

Report 2006-2007



International Federation
of Red Cross and Red Crescent Societies

East Africa Sub Regional Programmes

Appeal No. MAA64003

4 April 2008

This report covers the period of 01/01/2006 to 31/12/2007 of a two-year planning and appeal process.



Burundi Red Cross volunteers distributing non-food items to returnees.

In brief

Programme summary: During the 2006-2007 appeal period, the East Africa sub-regional programmes appeal was revised twice in 2006 to include a construction project in the Rwanda Red Cross' (RRC) organizational development programme and an anti retroviral treatment (ART) component in the HIV and AIDS programme of the Kenya Red Cross Society (KRCS). In 2007, the appeal was further revised to include meningitis preparedness and response programme in Kenya and Uganda as well as to include a disaster early warning and preparedness programme in Tanzania. The revisions increased the original appeal budget from CHF 7,053,850 to CHF 8,013,273.

All the five National Societies put immense work towards achieving their programme goals and objectives. The initiative to decentralize took prominence in all the five National Societies in the sub-Zone (Burundi, Kenya, Rwanda, Tanzania and Uganda). Through the support of Partner National Societies (PNS) and the International Federation, the National Societies made commendable progress towards the decentralization process. To ensure success of the decentralization process, new management staff were recruited and trained, volunteer and membership base at provincial and branch levels was increased and the infrastructure of the decentralized system was improved.

Technical support in the implementation of the Lake Victoria Programme and 'mobilizing local capacity' pilot project in Burundi was provided during the appeal period. Notably, the National Society's disaster management capacities have been strengthened through relevant trainings, peer support visits and exchange of skills and knowledge to address the most urgent situations of vulnerability.

Needs: Total 2006-2007 budget CHF 8,013,273 (USD 7,631,689 or EUR 5,008,296), out of which 43 per cent is covered.

[Click the links below to go directly to the financial reports:](#)

[Report 2006](#)

[Report 2007](#)

[Report 2006-2007](#)

For more detailed information on 2006-7 activities, please refer to:

Programme Update no. 1: <http://www.ifrc.org/docs/appeals/annual06/MAA6400301.pdf>

Programme Update no. 2: <http://www.ifrc.org/docs/appeals/annual06/MAA6400302.pdf>

Programme Update no. 3: <http://www.ifrc.org/docs/appeals/annual06/MAA6400303.pdf>

Report 2006-2007 (2006): <http://www.ifrc.org/docs/appeals/annual06/MAA64003ar06.pdf>

Programme Update no. 4: <http://www.ifrc.org/docs/appeals/annual06/MAA6400304.pdf>

Related Emergency Appeals.

- **Burundi:** Humanitarian assistance to returnees and vulnerable groups [MDRBI001](#)
- **Kenya:** Drought [MDRKE001](#) and Floods: [MDRKE003](#)
- **Rwanda:** Humanitarian assistance to returnees and host communities: [MDRRW002](#)
- **Tanzania:** Floods: [MDRTZ005](#)
- **Uganda:** Floods : [MDRUG006](#)

People we help:

Country	Programme/operation	Number of beneficiaries reached
Burundi	Organizational development	<ul style="list-style-type: none"> • 17 provincial committees trained in leadership development and governance. • 17 provincial coordinators and 15 headquarters staff reached through job orientation and skills enhancement seminars. • Over 3,500 community members assisted by the 142 Red Cross units.
Kenya	Health and care	<ul style="list-style-type: none"> • Over 800 clients including orphans and vulnerable children (OVC) assisted through the home-based care component of the programme. • Over 12,000 community members reached through information education and communication (IEC) sessions. • Over 900 community health workers (CHW), people living with HIV (PLHIV) and Ministry of Health (MoH) staff trained.
	Organizational development	<ul style="list-style-type: none"> • Five regional committees benefited from leadership development trainings. • Job orientations for regional staff. • Disaster response trainings for over 400 volunteers.
Rwanda	Health and care	<ul style="list-style-type: none"> • 900 RRC volunteers were equipped with sanitary platform fabrication. • Over 6,500 people assisted through provision of sanitary platforms, construction of pit latrines and cleaning of water sources. • Over 15,000 people reached with malaria prevention messages and benefited from distributions of long lasting insecticide-treated bed nets (LLITNs).
	Disaster management	<ul style="list-style-type: none"> • 150 volunteers trained in camp management and safer access. • Over 5,000 community members reached through educational sessions on disaster risk preparedness and response. • 60 primary schools reached with road safety

