

PROGRAMME UPDATE



International Federation of Red Cross and Red Crescent Societies
Fédération Internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

SOUTHERN AFRICA REGIONAL PROGRAMMES AND NATIONAL SOCIETY CAPACITY BUILDING

Appeal No. MAA63001
18 December 2006

APPEAL AND BUDGET REVISION

The Federation's vision is to strive, through voluntary action, for a world of empowered communities, better able to address human suffering and crises with hope, respect for dignity and a concern for equity. Its mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world's largest humanitarian organization and its millions of volunteers are active in over 185 countries.

In Brief

Programme Update no. 2; Period covered: July to November 2006

This Programme Update revises the total Appeal budget from CHF 16,327,274 to CHF 15,178,591 (USD 12,575,469 or EUR 9,540,283).

Appeal coverage: 35.5%; Outstanding needs: CHF 9,794,736 (USD 8,114,943 or EUR 6,156,340).

Appeal 2006-2007: <http://www.ifrc.org/docs/appeals/annual06/MAA63001.pdf>

Programme Update no. 1: <http://www.ifrc.org/docs/appeals/annual06/MAA6300101.pdf>

PU no. 1 (Focus on South Africa): <http://www.ifrc.org/docs/appeals/annual06/MAA6300101b.pdf>

[<Click here to go directly to the attached revised appeal budget and here for the interim financial report>](#)

The programmes herein are aligned with the Federation's Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity":

- *Reduce the numbers of deaths, injuries and impact from disasters.*
- *Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.*
- *Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.*
- *Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.*

Programme summary: This appeal seeks support for regional programmes and the national societies (NSs) of Botswana, Lesotho, Malawi, Namibia, South Africa and Swaziland. These NS's programmes were covered under the regional appeal in order to strengthen their capacity and funding base. This programme update focuses on progress in the last six months and provides information with regard to adjustments made to the second year of the two year plan for 2006 and 2007. The operational plans were reviewed in line with the Federation's Global Agenda, Federation of the Future and Framework for Action.

In 2007, activities will include scaling up of HIV and AIDS prevention, home-based care (HBC) for people living with HIV (PLHIV), orphans and vulnerable children (OVC), community-based health (CBH) and public health in emergencies, community-based risk reduction (CBRR), promoting the Fundamental Principles and Humanitarian Values, performance management and organizational development (OD). The HIV and AIDS activities for 2007 are covered under the new Southern Africa HIV and AIDS five-year programmes (2006 – 2010).

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This update also provides information regarding financial coverage to date the logframe indicating changes made to the 2007 plans. Currently, the two-year appeal is 35.5% covered and the Federation Secretariat appreciates the support given to the region. The appeal budget for 2007 has been revised downwards from CHF 8,381,792 to CHF 7,233,109 due to consolidation and integration of some health care and organizational development activities into the new HIV and AIDS programme.

Regional context

Southern Africa suffers from humanitarian disasters such as food shortages, flooding, health emergencies mainly cholera, malaria and polio. Other calamities such as minor earthquakes and snow are seldom experienced in the region. Lesotho, Malawi, Mozambique, Namibia, Swaziland, Zambia and Zimbabwe were most affected by food insecurity in 2005/2006. The situation was most characterized as a crippling “triple threat” combination of HIV and AIDS, erratic rainfall patterns and weakened government capacities. Household food shortages was also identified as a direct result not only of poor rainfall, but also longer-term factors such as the HIV and AIDS pandemic, economic recession, and declining livelihood security.

Despite a good harvest this year, a total of 833,000 people in Malawi will have little or no food at some point before end of March 2007. This is according to estimates of the Malawi Vulnerability Assessment Committee. In addition, 147,800 people are at risk of not meeting their food requirements if the household economy deteriorates further as a result of high maize prices. Humanitarian and relief organizations have dismissed as baseless claims by government officials in Swaziland that relief aid has fostered a culture of dependency and Swazis are refusing to grow their own food because all their food requirements are being met. Food security operations in Zimbabwe have been scaled down due funding shortfall for the World Food Programme (WFP). The shortfall has affected 450,000 people including those in the urban and school feeding programme. Lack of agricultural inputs is threatening the harvest for 2007. Costs are prohibitive and there are shortages of inputs such as fertilizer. In the last season, Zimbabwe harvested only two thirds (800,000 metric tonnes) of its annual maize requirement.

Angola, Malawi, Mozambique, Zambia and Zimbabwe reported outbreaks of cholera since the beginning of the rainy season in November 2005. Cholera, a gastrointestinal disease is contracted by human beings mainly through eating and drinking contaminated water and food stuffs. The common causes of the spread of cholera in the affected countries are poor sanitation and lack of clean and safe water. Historical factors such as prolonged civil wars in some countries and poor infrastructural development in others, including in the health delivery systems has caused countries such as Angola, Zimbabwe and Zambia’s local health authorities to be overwhelmed. Some of the affected areas are inaccessible due to poor infrastructure and communication networks. The need to prevent and control the cholera has driven governments to call upon humanitarian agencies to assist. Angola is still responding to cholera outbreaks and Zambia started recording new cases in November 2006. Two districts in Malawi are currently affected by cholera. In the week beginning 7 August 2006 to the week ending 29 October 2006, a total number of 44 cases were reported in Machinga District. During the week ending 22 October 2006, a case also emerged in Chiradzulu District. No deaths have been reported in the two districts.

Southern Africa is the epicentre of the worldwide HIV and AIDS pandemic. Of the global total of approximately 38.6 million people living with HIV (PLHIV), nearly a third (12.35 million, including 860,000 children aged less than 14 years) are in the ten countries of southern Africa¹. Thus, nearly 10% of the 127 million population of the region is living with HIV. In 2005, some 920,000 people died from AIDS related illness while some 1.1 million were newly infected. The region is also home to nearly 4.6 million orphans due to AIDS. With the exception of relatively low prevalence in Angola (general HIV prevalence rates have remained below 5% over the last decade), adult infection rates range from over 14% in Malawi to over 33% in Swaziland.

Provision of voluntary counselling and testing (VCT) services, community home-based care (CBHC), care of orphans and vulnerable children (OVC), and the prevention of parent-to-child transmission (PPTCT) have positively contributed to improvement of life and the way people perceive the future. All governments in the region call for strategic partnerships and alliances with different development partners, humanitarian organizations as well as the private sector to catalyze the scaling up of national response the pandemic. For example, the

¹ The Report on the Global AIDS Epidemic: 10th anniversary special edition, UNAIDS (2006). Figures quoted refer to estimates as at 2005.

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government of Botswana has mainstreamed all HIV and AIDS response programmes into its National Development Plan and Vision 2016.

In Swaziland, procurement problems have caused drug shortages at government medical facilities resulting in patients being denied treatment. The unavailability of pharmaceutical drugs is forcing Swazis to rely on traditional medicines to alleviate their ailments. The government, which created the shortages by failing to issue drug tenders to companies supplying clinics and hospitals, is promoting traditional and herbal treatments.

A drug-resistant strain of tuberculosis (TB) – XDR-TB – was detected in South Africa and claimed over 60 lives by end of October. All those diagnosed have been HIV positive and on ART. South Africa has high rates of HIV and AIDS; about one in nine of the country's 45 million people are HIV positive, making them acutely susceptible to TB. HIV infection rates are similarly high in the neighbouring Botswana, Lesotho, Mozambique, Swaziland and Zimbabwe, which have yet to report any XDR TB cases.

Operational developments

The Federation regional delegation (RD) in Harare has been mapping the capacities of the Red Cross societies in terms of response to health and care emergencies. The results have been used in developing regional contingency plans such as those for cholera. The Federation has successfully integrated the malaria programme with the HBC and OVC project at both regional delegation (RD) and national society (NS) levels.

A regional Vulnerability Capacity Assessment (VCA) training was held in Lesotho from the 23 to 28 October. Participants included NS staff, government's disaster management departments and representatives from sector agencies in the regions. The action plan for strengthening implementation of the Disaster Risk Reduction (DRR) programme to address concerns identified by the management was reviewed in September. The aim is to improve coordination and implementation of the community-based DRR programme at all levels.

