absorption capacity of the ARC, because they were occupied with the aftermath of a flood operation, and the lack of interest of at least one PNS to work on this programme in a bilateral manner. For this reason this item is no longer part of the Federation appeal, but is recognized as an important activity toward which the ARCS would welcome support on a bilateral basis.

The VCA training, in which all North African NS participated, achieved an important milestone in encouraging work on a community level and in integrating health and disaster preparedness. Follow-up will occur in individual NS in 2003 as part of their DP programmes by working closely with those responsible for Health and First Aid. This is the common asset of all societies in the region and can serve as an entry point for health and youth programmes in communities. An integrated approach to Health, DP and OD will be promoted in order to enhance NS local capacities, to initiate community based DP, and to reduce household vulnerability to HIV/AIDS.

The North African NS initially hesitated about involving themselves in HIV/AIDS related activities. This has now significantly changed, and most societies are active participants in their respective national HIV/AIDS councils. Following a consultation meeting in Tunis in 2001, the societies decided to start youth education programmes in HIV/AIDS using the Federation Manual, that was translated into Arabic and culturally adapted to the region. A follow-up of this initiative was then carried out with all societies by a Staff on Loan (SoL) provided by the Libyan RC. The programme proper was launched in April 2002 at a ToT workshop hosted in Benghazi by the Libyan Red Crescent and organized in cooperation with the Federation's Amman RD and the Tunis office. A ToT in French and targeting the youth was hosted in September 2002. A follow-up of this initiative was also carried out with all societies by a SoL provided by the Libyan and Lebanese RC and included participation of five young people from each of the NS from Algeria, Morocco, Tunisia and Lebanon. Further follow-up is occurring with technical visits to the societies in order to assist them in defining and writing up their projects.

All the above activities were done in order to prepare the North African NS to carry out activities in an area that is delicate and sensitive, and particularly so in the Muslim world. By 2003, all five NS should derive their proposals and have their projects up and running. These projects are currently being developed, and will correspond to the specific situation and the current capacity of each NS. The Secretariat will provide technical and financial support as requested.

In relation to other health related activities, the North African NS have started to link up with the Psychological Support (PSP) resource group, which met twice during 2002. The Algerian RC has significant experience in this field, and the Egyptian and Tunisian Societies have also shown interest. It is planned the next meeting will take place in Algeria. This work will be further reinforced with the translation of the Federation's Community Based Psychological Support Training Manual into French and Arabic, which will make it accessible to all NS.

Furthermore, the Egyptian RC has been involved in a Polio Eradication campaign in cooperation with the Ministry of Health and WHO. The Federation supported the ERC in this activity in 2002 and hopes to continue in 2003, with the addition of a training programme for the 900 volunteers of the ERC, by including the experiences of similar projects in other NS in the region.

Several North African NS are involved in community development in the form of literacy programmes for adults and especially women (Morocco, Algeria, Egypt). In these countries this activity responds to a real vulnerability, as the female illiteracy rate is between 43-64 per cent. These programmes often include components of health education, first aid and disaster preparedness, as the textbooks deal with these topics. The societies would like to see their programmes expand and welcome support towards hiring teachers and production of study materials.

### **Overall Goal**

The vulnerabilities to infectious diseases and other community health problems in North Africa are reduced through a meaningful contribution and cooperation of the RCS with health authorities and other partners.

### **Programme Objective and Expected Results**

Programme objective: The capacities of NS to work in community programmes, including youth and volunteers in advocacy and services, enhance the reduction of gaps between health promotion, disease prevention, first aid, disaster preparedness and social welfare.

#### ***Project: Global fight against HIV/AIDS***

Expected results for this objective are:

- The NS of Morocco, Algeria, Tunisia, Libya and Egypt are committed to the fight against HIV/AIDS with the necessary resources and structures to implement specific activities in their countries.
- All five NS have established partnerships with their national AIDS authorities as well as UN agencies and NGOs working in the field on HIV/AIDS.
- At least three NS have ongoing programmes involving volunteers and youth and the rest have completed their project plan.
- HIV/AIDS awareness at national and branch level has increased with special attention to youth and women.