	Organizational development	<p>messages.</p> <ul style="list-style-type: none"> • 30 district committees reached through National Society orientation seminars. • Five provincial committees exposed to branch leadership development training. • Eight assistant regional coordinators taken through on the job orientation.
Tanzania	Organizational development	<ul style="list-style-type: none"> • 10 new board members oriented.
Uganda	Organizational development	<ul style="list-style-type: none"> • 17 branches reached through supervisory and coaching visits.

Our partners:

Partner	Programme/Project	Country
International Committee of the Red Cross (ICRC)	Fundamental Principles and Humanitarian Values, disaster preparedness and disaster response in conflict-affected communities.	Burundi, Kenya, Rwanda, Tanzania and Uganda.
American Red Cross	Health and capacity building	Kenya, Uganda and Tanzania.
German Red Cross.	Health, capacity building, disaster management and social services.	Burundi, Kenya, Uganda Tanzania and Rwanda
Norwegian Red Cross	Health, capacity building and organizational development.	Kenya, Rwanda and Uganda.
Spanish Red Cross.	Health, capacity building and disaster management	Burundi, Kenya, Rwanda and Tanzania.
Swedish Red Cross	Disaster management, health, organizational development and capacity building.	Burundi, Kenya, Rwanda, Tanzania and Uganda.
Swiss Red Cross	HIV and AIDS (anti retroviral treatment)	Kenya.
Singapore Red Cross	Capacity building.	Rwanda
United Nations High Commission for Refugees (UNHCR)	Population movement and emergency operations.	Burundi.
World Food Programme (WFP)	Population movement and emergency operations	Burundi.
CARE Canada	Health-related activities in refugee camps.	Tanzania
Spanish Red Cross	Health-related activities in refugee camps.	Tanzania.
Finnish Red Cross	Health and organizational development	Burundi
Finnish Red Cross	Organizational development	Rwanda
British Red Cross	Health and organizational development	Rwanda
Pathfinder International	HIV and AIDS intervention targeting the youth	Tanzania.
The UN Office for the Coordination of Humanitarian Affairs (OCHA)	Disaster preparedness	Tanzania.
DFID	Disaster management	Burundi and Rwanda

Current context

At the end of 2005 and into 2006, a severe drought was experienced in the larger Eastern Africa region. Four National Societies in the sub-Zone, namely Kenya, Burundi, Rwanda and Tanzania

were affected by the drought with Kenya and Burundi being hardest hit, while Rwanda and Tanzania suffered to a lesser extent. Emergency drought appeals were subsequently launched in Kenya, Rwanda and Tanzania. Within the same year, unusually heavy rains resulted in floods, which assumed a similar pattern of severity in the same four countries leading to launch of an appeal for a floods response operation in Kenya. In 2007, similar appeals were launched in Tanzania and Uganda. Minor emergency floods operation appeals were also launched in Burundi and Rwanda in 2007. All five National societies were largely involved in these emergency operations alongside implementation of other long-term development programmes

Following successful peace talks in Burundi and the instalment of a newly elected government, there was a mass influx of Burundian and Rwandan refugees from Tanzania. Tanzanian authorities expelled refugees who had settled in the country without regularizing their status. In response to the massive population movement into Burundi and Rwanda, population movement emergency appeals were launched in the two countries.

All five National Societies were also involved in minor emergency responses for outbreaks of cholera, malaria, measles, meningitis and Ebola. Kenya and Tanzania were also on high alert for outbreaks of bird flu and Rift Valley Fever.

Progress towards objectives

BURUNDI

Organizational Development

Goal: To continue to build and consolidate leadership, management and operational capacity to enable the National Society to fulfil its mission of reducing vulnerability within communities and thus effectively and efficiently play its dutiful role as an auxiliary to public authorities.

Objective 1: To develop a strategic plan for the National Society to chart out a strategic direction for the period 2006-2009 and, based on the plan, to develop a Cooperation Agreement Strategy.