The Federation RD initiated the development of a new integrated long-term HIV and AIDS strategy and plan in 2006, taking into consideration the lessons learned since 2001 as well as the changing nature of the pandemic. The basis for forward programme development has been a highly consultative process involving NS leadership, technical staff and management as well as the Federation Secretariat, partner national societies (PNSs) and other regional stakeholders.

The Southern African regional AIDS network (SARAN) meeting was held between 28 and 29 September 2006 in Harare. Participants included HIV and AIDS coordinators, OVC and partnerships officers. The issues discussed included progress on implementation of activities – impact, constraints and how these are being addressed; the integration of activities on health, food security and strengthening of partnerships with National Networks of PLHIV. Prevention activities were discussed with a presentation from a national organization from Zimbabwe – Padare. The HIV and AIDS scaling up committee meeting was also held on 30 September 2006, and was attended by secretaries general of Namibia, Malawi, Swaziland and Zimbabwe, the Pan African Coordination Team (PACT) coordinator, and Zambia Red Cross Society health adviser. Participants discussed the, five-year strategic plans, the existing terms of reference (ToR) for the scaling up committee and operations of the committee.

The regional health and care team conducted a 'Prevention Guidelines Workshop' facilitated by Geneva Secretariat, followed by the high profile launch of the training package for HIV prevention, care, treatment and support for community volunteers in October. An orientation briefing on the new training tool for more than 50 participants from various African NS and regional delegations across the world was conducted from 3-6 October. Both events were graced by the newly appointed special representative of the Secretary General on HIV and AIDS.

Following a successful HBC Symposium held in April, the RD – together with NS continued to provide media with information on the new HIV and AIDS five year strategy. This, together with recommendations of Fritz Institute report on humanitarian reporting, led to the conception of a regional media tour to provide the media with detailed information on the impact of the pandemic in the region. The launch of the new prevention, treatment care and support handbook gave an opportunity to profile the work of the Red Cross, especially collaborating with partners.

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The regional food security operation ([Appeal 05EA023](#)) was closed on 30 September 2006. The outstanding and all work-in-progress were integrated into country specific interventions such as disaster risk reduction and HIV and AIDS five year programme. Poor donor response to the appeal contributed to delays in project commencement especially in the livelihood, water supply and sanitation interventions, which led to the extension of the operation timeframe from 19 July to 30 September 2006. The food insecurity emergency appeal was launched in October 2005 in response to a food insecurity crisis which affected an estimated 12 million people in seven Southern Africa. The implementation framework encompassed integrated short to mid-term food security approaches, closely linked to the HBC projects. The activities included food distribution, innovative livelihood projects such as livestock, cash distribution, food-for-work, agricultural starter packs, backyard gardening, water supply, sanitation and hygiene promotion.

The annual Southern Africa Partnership of Red Cross Societies (SAPRCS) meeting was held in Johannesburg between 2 and 3 November 2008 attended by the president of Southern Africa national societies, secretaries general, PNS senior representatives, the International Committee of the Red Cross (ICRC) and the Federation RD delegates. The Secretary General of the Federation and his deputy attended the meeting provided updates on the implementation of the Federation of Future and the decentralization plan in particular, allowing NS to provide input on the process. According to the SAPRCS constitution Swaziland Red Cross president succeeded the South African Red Cross president who chaired the SAPRCS for the past two years.

In line with the Federation of the Future Global Agenda goal 3: *increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situation of vulnerability*, the Federation RD embarked on assessing the capacity, plight and needs of the Red Cross volunteers in the region. A regional volunteer assessment started in October in five selected NS. The results from the assessment will be used in developing a regional volunteer database and in designing tools on volunteerism which are in line with the regional priorities, such as the need for home-based care (HBC). In the next five years, Southern Africa region is scaling up interventions with vulnerable communities in health promotion, disease prevention and DRR, and the work of the volunteers in paramount.

Facilitated by the New Partnerships of African Red Cross Societies (NEPARC), Mozambique, South African and Zambia Red Cross societies went through the strategic business solutions (SGS) audit. Following the third party audit process in September, the South African Red Society was granted a certificate after meeting the minimum standards in the non-governmental organization (NGO) benchmarking process. This was motivational for the NS after actively driving an intensive and complex change process during the past few years.

The secretary general of Botswana Red Cross Society resigned and the programme coordinator took the pacific on acting capacity. The South African Red Cross Society has not appointed a secretary general pending relocation from Cape Town to Johannesburg. The long-serving president of Malawi Red Cross Society died in November after battling with cancer. The former secretary general of Angola Red Cross passed away on 30 November after suffering from cancer for a long time. This has been planned for 2007. It has been unfortunate for the region to experience deaths of senior governance and management members.

Health and care

Goal: The general health of the community is improved.

Objective: National societies are equipped with skills to implement community-based health care interventions in order to alleviate the health of the vulnerable people.

Community-based health care

The national societies of Botswana, Namibia, Malawi, Zambia and Zimbabwe distributed long-lasting insecticide-treated mosquito nets (LLITNs) donated by the World Swim for Malaria Foundation. Each of the five countries received 3,000 LLITNs which were distributed to beneficiaries of the HBC and OVC programme. The Federation RD played a crucial role in ensuring that the terms of the Memorandum of Understanding (MoU) with the Foundation were observed during the distribution, and attended distribution in Malawi and Zimbabwe. The distribution of these nets demonstrated a successful integration of the HBC and OVC programme with the malaria

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prevention and control project. The Red Cross volunteers in the five countries contributed through community mobilization and selection of the beneficiaries. The volunteers were tasked with the continued responsibility of ensuring that the distributed nets were utilized and providing health education to communities.

Assistance was given to Lesotho Red Cross Society in the management of primary health care clinics and strategies for resource mobilization for the refurbishment of the Red Cross clinic buildings. However, there is severe shortage of staff in these clinics.

The Federation RD provided technical assistance and guidance to Namibia Red Cross in the design of a TB prevention and control strategy. Technical assistance was also provided to other national societies in assessing the national TB programmes and findings were used in engaging the ministries of health in mapping the implementation of the national programmes.

The regional health officer and first aid coordinators for Malawi and Zimbabwe Red Cross Society participated at the community-based first aid (CBFA) consultative meeting held in Kenya. The meeting managed to outline the minimum standards for a CBFA programme. Ground work has been done for South African Red Cross Society in providing first aid services to the sports persons and the public who will participate at the 2010 Soccer World Cup, to be hosted in the country. Technical support was provided in the recruitment of first aid officer in Namibia while Malawi Red Cross Society appointed a senior health programmes manager to coordinate first aid programmes at national level. The Zimbabwe Red Cross Society recruited a new first aid training manager.

The Namibia Red Cross collaborated with its government in responding to a polio outbreak which recorded 300 cases. For more information about the operation, refer to the [interim final report](#) for DREF operation no. [MDRNA002](#).

Technical assistance was also given to Angola Red Cross in their continued response to cholera outbreak which started in February 2006. The total number of reported cases by end of October was 57,570 and 2,354 deaths. The Federation provided financial and technical support focusing on capacity building of Angola Red Cross, especially at provincial levels. A total of 260 volunteers in seven provinces including Huila, Uige, Kwanza Norte, Benguela, Luanda, Kwanza Sul and Malange were trained in social mobilization. The volunteers reached 10,253 households with health and hygiene education activities, distributed 22,374 information, education and communication (IEC) materials on cholera prevention and 19,771 litres of hypochlorite (for water purification). The established partnership with stakeholders particularly United Nations International Children's Fund (UNICEF) and the Ministry of Health has been strengthened through collaboration in planning and implementation. For more details concerning the operation refer to [Angola](#) country page on the Federation website.

The Federation participated in the Health Policy Formulation workshop in Malawi where the main programmes, as recommended by the [ARCHI 2010](#), were outlined. The Federation RD sourced more ARCHI toolkits and distributed to national society for use by volunteers during health education and promotion activities.

Focus in 2007

The Federation has been scaling up CBFA programme in the region in line with its Global Agenda Goal 1: *Reduce the number of deaths, injuries and impact from diseases*. The Federation RD priorities include improving local and regional capacity to respond to disasters in public health emergencies; scaling up actions with vulnerable communities in health promotion, disease prevention and DRR. A CBFA training of trainers (ToT) workshop will be conducted after the manual is published.