#### ***Project: Psychological Support***

Expected results for this objective are:

- The quality of the psychological support service of NS is improved based on culturally adapted approaches.
- At least three of the five North African NS are actively participating in the work of the PSP resource group.
- The new Federation training manual on community based psychological support will be in use by all NS.

#### ***Project: Polio Eradication***

Expected result for this objective is:

- The ERC will establish a working partnership with the Ministry of Health in the Polio Eradication campaign, and the 900 ERCS volunteers involved will benefit from Federation experience in this field training.

***Project: Community Development***

Expected result for this objective is:

- The NS of Morocco, Algeria and Egypt will have expanded their literacy programmes in favour of disadvantaged women.

**2. Disaster Management** [\*<Click here to return to the title page>\*](#)

**Background and achievements/lessons to date**

The general goal of the 2002 North Africa DP programme was to enhance the capacity of and co-ordination among the national societies for coping with disasters on local, regional, and national levels; to strengthen the role of these societies as auxiliaries to public authorities in disaster response; to ensure an integrated approach with their health and first-aid activities on a local level; and to improve regional cooperation and coordination among the national societies in the field of DP and response. The overall goal continues to be relevant for 2003.

During the first half of 2002 two sub-regional events were organized to meet several components of the above goal. The first was a workshop on Sphere standards, hosted by the Egyptian Red Crescent in March 2002, and the second was training in vulnerability and capacity assessment (VCA), hosted by the Moroccan Red Crescent in May 2002.

The Sphere workshop provided each society an opportunity to discuss the effectiveness of the humanitarian responses in the region and provided a familiarization of the Sphere minimum standards in DR and the Humanitarian Charter. The workshop used a newly translated version of the handbook and this was the first time such a workshop was organized in Arabic. The result was increased understanding of the quality DR and the importance of acting in a co-ordinated manner in international operations. The workshop also provided networking on a regional level since there has been minimal contact between those responsible for DR in the societies of North Africa. Initially this was a start but additional work and training is needed before the NS are familiar and comfortable with Federation and other international emergency cooperation procedures.

The aim of the VCA workshop in Morocco was to introduce the concept of VCA as an essential component of a well-working DP programme, and to train the persons responsible for pilot projects in their NS and on how to carry out a VCA. The background was the Integrated Disaster Preparedness (IDP) and Health initiative, launched with support of the technical departments in Geneva and Amman RD. The programme was in Arabic, facilitated by Federation staff from Amman RD and the Secretariat's DP department. It consisted of clarifying the concept and explaining the process of VCA, emphasizing the participatory nature of the process and the importance of working in partnerships with local authorities and other organizations. Initial planning of the structure that needs to be in place in each NS in order to carry out a VCA was done by each society's representatives. The aim was also to familiarize the NS with local level DP and to promote cooperation with local and national authorities in identifying a proper role of the RC Disaster Preparedness Plan in each country.

Additional practical coaching is needed to raise awareness of DP on a local level. The NS have requested a follow-up on a country level, with more tailor-made training and planning for the pilot VCA. The pilot programme is projected late in 2002 and early 2003, in cooperation with the Amman RD. The task for 2003 will be to assist and encourage all five NS to undertake VCA in their countries

and to help them incorporate the results in their national DP planning. Furthermore, as first aid is often the most common intervention on a family and community level, the NS will be encouraged to include a disaster preparedness/response component in their first aid services. Support will be provided from the Federation office in Tunis, in cooperation with the Amman RD and technical departments in Geneva.

### **Overall Goal**

The adverse effects of disasters are reduced through participation of North African NS in assessing vulnerabilities in their countries and preparing communities and volunteers for effective action together with respective authorities.