A Namibia Red Cross volunteer administers a polio vaccine during an immunization campaign.

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A regional cholera contingency plan has been developed and national societies will be assisted with response through resource mobilization and during response activities. The RD established a task force to tackle health emergencies in the region and deployment of technical staff, when national societies are overwhelmed.

[<Click here for the revised logframe>](#)

HIV and AIDS

The HIV and AIDS Consortium Appeal *was not seeking funding support* because it was fully funded by the Consortium donors namely Royal Netherlands Embassy (RNE), Swedish International Development Agency (SIDA)/Swedish Red Cross and Development Cooperation Ireland (DCI). 70% of the funding came from the RNE and for 2006; the funding was ending in June. The appeal got an extension from RNE to September 2006 to ensure that the national society and the Federation regional delegation activities are covered to the end of the year. SIDA funding goes up to 2007.

Cummulatively, the number of clients who have been provided with care and support within the programme has reached over 100,000. Although some of them have died, others have been weaned because of improved health. Over 250,000 OVC have been provided with educational, material, psychological and social support. Prevention activities have reached more than five million people including youths, soldiers, truck drivers, commercial sex workers and the general public.

Focus in 2007

The Southern Africa HIV and AIDS Consortium project which has been running since 2002 is closed. Its funds and activities have been transferred to new Southern Africa: Regional HIV and AIDS programme 2006 – 2010, (Appeal [MAA63003](#)) launched on 1 November 2006.

Water and Sanitation (WatSan)

Goal: The vulnerable population of southern Africa has greater access to water supply and sanitation

Objective: The capacity of Malawi, Mozambique, Zambia and Zimbabwe Red Cross societies to assess, design, resource, implement, monitor and evaluate water supply, sanitation and hygiene promotion projects in integrated health and care programmes is increased.

Progress

Federation supported long-term development water supply, sanitation and hygiene promotion projects were implemented in Malawi, Mozambique, Zambia and Zimbabwe. Zambia Red Cross Society is providing WatSan services to Congolese refugees in northern Zambia and Malawi Red Cross Society to multinational refugees (Congolese, Somali, Rwandans and Burundian) in Dzaleka and Luwani camps.

A disasters requiring WatSan intervention in the region during the reporting period were the floods in Mariental town of Namibia ([MDRNA001](#)), cholera in Angola and Zimbabwe, food insecurity in Malawi, Mozambique, Zambia and Zimbabwe. Activities implemented included drilling and rehabilitating of water-points (boreholes), installation of rain harvesting tanks in schools, latrine construction and small scale irrigation schemes for feeding OVC. The impact of these activities include improved clean water supply, enhanced livelihoods, reduced distance from water-points and that beneficiaries are living in dignity due to access to latrines. The NSs have trained WatSan technicians who are prepared to respond to public health emergencies. A WatSan delegate was recruited for six months, beginning October 2006, to support the Angola Red Cross in responding to the cholera outbreak.

WatSan software² officers responsible for the implementation of the community management and hygiene promotion aspects of the WatSan projects were recruited at the Federation RD, Malawi, Mozambique and Zambia Red Cross societies. This has helped improve hygiene and community management projects. The regional WatSan officer attended a Participatory Hygiene and Sanitation Transformation (PHAST) training of trainers (ToT) held in Malawi in September 2006. The training facilitated by East Africa RD delegation was used as part of orientation for the officer.

² Software refers to the planning stage of a project where needs of a community are identified, defined and capacities build in order to promote self-sustainability, ownership.

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The regional WatSan hardware officer attended an “Introduction Course for WatSan in development and emergencies” held in Madagascar. The main objective was to enhance new skills on water supply improvement techniques, equipment and water treatment at household levels. The skills acquired through this training will be used in training national society WatSan staff in the region. The officer also attended a one week WatSan Emergency Response Unit (ERU) training facilitated by the German Red Cross in Bonn, Germany. The officer will support in improving capacity of the region in WatSan disaster response.

There was increased coordination between WatSan projects and other health and care interventions. The long-term projects in Malawi, Mozambique and Zimbabwe were implemented in coordination with national societies HIV and AIDS projects. In Zambia, the long-term project is implemented in coordination with a Mission Hospital HBC operation. WatSan hygiene promotion volunteers are being trained and becoming active in health and HIV and AIDS awareness promotion in addition to hygiene.

The Federation RD WatSan emergency equipment and stocks (water supply pipes, tanks and water testing kits) was improved by new procurements. The procured relief stock enabled the Federation to swiftly and efficiently respond to WatSan emergencies in the region

Focus in 2007

The national societies still require Federation support in the long-term due to current scaling up of the WatSan projects which accessed funding from African, Caribbean and Pacific - European Union (ACP-EU) Water Facility. The requirement for WatSan interventions is high in Malawi, Mozambique, Namibia, Zambia and Zimbabwe. The NS of Angola, Botswana, Lesotho, Swaziland and the South Africa have the capacity to mobilize resources locally and implement the activities, integrated with other HIV and AIDS projects.

Coordination will continue to improve, while projects will be integrated with other health and care interventions. The newly recruited regional WatSan software officer will support the national societies in the implementation of community mobilization and hygiene promotion activities.

The progress on the projects has been very slow due to late disbursement of the ACP - EU Water Facility for funds Zambia and Zimbabwe. The funding for Zimbabwe is expected before end of 2006; hence most of the planned activities for 2006 will be implemented in 2007. Funds for Zambia are expected to be released by the end of 2006. The Baphalali Swaziland Red Cross Society received funds from the British Red Cross and Nestle which will be used until June 2007. The funds will support WatSan and hygiene promotion services to 20,000 beneficiaries. Malawi Red Cross Society received financial support from Irish Red Cross. The funds will support 10,000 beneficiaries up to October 2007. The Zimbabwe Red Cross Society has been using funds from the Swedish Red Cross to implement WatSan projects in Matobo, Mateleland, while the British Red Cross has been involved in latrine construction for OVC (6,154 beneficiaries) in the same districts.

The Federation submitted 11 multi-lateral bids to the ACP-EU Water Facility project and seven have been accepted for further evaluation. From Southern Africa, Malawi, Mozambique and Namibia bids have been accepted up to the 'concept' stage, for further evaluation: Mozambique (Nampula) with Finnish and Norwegian Red Cross; Malawi with Netherlands, Spanish, Danish and Irish Red Cross societies. With Zimbabwe and Zambia already approved, this is a 100% success for the southern Africa region.

[<Click here for the revised logframe>](#)

Disaster management

Goal: Reduced vulnerability to disasters of communities in the southern Africa region with the support of well prepared national societies.

Objective: the national society’s capacity in disaster management is strengthened through development of adequate human resources to design, implement and monitor disaster risk reduction projects based on community participation.

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Disaster preparedness: The Federation RD disaster management department continued to provide technical support and field reviews of food security interventions in Lesotho, Malawi, Mozambique, Namibia, Swaziland, Zambia and Zimbabwe. Lessons learned in implementing food security interventions were shared among all national societies. Some staff from Lesotho, Malawi and Mozambique visited the successful backyard garden project in Swaziland, while staff from Swaziland and Zimbabwe visited the various food security projects in Malawi. Backyard gardening is part of the Baphalali Swaziland Red Cross Society integrated approach to food security and HIV and AIDS programming, linked to the HBC project.

The Federation facilitated a food security and livelihoods training workshops for programme staff and volunteers in Lesotho and Zimbabwe. A total of 15 national society staff were trained on '*how to conduct a food security assessment*' in September 2006, with support from the Geneva Secretariat. The trained staff took part in the food security assessment in September and will continue to be used when needs arise.

Disaster response: The Federation improved disaster response capacity by supporting regional coordination of local disasters when NS capacities are overwhelmed. However, this reporting period is the "lean period for disasters" hence, only three national societies responded to minor emergencies. These were: Namibia Red Cross (polio outbreak where, 301 cases were confirmed); Baphalali Swaziland Red Cross Society (a storm damage that affected 2,000 households) and Lesotho Red Cross Society (a snowstorm trapped over 100 people in August). Technical support also continues for the cholera operation in Angola, which started in February 2006.