### **Programme Objective and Expected Results**

Programme objective: The national societies of Morocco, Algeria, Tunisia, Libya and Egypt have improved Disaster Management (DM) capacities in utilizing human and material resources for risk reduction, preparedness and response on local, national, regional and international levels.

Expected results for this objective are:

- Vulnerability and capacity assessments will be carried out in three of the five North African NS and planning will be initiated in the remaining two
- The DR structures and systems are strengthened and volunteers trained in disaster interventions in Morocco, Tunisia and Egypt.
- First Aid services are updated to include a disaster preparedness / response module.
- Disaster Preparedness stocks and procedures are upgraded in Algeria, Morocco and Tunisia.
- Skills in managing disasters on a national, regional and international level are improved through better coordination and understanding of procedures in all societies.
- Relief monitoring and reporting skills are enhanced in all the NS with a special focus on Algeria.
- The RC role in national DP plans is clarified and strengthened, particularly in Tunisia and Libya.
- Networking is occurring as is sharing of knowledge about recent experiences in DM (Algeria floods, Egypt train accident) and regional cooperation is strengthened.

## **3. Organizational Development** *<Click here to return to the title page>*

### **Background and achievements/lessons to date**

Organizational Development (OD) or capacity building has been a central element of the North African RAS since the start of the Federation's presence in Tunis two and a half years ago. In that time period, the Secretariat's understanding of the needs and capacities of the NS from Morocco, Algeria, Tunisia, Libya and Egypt has improved, and this led to some adjustments in the OD approach in order to accommodate the historical and cultural context of the region.

The specific OD objectives in the Appeal 2002 were the following:

- assisting NS in producing goals, strategies and action plans for their service programmes as well as for their organizational development based on a self-assessment;
- assisting in acquiring a solid financial base by setting up a financial resource development programme;
- supporting development of future leadership through training programmes organized with the Federation;
- building capacities at the branch level through infrastructure development and training of volunteers, and
- promoting the Federation's gender policy in the MENA region.

It must be recognized that the Federation's capacity building approach and tools rely heavily on the practices of the developed western industrialized world. They include participatory approaches, self-assessments, result-oriented planning, good governance, transparency, accountability, and delegation of authority. While these notions may be accepted in principle in the Arab-Muslim world, and especially in North Africa, the implementation of the practice remains a challenge. Promoting OD among national societies with a traditionally highly centralized environment requires a particular sensitivity to the very real constraints these societies are facing. In terms of programme implementation this translates into a slower pace and need for more confidence building.

There were both successes and constraints in implementing the OD programme in North Africa. The constraints are due to two reasons: the socio-cultural context of the region as described above, and the limited capacity of the Federation's office in Tunis (having only one delegate). The small delegation chooses what areas to concentrate on and what to leave for a later date. While proper strategic planning needs to be introduced, elements of this were included in all programme related training (Sphere, VCA, HIV/AIDS and Gender). Self-assessments were carried out by four of the five societies, but follow-up occurred in one case only, and this was as a result of the capacity constraints in the office. Defining priorities and good governance were discussed at a two-day consultation meeting of North African NS leaders in September 2002 in Tunis.

Unfortunately, no progress was made in assisting NS in acquiring a solid financial base by setting up a financial resource development programme. Three out of the five societies (Morocco, Algeria, Tunis) again defined this as a priority and included it in the 2003 work plan. Technical expertise with the necessary language skills (French, ideally also Arabic) needs to be urgently identified.

Leadership training was carried out two times in North Africa since the establishment of the Tunis office. The first one took place in February 2001 and the second in July 2002, both times jointly with the ICRC. This training was appreciated by the NS and can be qualified as the major OD input so far. However, the focus of the societies is now turning towards building capacity within their countries by training leaders of their regional or local committees. In a recent evaluation concerning leadership training, all five NS defined this as a priority for 2003. The Tunis office is ready to support this as it is evident that basic knowledge about the Red Cross and Red Crescent Movement and its policies is lacking on a branch level in several NS of the region. It is anticipated that the Algerian, Tunisian and the Moroccan Societies will be the first to get involved. Plans were made in co-operation with the ICRC to produce training modules in general RC/RC knowledge for regional committees, to allow for systematic and comprehensive training using appropriate material. These modules will be adapted into each society's situation and needs, and ToT will be conducted in order to create a local capacity. Volunteer recruitment along with management and retention was defined as a priority by several societies. The branch training will include elements from the Federation's new volunteer strategy. Developing branch capacity through training will also be closely linked and integrated with the branch level activities related to Disaster Preparedness and Health, such as VCA and HIV/AIDS youth peer education.

Work is already underway with the Tunisian RC, which started to invite representatives from its regional branches for a series of training and planning sessions, getting together the individuals responsible for a specific area or activity, such as Health, DP, Information, Youth, etc. The Algerian RC has defined a different approach, and will invite leaders of its 48 *wilaya* (provincial) committees to be trained on geographical basis, meaning that about a dozen *wilaya* committees are trained together during a three day-period. By end of 2003 all these committees should be trained. Based on this initial work the experience will be shared with the other NS of the region.

The background to the inclusion of gender issues in the OD programme originates from the third MENA Conference, held in Tehran in May 2001, which recognized in its final declaration the importance of considering the needs and capacities of both men and women in RC/RC work, and emphasized the need for increased involvement of women at all levels of decision-making and implementation. It also welcomed the establishment of a network for gender issues in the MENA region and designated the Iranian RC as its focal point. It furthermore recommended that each NS designate its own gender focal point, and requested that the Federation's Secretariat and regional delegation support the implementation of these recommendations.

The Federation's Representative for North Africa has acted as the Secretariat focal point for gender in MENA region. A landmark event was the organization of a seminar of NS Gender Focal Points in Teheran, Iran, in May 2002, in cooperation with the Iranian RC and the OD Department in Geneva. Altogether, eleven National Societies participated - Bahrain, Egypt, Iran, Jordan, Lebanon, Libya, Morocco, Palestine, Syria, Tunisia and Yemen - which represents about two thirds of all NS in the region and four of the five Societies in North Africa. Some participants, but not all, had been formally designated as Gender Focal Points in their NS. The purpose of the meeting was to bring together Gender Focal Points from different NS of the MENA region to discuss the implementation of the above decision based on a proposal prepared by the Iranian RC.

The operational framework for the MENA Gender Network highlights the main outcome of the above meeting. Its three objectives also define the agenda for Federation support in 2003, namely:

- upgrading knowledge and skills of women in MENA region national societies;
- considering the specific needs, capacities and vulnerabilities of women and men in RC/RC programmes; and
- increasing involvement of women at all levels of RC/RC. Training and networking are its key components. All national societies are encouraged to develop a more specific plan of action, with timelines, to include the following: revision of at least one of their current programmes from a gender perspective; updating data on the participation of men and women in the NS; and designation of a gender focal point if a NS has not yet done so. Work was initiated to customize and translate the Federation's new gender training manual to be used in regional training in MENA in 2003. The main focus of this training will be gender sensitive programming, and should ensure that the needs and capacities of both men and women will be taken into account in planning and implementing RC/RC programmes. A gender web site, designed by the Iranian RC was started on a trial bases in the second half of 2002, and the site will be further developed in 2003.

### **Overall Goal**

The North African NS can make a stronger contribution to civil society through service delivery and advocacy based on a clear direction and vision regarding their role, and supported by strengthened human and material resources.

### **Programme Objective and Expected Results**

Programme objective: All North African NS have skilled human resources at different levels of the organization, supported by an improved and diversified financial base and have efficient systems and procedures that are in line with the Federation's gender policy.

Expected results for this objective are:

- NS have improved leadership capacity in governance and management both at headquarters and branch levels.
- NS staff and volunteers in Tunisia and Algeria have increased capacities to plan, implement and monitor activities.