From July to October 2006, Namibia and Swaziland benefited from Federation Disaster Relief Emergency Fund (DREF) allocations. CHF 74,250 was allocated to Swaziland for a relief operation to assist vulnerable communities who were affected by storms. The Federation RD assisted by sending relief items in the form of 100 family tents and 400 tarpaulins from its warehouse to enable quick response. These items will be replenished through the DREF allocation.

In Namibia, CHF 50,000 was allocated. Volunteers and staff assisted in the immunization campaigns that took place in three phases over three months at immunization points, health centres. They also assisted in house-to-house vaccination. The polio immunization coverage reached at least 90% of the target population.

In response to a snowstorm, the Lesotho Red Cross Society provided basic needs in the form of temporary shelter, blankets, heating, food supplies and transportation after roads were reopened.

Community-based disaster management (CBDM): The implementation of the DRR programme has progressed significantly in Lesotho, Mozambique, Namibia and Zambia. Except for Mozambique which is still to submit its final VCA report. The results of the VCAs were used to realign the project plans during the review and planning meeting held in Lesotho from 12 to 16 June 2006. CBDM has been strengthened through community feedback meetings following the VCA process. This approach was well received by the communities who participated in the programme planning and management process. "Training for transformation" text books were distributed in June 2006 to all DRR project staff to assist in building their capacity on community-based participatory methodologies (CBPM). As part of the existing strategy for the emergency food security project, a number of livelihood activities were integrated into the DRR project, in areas where both projects were implemented in the same district.

In an effort to increase the national society human resource capacity, the DRR regional officer gave technical support to Mozambique during the DRR project induction training, held in Chimoio in June 2006. A total of ten officers participated in the workshop, aimed at empowering them on the DRR concepts and project management skills. Similar support was given to Namibia in conducting two basic DM courses, in July, which were run jointly with Namibia government's Disaster Management Authority with the support of the United Nations Development Programme (UNDP). A total of 80 participants from all the districts of the country participated. Further support was extended to Botswana Red Cross Society where the department facilitated the basic DM workshop for 44 staff and volunteers from 15 divisions of the NS. The training was to impart basic DM skills and to formulate national society's response teams. In Zambia, a total of 25 participants from programmes and volunteers were trained in a basic DM in August. These trainings enhanced the preparedness for response capacity of the national societies.

DM best practices: Namibia, Lesotho, Mozambique and Zambia Red Cross societies – supported by the DRR programme – identified possible case studies which will be documented for best practice. In Swaziland, the food security pilot project created successful backyard gardening projects and is currently being shared and replicated

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by other national societies in the region. A manual on setting the backyard gardens is under development. In Zambia, the best practice manual for SPHERE minimum standards at Mwange refugee camp has been documented. The development of a video and a summary hard copy will be finalized in the first quarter of 2007.

The regional DM meeting was held in July 2006. Its objective was to share information and finalize annual appeal disaster management plans for 2007 and draft programme updates. The second meeting is scheduled for December to review programme for the year 2006. The Disaster Management Coordinator (DMC) also participated in the regional RIASCO meetings in Johannesburg. The Federation also supported NS in establishing links and sharing information with relevant agencies such as the World Food Programme (WFP), National Aids Councils (NAC) and Ministry of Agriculture extension officers.

Contingency planning: Contingency planning is critical for the success of any community-based disaster reduction programme. The Federation guidelines of developing contingency plans were disseminated during the regional DM meeting in July 2006. The meeting was attended by nine of the national disaster management officers in the region and all the regional disaster management staff.

Due to the likelihood of cholera outbreaks in the region, the Federation planned to support six national societies in developing contingency plans. With the support of the health and care department, five regional technical officers visited Malawi, Mozambique, Swaziland, Zambia and Zimbabwe to support in the drafting of the contingency plans. For Angola, where cholera is still raging on, an in-country WatSan delegate assisted in developing the contingency plan.

Regional logistics: The Federation concentrated on increasing and improving logistics capacity in the region by providing technical support and capacity building to NS. The department standardized the regional logistics procedure and system to ensure compliance with the Federation systems.

The Federation managed to send emergency stocks to Namibia and Swaziland within 48 hours following the storm disasters. However, not all emergency stocks sent to NS have been replenished due to limited funding. The regional warehouse is expected to maintain non-food emergency stocks for 1,000 households. Furthermore, the purchase and preposition of emergency stocks for 500 families in five national societies has not yet been done. This lack of adequate emergency stocks hinders early disaster response. Regional logistics has improved relationships with the Government of Zimbabwe, which has resulted in an easier and quicker processing customs export documents during regional disasters. This has involved sharing information on the work of the Red Cross with relevant authorities.

In terms of capacity building, the regional logistics officer is conducting a mapping exercise to identify the logistics capacities for the ten national societies. In July 2006, the senior logistics officer conducted logistics management training for 16 Zambia Red Cross Society programme officers.

The department has supported all national societies in procurement of vehicles, computers, and emergency stock through the Federation framework agreements. Within the reporting period, 32 new vehicles were received from the Global Fleet Base as regional stock and for replacement of vehicles which have reached end of useful life. A new computer-based fleet wave system introduced to the Federation has seen an improvement in fleet management and has simplified the reporting.

Focus in 2007

Recommendations from the food security assessments conducted by the Federation reiterated the need for a longer-term approach to food security. This reinforced the Federation's position on developing longer-term strategies. In an endeavour to develop a Southern Africa regional food security strategy, guidelines were developed to assist NS in developing country-specific strategies, which would form the basis for the regional strategy. The Federation also developed a food security contingency plan in preparation for potential future drought situations in the region.

Following the end of the food security operation in September 2006, the livelihood interventions were absorbed by the Depart of International Development (DFID) funded DRR programmes in Lesotho, Mozambique, Namibia and Zambia. The NS are moving away from short-term (food aid) interventions to a more sustainable long-term food

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security approach. Federation technical support will be provided in capacity building and ensuring smooth implementation and integration into longer-term programme of the following projects;

- Lesotho: Backyard gardening;
- Malawi: Food-for-work, WatSan;
- Mozambique: Backyard gardening and WatSan;
- Namibia: Backyard gardening;
- Swaziland: Backyard gardening;
- Zambia: Cash distribution, livestock and agricultural starter packs distribution;
- Zimbabwe: HBC and OVC supplementary feeding, small-scale irrigation and WatSan.

DRR projects will continue in the four national societies with focus on developing community resilience to impact of disasters. The regional DM coordinator recruited in August 2006 will drive the Federation priority of '*scaling up actions with vulnerable communities in health promotion, disease prevention and DRR*'. In 2007, focus on preparedness will continue with emphasis on contingency planning. Community-based risk reduction (CBRR) approaches will be strengthened, which is important since most national societies face silent disasters such environmental degradation and drought. Concerted effort will be put in rolling out VCA as a key planning instrument in the context of community-based risk reduction.

Knowledge and experience sharing will be another area of focus, through documentation of best practices in DRR. The regional DM working group will meet as arranged to share experiences and plan for the following year. A regional Regional Disaster Response Team (RDRT) team is in existence and can be deployed in the region within 24-48 hours when required. A regional taskforce meets regularly to plan and review disaster responses. A standby roster for disaster response, comprising regional taskforce members and RDRT members, has been activated before disaster season starting from November. The RDRT training will be conducted in the first quarter of 2007.

[<Click here for the revised logframe>](#)

Humanitarian Values

Goal: The Movement Fundamental Principles and Humanitarian Values are known and respected across the region.

Objective: To improve the capacity of national societies in Southern Africa to generate a high degree of visibility, credibility and reduce stigma and discrimination among vulnerable communities.

Media tours: National societies in the regional have demonstrated a significant improvement in the management of information because of increased media attention. Namibia, Zimbabwe, Malawi, Mozambique and Zambia have carried out media tours with their local media prior to the regional media tour.

As a way to raise awareness on the impact of the humanitarian situation in southern, particularly HIV and AIDS, the regional delegation carried out a regional media tour. International media and PNSs communications teams toured different countries in the region. This includes Malawi (twice), Zambia, Namibia, Mozambique, Lesotho and Angola. Agence France Presse (AFP), Associated Press (AP), Voice of America (VoA), World Television, Swedish Radio, Svenska Dagbladet and local media in the respective countries participated in the tour. Several articles were issued by different media organizations. Although, there was competition with a number of major world events, the media tour managed to draw the attention of key target groups.

The information gathered during this period was also used in preparation for the World AIDS Day. A collaborative project with Integrated Regional Information Network (IRIN) was also conceived and is currently under implementation. An advocacy campaign on prevention of parent to child transmission (PPTCT) concept paper was developed and is currently being implemented.

Promotion of Fundamental Principles and Humanitarian Values: Through support of the International Committee of the Red Cross (ICRC), national societies continue to implement dissemination activities in their respective countries. This has helped to improve the understanding of the Red Cross in the region, especially those faced with political instability. A number of integrity issues against national societies arose during reporting period

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which could have affected the image of the Red Cross. An improved understanding of the Red Cross in the different countries contributed to the reduction of the damage caused by the media reports.

Advocacy: National societies were supported to develop locally appropriate campaigns to promote the reduction of stigma and discrimination, and advocate on behalf of PLHIV using key community leaders. Involvement of key community leaders ensures sustainability of projects.

Following the successful launch of the anti-retroviral therapy (ART) toolkit at regional level, the information department together with HIV and AIDS departments assisted in the promulgation of the tool kit at various community forums. Though there was funding for local launch of the tool kit, some national societies shared regional press release and other materials with their local media. The regional delegation developed a concept on the PPTCT campaign which will be implemented next year.

Coordination of information activities: The regional information office continues to work with all regional programmes as part of task forces. A documentary on application of Sphere standards in Mwanze refugee camp, Zambia was done together a printed version of the case study. Media coverage was organized for the launch of the Nestle water project in Mozambique. Though this was not part of the media tour, it helped to profile the involvement of corporate sector in humanitarian activities.

Focus in 2007

Information and promotion of Fundamental Principles and Humanitarian Values activities at NS level will continue to receive support from the ICRC. The Federation RD will focus on strengthening NS capacity in information gathering, writing stories and developing relations with media agencies. Through continued documentation of best practices from the region, visibility of Red Cross work will be increased at regional and international levels.

[<Click here for the revised logframe>](#)

Organizational development

Goal: Red Cross societies in southern Africa region have improved their performance and image by operating according to the principles of well-functioning NS aimed at assisting the most vulnerable communities.

Objective: NS have improved systems, structures, qualified and competent governing boards, staff and volunteers that operate within the confines of a well-functioning NS.

Governance and management development: The national societies of Botswana, Malawi, Mozambique, South Africa and Zimbabwe reviewed their constitutions during this last quarter. They have all been submitted to the Federation Joint Commission for consideration and comments. Lesotho and Swaziland Red Cross societies have also started their constitution review processes which will be finalized in the 2007. Reviewing of the constitutions will enable the national societies to effectively create and strengthen their governance structures and to provide quality services to vulnerable communities. South Africa, Angola, and Zambia have developed and adopted the eligibility criteria for governing board members and General Assembly rules of procedure as part of operationalizing their constitutions. These will assist in addressing the challenges that may arise from time to time.

The Angola Red Cross held its third General Assembly in October 2006. A new governing board was elected with a new female president as its head. The General Assembly adopted the new constitution and the strategic plan. Botswana, Lesotho and Zimbabwe Red Cross societies held their Annual General Assemblies in July, August and September respectively, but held no elections. In Botswana the meeting adopted both its revised constitution and revised strategic plan. Zimbabwe Red Cross society's National Executive Committee (NEC) presented the revised constitution before presenting to the Joint Commission.

Branch development: South Africa Red Cross was assisted in conducting an assessment, local governance training and ToT in local governance training for the Western Cape Province with challenges in governance end management relationship. This support will be extended to its five regions which currently has 29 branches and 77 local committees, to provide the foundation for a long-term OD programme towards becoming a well-functioning

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national society. Botswana and Zambia Red Cross societies trained the branch members in their roles and responsibilities and integration of new projects as support for OVC and the youth peer education.

Exchange visits at interregional level: The OD officer from the RD facilitated a decentralization meeting in Tanzania for the East African region in June. This was a follow up the study visit made by Kenya, Tanzania and Uganda Red Cross societies to the Southern Africa region, and to Zimbabwe Red Cross Society in particular. Branch development officers from Botswana, Zambia and Zimbabwe also attended the Local capacity building forum which was held in Kampala, Uganda from 28 to 31 August 2006. The forum is an annual event that connects the national societies of Uganda, Tanzania and Kenya through various HIV and AIDS activities and enables joint planning and review meetings as well as monitoring visits. Support comes through the Lake Victoria Project funded by the Swedish Red Cross.

In March 2006, the regional OD officer attended OD training for new delegates in Sweden. This was jointly hosted by Swedish and Norwegian Red Cross societies. One area that came out very strongly was that of supporting national society development through branch development and volunteer management.

Navision accounting software: With the assistance of a Microsoft consultant, the regional delegation managed to demonstrate the features of Navision accounting software to Lesotho, Mozambique and South Africa Red Cross societies. The aim was to demonstrate how the new Navision database structure will improve their current business processes, especially financial reporting. In Mozambique, the national society's auditors were present during the demonstration and they appreciated the system and gave support in the implementation of the Navision system. The regional finance delegate conducted monitoring visits to Mozambique, Namibia and Zimbabwe on progress made on the implementation of Navision accounting software and other financial management issues. The reports prepared during the follow up visits will be used as financial monitoring tool by the management.

Finance management development: The OD department facilitated exchange visits where the finance teams from Botswana and Lesotho visited Zimbabwe Red Cross society. The main objective was to share ideas and also to learn financial management structures and systems as well as establish a network with Zimbabwe Red Cross Society.

A finance management orientation workshop was held in July and September 2006 for the national society treasurers and auditors. The aims of the workshop were to:

- Understand and assess the challenges facing the treasurers in executing their constitutional mandate with their respective national societies;
- Determine how board members, particularly treasurers, can be in a better position to support their finance departments;
- Share the Federation financial management procedures with the participation particularly the Federation working advance and cash transfer systems and to draw the distinction between the two;
- Enable the treasurers to share ideas and experiences.

Financial manual review: Lesotho and Namibia Red Cross societies reviewed and updated their financial manuals in August and November 2006 respectively. The Federation RD is also supporting Botswana and South African Red Cross societies, technically and financially, to finalize the in financial manuals by end of 2006. Comprehensive annual reviews have been conducted for Botswana and Lesotho, assisted by the Federation RD.

External audits: Namibia, Swaziland, Zambia and Zimbabwe Red Cross societies completed their 2005 audits on schedule. The Mozambique Red Cross external audit was delayed due to the upgrade of their accounting system to accommodate activity codes. Angola has still not started the 2005 audit. South Africa Red Cross external audits were not completed on time due to the fact that the audit firm was changed and the handing over and completion of the audit took quite sometime. Lesotho received disclaimer, Botswana and Malawi were also delayed.

Cash transfer system: The regional finance development programme worked on MoUs and specific programme agreements between Namibia and Zimbabwe Red Cross societies and the Federation on the Cash Transfer System. The documents have already been signed and forwarded to the Africa Regional Finance Unit (RFU) for verification and validation and for onwards transmission to the Secretariat in Geneva – for necessary action to be taken.

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Planning and reporting: In September, the Federation hosted a project management workshop for nine WatSan officers in the region, in Malawi. The planning and reporting officer trained participants on project development, implementation, monitoring reporting and evaluation.

As part of improving the quality of reporting and in a bid to synchronise the reports, a reporting workshop was conducted in October 2006 for the national societies focal person for the DRR project. This led to improved quality of reports submitted for the period July – September 2006.

The Baphalali Swaziland Red Cross Society hosted a national planning meeting which was, attended by all Provisional secretaries, district officers and headquarters project managers. A three day, planning and reporting workshop was part of the national meeting, which was facilitated by the Federation. The national society team jointly developed reporting formats for the district, provincial and national levels. The sector also revised their 2007 logframe, taking into consideration new skills learned from the workshop.