- At least two NS have initiated a strategic planning process.
- NS have improved services at the branch level as result of branch development programmes, including training of leaders.
- At least two NS have better capacities in volunteer recruitment, management and retention.
- At least two NS have initiated pilot financial resource development programmes.
- MENA region NS have improved skills and systems to consider gender issues in programming, and one society is actively working on this.
- Two-thirds of MENA region NS have appointed a gender focal point.

#### **4. Humanitarian Values** *<Click here to return to the title page>*

##### **Background and achievements/lessons to date**

The overall goal of the 2002 Appeal's Humanitarian Values programme was to complement the training in IHL provided by the Federation for over a decade and having an approach focusing on behaviour changes at the local level through advocacy. A TV spot competition was foreseen in the area of HIV/AIDS, with an aim of facilitating a debate on this sensitive subject, and the relaying of culturally acceptable messages about abstinence, fidelity and methods of prevention. This programme did not materialize due to two reasons: absence of financial response to the appeal, and departure of a staff member with the required competencies. However, two other initiatives are underway. Firstly, in relation to HIV/AIDS, the ToT programme for youth (see under Health and Care) has largely the same objectives. Secondly, a regional action for North Africa is planned to implement concrete activities on a national level to reduce discrimination and violence in the community and is based on the Federation's global action to achieve the same reduction in the community.

##### **Overall Goal**

To promote understanding and use of the fundamental principles within the RCS of North Africa in order to reduce discrimination and promote a culture of non-violence.

##### **Programme Objective and Expected Results**

Programme objective: To support the work of national societies and their interaction with authorities and other community actors in promoting fundamental principles at the grassroots level by using and sharing best practices to reduce discrimination and violence in the community.

Expected results for this objective are:

- NS have identified good practices in dissemination of the Federation's principles in communities and are sharing them with each other.
- NS have raised staff and volunteers' awareness on discriminating behaviour internally.
- NS have developed culturally sensitive approaches in promoting the culture of non-discrimination and non-violence in the Arab-Muslim context.

#### **5. Federation Coordination**

##### **Background and achievements/lessons to date**

The North African NS have not yet initiated the CAS process. The priorities were grouped under the RAS that was drafted at the end of 1999. However, it is anticipated that in 2003 CAS will be promoted as one of the main tools to encourage NS in strategic planning in Morocco, Algeria and Tunisia. The Federation's regional delegation for Maghreb will further develop the CAS and the main PNS will be approached.

The role of the Tunis office in initiating the CAS process will be twofold: on one hand promoting the notion of long-term strategic planning, including the of definition of their vision and priorities (see section 4: Organizational Development), and on the other, getting in contact with PNS or other parties interested or involved in supporting NS programmes, in order to agree on a common approach which would best correspond to the society's needs and capacities. This would eventually lead to agreed established roles and responsibilities of each. Currently, shared analysis of the situation in each country and NS is carried out on an ongoing basis with the Federation's Maghreb delegation, but not yet with the main PNS, the French and the Spanish RC Societies. Furthermore, joint planning takes place with the ICRC, as part of the two institutions' planning cycles, and meetings are held regularly. Joint planning was also done together with the Tunisian RC, ICRC and the Federation. This approach will be further developed to cover the other NS. In Algeria the challenge for 2003 remains the providing of bilateral programme support and technical assistance. Strengthening the role of NS in doing their own coordination and developing joint monitoring systems will be on the agenda of the Tunis office for 2003.

By invitation from the Federation's representative in Tunis, the leaders of the North African NS met in September 2002 and considered the humanitarian context of the region and defined their common priorities as well as the future direction of the Federation's support for them. While the leaders of these societies do meet regularly at Federation statutory meetings, this was the first time that they came together to focus on their own societies. The meeting was considered successful due to its "working" nature, and the society leaders deduced that such high-level consultations should continue minimally on an annual basis. The Algerian RC offered to host the next meeting.