A planning and reporting assistant was recruited in August following the increase in need to strengthen capacity in reporting. The officer and assistant attended a regional reporting network meeting held in Nairobi at the end of November 2007.

Monitoring and evaluation (M&E): M&E became operational in December 2005 following the recruitment of a regional M&E officer. The M&E officer:

- Sensitized staff at the regional delegation on the role and importance of M&E;
- Facilitated refinement of objectives and indicators for programme at regional level;
- Developed tools that have been used to review some programmes, in particular, real time evaluation, Food security impact assessment evaluation among others;
- Developed a draft policy framework and concept papers for the region.

The engagement of the M&E officer in programming issues as well as in capacity building has increased. This reflects the value that is being attached to the support unit.

Focus in 2007

The Federation Global Agenda provides a *framework for to align planning, prioritise programming and mobilize additional resources to deliver Strategy 2010*. The Federation RD focus in OD has been aligned to the Global Agenda by ensuring the existence of regional capacity in all areas of project development and management. The regional OD department has been transformed into a unified unit with the new elements of M&E and resource mobilization added to the reporting, information, finance development and OD. This has strengthened capacity building for national societies in institutional development.

The OD appeal is sufficiently covered in 2006. However, additional resources are required for 2007 earmarked for technical assistance to NSs. With new developments in the planning monitoring, evaluation and reporting (PMER) department at Geneva Secretariat, the RD will ensure replication at regional delegation towards strengthening performance management at all levels.

The Federation RD will also focus on induction of governance, starting with Angola and Swaziland. Support will be given to NSs to finalise their constitution and strategic development plans. Navision implementation will be done in Angola, Botswana, Lesotho Mozambique, South Africa and Swaziland. The Navision accounting software license and the necessary servers and computers will be purchased for Angola, Botswana, Lesotho, South Africa and Swaziland. The current network and hardware infrastructure, particularly in Lesotho and Mozambique, need to be analysed and improvements made to provide the correct and stabilized structures for the Navision system. There is the need to enhance the working capacity of the current finance staff of the national societies by giving them adequate training. The Federation RD plans to complete Navision Accounting software implementation by mid-2007.

[<Click here for the revised logframe>](#)

Implementation and coordination

Goal: The Federation coordination role is strengthened to effectively and efficiently improve service delivery to the vulnerable people in Southern Africa.

Objective: Southern Africa national societies achieve their humanitarian mandate through efficient frameworks of cooperation.

Coordination, cooperation and strategic partnerships

As part of supporting programme management development and team spirit within the regional delegation, the OD department funded two coordination meetings of June and September. The September coordination week had a new dimension added to it as it was a team building exercise, facilitated by two external consultants.

An update on the Pan African Coordination Team (PACT) work and the preparation of Pan African Conference (PAC) 2008 were given during the bi-annual South Africa Partnership for Red Cross Societies (SAPRCS) meeting. The ICRC gave an introduction to the Seville Agreement and the new supplementary measures, and also an update on ICRC regional priorities. The Federation presented the new Southern Africa HIV and AIDS programme to NS management, governance and PNSs. Reports from the HIV and AIDS scaling up committee was presented and new SAPRCS working groups were debated (disaster management, health and care, HIV and AIDS, OD and capacity building, information and communication, finance development and resources mobilization, human resources and volunteer management. The SAPRCS constitution was revised and amended. PNSs presented the outcomes of their meeting held in November. The outgoing SAPRCS chairperson reported on the progress of the New Partnership for African Red Cross and Red Crescent Societies (NEPARC).

A consultative meeting was held on 31 October in Johannesburg on the Southern Africa HIV and AIDS programme to discuss the way forward and the performance tracking system. The meeting facilitated by the special representative to Secretary General on HIV and AIDS was attended by PNSs namely British, Danish, Hellenic, Japanese and Swedish Red Cross and Federation staff.

The Federation RD strengthening the Operational Alliance framework by encouraging strategic partnerships at both regional and NS levels. The Botswana Red Cross Society hosted a Norwegian Red Cross technical team in October 2006, accompanied by the regional representative of the Danish Red Cross. The mission was to consider including Botswana in its Africa scale up initiative. The meeting marked the start of a long-term partnership between Botswana Red Cross Society and the two PNSs with a focus on development and capacity building based on some requirements such as functional governance, management structures and systems. Service agreements are being negotiated between the regional delegation and the Japanese and the Malawi Red Cross Society, Mozambique, South African and American Red Cross societies. Partnership meetings were held in November for the region, and were well attended by PNSs, Federation and ICRC.

The Federation RD hosted the Swedish Red Cross technical team which visited the region to assess how the Swedish financial support has contributed to the development of national societies. The team also visited Zambia Red Cross Society where they are supporting most of the programmes. Funding for the regional OD in general has been above average for the regional appeal but for the NS, has been almost 1% of all the OD appeal. It should also be noted that the bilateral contribution being given to the NS are mainly one-off support of very minimum amounts which do not sustain programming. Therefore national societies were supported technical through the Federation funded appeal.

The Federation representatives in the region continued to provide advice, services, coaching and mentoring to national society management and governance. Close cooperation has been further strengthened between the national societies and RD management through regular contact and meetings. Technical support from the regional delegation was received, especially in relation to the financial management and local governance training.

Guidance and technical support was provided to Malawi Red Cross Society in implementing the malaria programme in Mwanza and Chiradzulu districts. A meeting was held between the regional Finnish Red Cross representative and the Federation RD to map the way forward.

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Preparations for the 7th Pan African Conference (PAC) 2008 continued through internal and formal planning meetings with the government of South Africa. The Federation head of Africa department was accompanied by the HoRD to view the proposed venue for PAC, the Sandton Convention Centre in Johannesburg.

International representation and advocacy

The new French Embassy first Secretary paid a courtesy call to the RD on 17 October 2006, and met with the head of regional delegation (HoRD). There was a meeting between Netherlands Red Cross and Royal Netherlands Embassy (RNE) to discuss possible collaboration in line with the new HIV and AIDS appeal on 24 October.

In light of increasing visibility and mobilizing resources for HIV and AIDS programme, the Federation RD is fostering partnerships. A meeting with the director of UN Office for Coordination of Humanitarian Affairs (OCHA), IRIN was held on 18 October 2006 to discuss the development of an advocacy campaign strategy targeting OVC. It was agreed that the contract would run from 1 November 2006 to 28 February 2007, using RNE funds and would consist of print, film, radio and photographic books.

The ART resource mobilization delegate was in South Africa from 10 to 16 October, attending the Inaugural meeting of the regional Inter-Agency Task Team on children affected by AIDS (RIATT) and the Southern Africa Partnership Forum meeting. The delegate also attended the RIACSO advocacy audit and meeting on 20 October 2006.

International disaster response

The DN department promoted the use of international disaster response tools and procedures – Emergency Response Unit (ERU), Field Assessment Coordination Team (FACT), Regional Disaster Response Training (RDRT), DREF, Disaster Management Information System (DMIS), and FedNet – by all national societies. These tools were highlighted and explained at the various training workshops and DM meetings.

Federation governance support

The Federation RD facilitated the travel costs of four board members from Malawi, Mozambique, Zambia and Zimbabwe, as well as Southern Africa Pan African Coordination Team (PACT) chairperson to attend the Angola Red Cross General Assembly. The process enhanced peer moral and technical support from the NSs. The Federation supports the president of South African Red Cross regarding preparations for the board meeting, regional meetings and other conferences attended, in the capacity as the African representative in the Federation governing board.

Management of the delegation

Recruitment: The provision of the five month RNE OVC projects resulted in recruitments for the following positions: project coordinator, finance assistant, logistics delegate and planning and reporting assistant. Health and care coordinator and grant manager's position have been opened. WatSan delegates for Angola and Zimbabwe were recruited. Positions to be opened include trainee finance development delegate, HIV and AIDS coordinator as well as branch development delegate for South Africa.

Compensation and benefits: The delegation approved payment of medical aid for adult dependants to all local staff (previously it was the employee only who was covered). Local staff members were also registered on the chronic disease facility under the CIMAS Medical AID facility. This has resulted in high morale among staff as it cushions them against the high medical bills they pay for their dependants. Due to hyper inflation conditions in Zimbabwe, the RD continues to pay cost of living adjustment to staff every month.