The leaders' consultation meeting also considered the creation of a regional "pool of experts" in different technical areas as high priority. The Tunis office will provide technical and administrative support in order for the pool of experts to get started and to function properly. This includes definition of the minimum criteria for the resource persons as well as organization of training or briefing as necessary. A significant number of NS staff and volunteers have already been trained by the Federation, and some received Training of Trainers (ToT). Only in the first half of 2002, a total of 63 persons from the North African NS took part in various regional training events organized by the Tunis office or the Amman RD. The data concerning these persons will be recorded for future use and screened for inclusion in the pool of experts. The Tunis office will define profiles and fields of activity, organize briefings and training and the NS will identify persons and provide CVs. The criteria will include gender (both men and women), age (limits), and language (also French).

The consultation meeting of the leaders from North African NS, as mentioned above is an example of the work carried out by the Federation office to facilitate the organization, content and the follow-up of NS meetings in the region. In fact, regional cooperation has been one of the main aspects of its work from the very start about three years ago. This occurred mainly through training events and the planning of meetings in areas such as Health, including an HIV/AIDS consultation meeting, DPR, as well as leadership training. The North African societies discovered the experience and expertise available close-by and began to initiate networking among themselves. For example, during the first half of 2002 alone, five such events took place in different technical fields, bringing together expertise from all North African NS to discuss common concerns. The organization of such meetings requires, in addition to numerous contacts with each NS to define the agenda and identify participants, multiple logistical tasks. Travelling distances and cost of airfare is an important issue, as the distances in North Africa are great (flying time and cost from Cairo to Casablanca corresponds to a flight from Paris to New York).

The Tunis office serves as an important link in identifying facilitators and experts from the Secretariat and from other NS in the region. A meeting of North African societies will convene in the Tunis office to discuss a common health strategy for the region in 2003. This is the expressed wish of the societies

since the Pan African conference in Ougadougou and the adaptation of the ARCHI approach in other parts of Africa. It will help these societies in defining their special priorities and approaches to health issues.

### **Overall Goal**

All human and financial resources mobilized by the NS in North Africa and their partners are optimally used to improve NS capacities to deliver high quality services and effective advocacy.

### **Programme Objective and Expected Results**

Programme objective: The NS of North Africa are strengthened through regional cooperation and working together with their partners in a coordinated manner.

Expected results of the objective are:

- Three out of five North African NS have initiated a CAS process and are working on their vision and strategic plan.
- Good working relations and coordination with PNS providing bilateral assistance were established.
- The North African NS leaders have consolidated their practical working level of cooperation.
- A regional Human Resource pool of experts is formed and all five NS identified candidates from among their staff and volunteers, and working modalities for the pool were defined.
- A North African RC Health strategy was defined.

## **6. International Representation**

### **Background and achievements/lessons to date**

The Tunis office is lacking in this area. As the Federation's representation function in North Africa was established in early 2000, the initial focus was to get to know and work with the national societies in the region and to initiate cooperation with them. Progress has been made in this area, but at the cost of representation. However, the World Disaster Report launch was organized every year, together with the Tunisian RC, and this served as a useful contact point with authorities and other organizations. The fact that the Federation was not yet able to sign a status agreement with the Tunisian government also limited the representation function vis-a-vis the other international agencies and UN. The perspective is that this issue will soon be solved.

### **Overall Goal**

The Federation and its policies are better known by the authorities of the five North African countries as well as by the international community.

### **Programme Objective and Expected Result(s)**

Programme objective: The Federation and its member NS in North Africa will be recognized in an important role in advocating for the most vulnerable.

Expected results for this objective are:

- The Federation is viewed as a membership organization promoting the policies and views of its member Red Crescent Societies.
- The Federation will have signed a status agreement with the Tunisian government.
- The Federation's Tunis office will be better recognized and resourced.