Staff training and development: A team building exercise was organized for delegation staff in mid-September this provided an opportunity for all staff to learn to work together. In early November, three negotiations skills courses were conducted for national society presidents, secretaries general, PNS representatives and senior delegation staff. The human resources (HR) managers for Mozambique and Zimbabwe Red Cross societies attended the annual HR meeting in Geneva in early September.

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The recruitment of a human resources assistant at the end of 2005 has resulted in the streamlining of activities in the department with the assistant focusing on the administrative aspects and the manager focusing on policy issues, liaising with Geneva HR department and support to national societies.

Finance management: Finance department is providing ongoing support to national societies by conducting various finance training workshops. The department is monitoring dormant working advances in the NS as high levels of outstanding working advances not only represent a financial risk to the organization, but if allowed to remain dormant they jeopardise the ability to close projects and appeals on time. Delays in working advances adversely affect financial reporting. It has been communicated to all national societies that no new working advances will be issued until all old balances have been cleared.

Devaluation of local currency and hyper-inflation: Due to the high inflation rates in Zimbabwe, the official Zimbabwe Dollar exchange rate to the US Dollar has fallen by more than 861% during the year ending 30 September 2006. The Zimbabwe government has introduced a number of legislative controls over foreign exchange transactions.

The above situation creates a number of specific financial risks for the Federation t Southern Africa regional delegation operations in Zimbabwe, notably:

- Exposure to government restrictions on the holding and use of foreign currency in Zimbabwe.
- Exposure to foreign exchange losses on devaluing asset balances held in Zimbabwe Dollars. This affects working advances, notably to Zimbabwe Red Cross Society; as well as bank and cash balances.

Slow Internet connectivity: The Finance department has been experiencing slow internet connectivity which has affected most of the web-based systems that they use.

Focus in 2007

Effective provision of an adequate comprehensive staff compensation package is hindered by the challenging high inflationary economy in Zimbabwe. However, the RD endeavours to come up with options to ensure that staffs are not disadvantaged.

The Federation RD finance department plans to reduce dormant working advances to zero through implementing the following:

- Obtaining formal written acceptance signed by the secretaries general with outstanding working advances, in confirmation of all working advance balances owed to the Federation Secretariat.
- Implementing a plan of action with deadlines accepted by NS to clear their old outstanding working advance balances.

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[Revised budget and interim financial report below;](#)
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MAA63001
SOUTH AFRICA

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	Emergency	Total
	CHF	CHF	CHF	CHF	CHF	CHF	CHF
Shelter	4,500	406,222	0	0	0	0	410,722
Construction	0	0	0	0	0	0	0
Clothing & Textiles	37,820	50,310	0	46,729	0	0	134,859
Food	0	0	0	89,719	0	0	89,719
Seeds & Plants	0	42,067	0	158,000	0	0	200,067
Water & Sanitation	414,309	18,500	0	15,000	0	0	447,809
Medical & First Aid	144,500	0	0	55,000	0	0	199,500
Teaching Materials	18,250	0	0	15,615	0	0	33,865
Utensils & tools	0	56,500	0	0	0	0	56,500
Other Supplies & Services	4,600	3,000	0	102,600	0	0	110,200
SUPPLIES	623,979	576,599	0	482,663	0	0	1,683,241
Land & Buildings	0	0	0	10,000	0	0	10,000
Vehicles	140,216	0	0	86,923	0	0	227,139
Computers & Telecom	47,048	6,600	0	10,000	0	0	63,648
Medical equipment	0	0	0	0	0	0	0
Other Equipment	0	0	0	30,654	0	0	30,654
LAND, VEHICLES & EQUIPMEN	187,264	6,600	0	137,577	0	0	331,441
Storage	7,200	10,300	0	0	900	0	18,400
Distribution & Monitoring	0	0	0	0	0	0	0
Transport & Vehicles cost	47,786	28,390	0	107,749	23,220	0	207,144
TRANSPORT & STORAGE	54,986	38,690	0	107,749	24,120	0	225,544
International Staff	444,520	144,000	0	365,926	276,900	0	1,231,345
Regionally Deployed Staff	46,440	0	0	0	0	0	46,440
National staff	79,920	218,680	0	55,920	224,700	0	579,220
National Society Staff	165,707	22,500	0	393,396	0	0	581,602
Consultants	3,000	0	0	66,542	0	0	69,542
PERSONNEL	739,587	385,180	0	881,784	501,600	0	2,508,150
Workshops & Training	344,163	297,000	0	1,050,893	1,800	0	1,693,856
WORKSHOPS & TRAINING	344,163	297,000	0	1,050,893	1,800	0	1,693,856
Travel & related expenses	87,214	170,295	0	225,246	46,890	0	529,645
Information & Public Rela	15,465	56,640	0	115,011	1,450	0	188,566
Office Running Costs	26,892	17,271	0	55,087	136,320	0	235,570
Communication Costs	24,890	2,120	0	25,536	100,560	0	153,106
Professional Fees	8,000	0	0	0	75,200	0	83,200
Other General Expenses	84,448	77,843	0	92,615	-458,202	0	-203,295
GENERAL EXPENDITURE	246,909	324,169	0	513,495	-97,782	0	986,791
Asset Depreciation	0	0	0	0	0	0	0
DEPRECIATION	0	0	0	0	0	0	0
Contributions & Transfers	0	0	0	0	0	0	0
CONTRIBUTIONS & TRANSFERS	0	0	0	0	0	0	0
Programme Support	152,725	113,193	0	220,664	29,875	0	516,456
PROGRAMME SUPPORT	152,725	113,193	0	220,664	29,875	0	516,456
	2,349,613	1,741,431	0	3,394,825	459,613	0	7,945,482

MAA63001
SOUTH AFRICA

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	Emergency	Total
	CHF	CHF	CHF	CHF	CHF	CHF	CHF
Shelter	0	160,880	0	0	0	0	160,880
Construction	0	0	0	0	0	0	0
Clothing & Textiles	50,000	19,350	0	0	0	0	69,350
Food	0	0	0	0	0	0	0
Seeds & Plants	0	38,712	0	227,800	0	0	266,512
Water & Sanitation	324,100	17,849	0	13,000	0	0	354,948
Medical & First Aid	65,000	0	0	57,500	0	0	122,500
Teaching Materials	8,500	0	0	15,615	0	0	24,115
Utensils & tools	0	32,000	0	0	0	0	32,000
Other Supplies & Services	16,100	1,000	0	126,970	0	0	144,070
SUPPLIES	463,700	269,791	0	440,885	0	0	1,174,375
Land & Buildings	0	0	0	15,000	0	0	15,000
Vehicles	0	0	0	0	0	0	0
Computers & Telecom	33,095	2,783	0	15,825	0	0	51,703
Medical equipment	0	0	0	0	0	0	0
Other Equipment	0	0	0	0	0	0	0
LAND, VEHICLES & EQUIPMEN	33,095	2,783	0	30,825	0	0	66,703
Storage	9,400	10,300	0	0	1,020	0	20,720
Distribution & Monitoring	0	0	0	0	0	0	0
Transport & Vehicles cost	266,589	46,697	0	87,390	25,500	0	426,176
TRANSPORT & STORAGE	275,989	56,997	0	87,390	26,520	0	446,896
International Staff	583,138	182,604	0	665,584	338,760	0	1,770,086
Regionally Deployed Staff	0	0	0	68,400	0	0	68,400
National staff	88,452	305,176	0	90,864	182,876	0	667,368
National Society Staff	232,915	0	0	156,000	0	0	388,915
Consultants	3,000	0	0	92,896	0	0	95,896
PERSONNEL	907,505	487,780	0	1,073,744	521,636	0	2,990,665
Workshops & Training	121,500	342,098	0	717,817	2,000	0	1,183,415
WORKSHOPS & TRAINING	121,500	342,098	0	717,817	2,000	0	1,183,415
Travel & related expenses	93,813	106,790	0	278,768	58,150	0	537,521
Information & Public Rela	18,541	38,680	0	27,960	1,450	0	86,631
Office Running Costs	54,152	15,668	0	75,714	143,920	0	289,454
Communication Costs	30,336	11,720	0	9,600	105,960	0	157,616
Professional Fees	4,558	0	0	0	75,400	0	79,958
Other General Expenses	76,744	67,946	0	101,387	-496,355	0	-250,277
GENERAL EXPENDITURE	278,144	240,804	0	493,429	-111,475	0	900,902
Asset Depreciation	0	0	0	0	0	0	0
DEPRECIATION	0	0	0	0	0	0	0
Contributions & Transfers	0	0	0	0	0	0	0
CONTRIBUTIONS & TRANSFERS	0	0	0	0	0	0	0
Programme Support	144,594	97,344	0	197,718	30,497	0	470,152
PROGRAMME SUPPORT	144,594	97,344	0	197,718	30,497	0	470,152
	2,224,527	1,497,597	0	3,041,808	469,178	0	7,233,109