## **7. Field Management programme**

### **Background and achievements/lessons to date**

The Tunis office was established in early 2000 as a representative of the Federation, with the idea to improve the Secretariat's understanding of the needs and the capacities of the North African NS and their expectations regarding organizational support. Since its establishment two and a half years ago, it effectively evolved into a sub-regional office linked to the Amman RD for the MENA region, and become a focal point for Federation support to the NS of Morocco, Algeria, Tunisia, Libya and Egypt.

While the activities and demands of the NS increased, the one-person representation proved to be too small for the task. The North Africa leaders' consultation meeting held in September 2002 in Tunis strongly urged the Federation to strengthen the office in order to provide additional and improved services for the NS of North Africa. For this reason it is anticipated the Tunis office will have in addition of one more delegate in the area of Disaster Preparedness; and the number of local staff will be increased to two instead of one. Furthermore, local and regional capacities will be mobilized during 2003 to create a North Africa NS pool of human resources with expertise in different technical areas. The office will continue to work closely with the Amman RD in areas of expertise such as DM, Health, Information, Organizational Development, Finances and others. The Tunis office will continue to function as the Secretariat focal point for gender issues in the whole of MENA region.

### **Overall Goal.**

The NS of North Africa will be fully integrated into and cooperate with the Secretariat and sister NS and will benefit as equal and responsible partners from all the services provided in the region.

### **Programme Objective and Expected Results**

Programme objective: The Federation support to the MENA region will take into account the specific needs and capacities of the North African NS and provide better tailored support to these societies.

Expected results for this objective are:

- The improved capacity of the Tunis office will help in early planning and easier access to Secretariat services for the NS, including technical expertise in the core areas.
- The human and material resources available from the North Africa region, from Amman RD and Geneva are better used to benefit the NS.
- The communications from the Secretariat will increasingly be translated into French for the three francophone NS.

*<Budget below - [Click here to return to the title page](#)>*

# BUDGET 2003

## PROGRAMME BUDGETS SUMMARY

Appeal no.: 01.92/2003

Name: North Africa Sub-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	80,000	0	0	0	80,000
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	20,000	0	0	0	20,000
Other relief supplies	0	0	0	0	0	0	0
<b>SUPPLIES</b>	0	0	100,000	0	0	0	100,000
Land & Buildings	0	0	0	0	0	0	0
Vehicles	0	0	0	0	0	0	0
Computers & telecom	9,114	4,461	6,486	1,371	2,567	0	24,000
Medical equipment	0	0	0	0	0	0	0
Other capital exp.	0	0	0	0	0	0	0
<b>CAPITAL EXPENSES</b>	9,114	4,461	6,486	1,371	2,567	0	24,000
Warehouse & Distribution	0	0	0	0	0	0	0
Transport & Vehicules	6,455	3,160	4,595	971	1,819	0	17,000
<b>TRANSPORT &amp; STORAGE</b>	6,455	3,160	4,595	971	1,819	0	17,000
Programme Support	35,110	17,186	25,002	5,283	9,891	0	92,472
<b>PROGRAMME SUPPORT</b>	35,110	17,186	25,002	5,283	9,891	0	92,472
Personnel-delegates	187,200	28,800	158,400	28,800	28,800	0	432,000
Personnel-national staff	13,291	86,506	9,459	2,000	3,744	0	114,999
Consultants	20,000	0	0	0	0	0	20,000
<b>PERSONNEL</b>	220,491	115,306	167,859	30,800	32,544	0	566,999
W/shops & Training	210,000	100,000	67,000	30,000	80,000	0	487,000
<b>WORKSHOPS &amp; TRAINING</b>	210,000	100,000	67,000	30,000	80,000	0	487,000
Travel & related expenses	16,899	929	1,351	286	10,535	0	29,999
Information	16,899	15,929	1,535	10,286	7,535	0	52,183
Other General costs	25,189	7,435	10,811	2,286	7,279	0	53,000
<b>GENERAL EXPENSES</b>	58,987	24,293	13,697	12,858	25,349	0	135,183
<b>TOTAL BUDGET:</b>	540,157	264,406	384,639	81,283	152,170	0	1,422,656