International Federation of Red Cross and Red Crescent Societies

MAA63001 - SOUTHERN AFRICA

Interim financial report

Selected Parameters	
Reporting Timeframe	2006/1-2006/10
Budget Timeframe	2006/1-2007/12
Appeal	MAA63001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
A. Budget	4'574'140	3'239'028		6'436'634	928'790	15'178'592
B. Opening Balance	559'308	272'416		384'987	379'326	1'596'037
Income						
Cash contributions						
British Red Cross	9'120	2'015				11'135
Capacity Building Fund				30'000		30'000
Danish Red Cross		0		25'000		25'000
Finnish Red Cross	11'046	96'781		264'855		372'683
German Red Cross	9'468					9'468
Icelandic Red Cross	10'000				53'031	63'031
Japanese Red Cross Society	159'258					159'258
New York Office				518		518
Norwegian Red Cross				107'572		107'572
Spanish Red Cross				9'354		9'354
Swedish Red Cross	943'802	168'036		567'099		1'678'936
C1. Cash contributions	1'142'694	266'832		1'004'398	53'031	2'466'955
Outstanding pledges (Revalued)						
British Red Cross		910'970				910'970
Capacity Building Fund				30'000		30'000
Finnish Red Cross				37'920		37'920
Spanish Red Cross				-9'339		-9'339
Swedish Red Cross	26'100			28'232		54'332
C2. Outstanding pledges (Revalued)	26'100	910'970		86'813		1'023'883
Reallocations (within appeal or from/to another appeal)						
Finnish Red Cross		-81'501		81'501		0
C3. Reallocations (within appeal)		-81'501		81'501		0
Inkind Personnel						
British Red Cross		43'400				43'400
Finnish Red Cross				85'000		85'000
Icelandic Red Cross					62'000	62'000
Norwegian Red Cross				62'000		62'000
C5. Inkind Personnel		43'400		147'000	62'000	252'400
Other Income						
Miscellaneous Income	12				27'648	27'660
Service Agreements					16'920	16'920
C6. Other Income	12				44'568	44'580
C. Total Income = SUM(C1..C6)	1'168'806	1'139'701		1'319'712	159'599	3'787'818
D. Total Funding = B + C	1'728'114	1'412'117		1'704'699	538'925	5'383'855

II. Balance of Funds

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
B. Opening Balance	559'308	272'416		384'987	379'326	1'596'037
C. Income	1'168'806	1'139'701		1'319'712	159'599	3'787'818
E. Expenditure	-900'994	-512'517		-1'007'811	-521'028	-2'942'350
F. Closing Balance = (B + C + E)	827'121	899'599		696'888	17'898	2'441'506

International Federation of Red Cross and Red Crescent Societies

MAA63001 - SOUTHERN AFRICA

Interim financial report

Selected Parameters	
Reporting Timeframe	2006/1-2006/10
Budget Timeframe	2006/1-2007/12
Appeal	MAA63001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation		
A		B					A - B	
BUDGET (C)		4'574'140	3'239'028		6'436'634	928'790	15'178'592	
Supplies								
Shelter - Relief	571'602							571'602
Construction Materials		2'741	10'276		14'414		27'431	-27'431
Clothing & textiles	204'209							204'209
Food	89'719		117				117	89'602
Seeds,Plants	466'579		20'078				20'078	446'501
Water & Sanitation	802'758	53'798	16				53'814	748'943
Medical & First Aid	322'000	138					138	321'863
Teaching Materials	57'980							57'980
Utensils & Tools	88'500				1'626		1'626	86'874
Other Supplies & Services	254'270		213		10'745		10'958	243'312
Total Supplies	2'857'617	56'676	30'700		26'785		114'161	2'743'455
Land, vehicles & equipment								
Land & Buildings	25'000							25'000
Vehicles	227'139	55'373					55'373	171'767
Computers & Telecom	94'463	9'091	13'433		4'492	835	27'852	66'611
Office/Household Furniture & Ec	20'888	1'158	1'121		10'323		12'603	8'285
Others Machinery & Equipment	30'654							30'654
Total Land, vehicles & equipment	398'145	65'622	14'554		14'816	835	95'827	302'318
Transport & Storage								
Storage	39'120	3'446	7'319			5'924	16'689	22'431
Distribution & Monitoring			6'184		677	1'875	8'735	-8'735
Transport & Vehicle Costs	633'321	24'011	22'036		36'781	23'218	106'046	527'275
Total Transport & Storage	672'441	27'458	35'539		37'457	31'016	131'471	540'970
Personnel Expenditures								
Delegates Payroll	2'013'594	142'839	15'652		38'166	72'851	269'507	1'744'087
Delegate Benefits	987'838	70'091	70'233		255'689	110'007	506'019	481'819
Regionally Deployed Staff	114'840		2'524				2'524	112'316
National Staff	1'246'588	31'408	72'185		53'193	113'027	269'812	976'776
National Society Staff	970'518	45'095	91'790		6'070		142'955	827'563
Consultants	165'438				61'854	67'800	129'653	35'785
Total Personnel Expenditures	5'498'816	289'433	252'383		414'971	363'684	1'320'471	4'178'345
Workshops & Training								
Workshops & Training	2'877'272	105'151	66'651		87'533	3'705	263'039	2'614'233
Total Workshops & Training	2'877'272	105'151	66'651		87'533	3'705	263'039	2'614'233
General Expenditure								
Travel	1'067'166	152'818	109'525		105'922	42'522	410'787	656'379
Information & Public Relation	275'197	19'980	647		18'277	502	39'406	235'791
Office Costs	525'024	32'391	15'862		7'569	87'572	143'394	381'630
Communications	310'722	-2'300	2'842		20'083	73'086	93'710	217'012
Professional Fees	163'158		614		24'900	27'016	52'530	110'628
Financial Charges	63'196	6'786	176'569		41'838	173'861	399'054	-335'858
Other General Expenses	-516'770	51'207	37'836		17'941	-316'182	-209'198	-307'572
Total General Expenditure	1'887'694	260'881	343'894		236'530	88'377	929'683	958'011
Federation Contributions & Transfers								
Cash Transfers National Societi			1'299				1'299	-1'299
Total Federation Contributions & Transfers			1'299				1'299	-1'299
Program Support								
Program Support	986'608	58'565	33'130		64'887	33'605	190'186	796'422
Total Program Support	986'608	58'565	33'130		64'887	33'605	190'186	796'422
Operational Provisions								

International Federation of Red Cross and Red Crescent Societies

MAA63001 - SOUTHERN AFRICA

Interim financial report

Selected Parameters	
Reporting Timeframe	2006/1-2006/10
Budget Timeframe	2006/1-2007/12
Appeal	MAA63001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation		
A							B	A - B
BUDGET (C)		4'574'140	3'239'028		6'436'634	928'790	15'178'592	
Operational Provisions		37'207	-265'633		124'833	-194	-103'788	103'788
Total Operational Provisions		37'207	-265'633		124'833	-194	-103'788	103'788
TOTAL EXPENDITURE (D)	15'178'592	900'994	512'517		1'007'811	521'028	2'942'350	12'236'242
VARIANCE (C - D)		3'673'146	2'726'510		5'428'823	407'762	12'236'242	