Objective 2: To equip the leadership at all levels with the prerequisite tools (knowledge and skills) to enable them to execute their duties and responsibilities efficiently and effectively.

Objective 3: To establish a full compliment of management and coordination staff at the National Society Headquarters and at operational level (Provincial/Branch) respectively.

Objective 4: To provide management and coordination staff at both the headquarters and operational levels with tools (policy guidelines, knowledge and skills to enable to execute their responsibilities efficiently and effectively.

Objective 5: To maintain and/or increase the momentum generated in mobilizing communities through Local and Provincial committees to ensure Branch growth, development and performance.

Achievements

Burundi Red Cross Society (BRCS) developed its strategic plan for the period 2007-2009, which was adopted at the end of 2006. A Cooperation Agreement Strategy (CAS) was also developed based on this strategic plan.

During the appeal period, 129 communal committees and 258 zonal committees were established in a bid to decentralize management and governance functions as well as ensuring that services are available closer to the most vulnerable persons.

Leadership development and induction courses were conducted for provincial and local committees to equip them necessary skills and tools for good leadership and management of the committees which in turn resulted in effective and efficient service delivery.

All 17 provinces in Burundi now have a volunteer focal point and, the newly recruited focal points in Cibitoke, Makamba, Muramvya and Ruyigi provincial branches were taken through an orientation training together with provincial and local coordinators involved in a pilot project, "Mobilizing the Local Capacity in Africa" in the pilot provincial branches of Karusi and Ruyigi.

A total of 142 Red Cross service delivery units were established in seven BRCS branches with over 50 volunteers in each unit who deliver services every week to the most vulnerable in the community. Recruitment of heads of departments at the headquarters and departmental assistants was completed.

Quarterly planning and coordination meetings to review and plan programme implementation were held regularly. The outcome of these meetings was used as a guide to inform the strategic directions of the programmes. Three partnership meetings were held during the reporting period to foster cooperation and collaboration in programme implementation among the BRCS partners.

Two National Society staff members have attained useful exposure in trainings and forums such as the organizational development training organized by Swedish Red Cross in February 2007 in Sweden and a communications forum organized by the Federation in Nairobi. The respective staff members have embarked on adopting the best practices learned from these exposure visits and trainings thus improving the performance of their respective departments.

Seven out of 17 provincial branches have updated their membership and volunteer lists and developed a database through joint efforts between the headquarters and the provincial focal persons/secretaries. As a result the National Society is able to effectively manage their volunteers and members and even and even strategise on further recruitments as well as retention of its existing members and volunteers.

Challenges or Constraints:

The National Society is faced with the challenge of ensuring proper coordination and financial support of the 142 Red Cross service delivery units set up in its seven branches. This is largely due to limited number of staff in the provinces as well financial sustainability of the red cross units.

KENYA

Health and Care

Goal: To establish the National Society as a leader in community-based HIV and AIDS interventions by consolidating and scaling up ongoing activities in accordance with ARCHI 2010 and the Algiers Plan of Action.

Objective: To reduce the prevalence and impact of HIV and AIDS through information, education and communication (IEC) activities targeting vulnerable groups and improve the lives of people living with HIV (PLHIV) through psychosocial support and support in access to treatment.

Achievements

The Kenya Red Cross Society (KRCS) supported the Molo Sub-District Hospital to provide treatment to and closely monitor PLHIV by upgrading the hospital pharmacy through restocking and assisting in dispensation, procuring a CD4 machine and supplying laboratory reagents and

medicines at subsidized prices, thereby scaling up of the access-to-treatment programme. Two KRCS staff were supported to attend an anti-retroviral treatment (ART) training of trainers (ToTs) course in Zimbabwe in 2006 and in turn trained 29 community health workers (CHWs) from a number of KRCS branches, as well as ToTs from the Ministry of Health (MoH). This enhanced the effectiveness of the KRCS complementary services due to the availability of the trained personnel (CHWS and TOTS) to provide the services to those affected and infected with HIV/AIDS. A total of 88 MoH staff members were trained in communication and attitude change thus enhancing their skills in management of PLHIV and fighting stigma and discrimination amongst health care providers.

Through its IEC intervention, KRCS reached over 12,000 people. Ten categorical HIV/AIDS question wheels were distributed to 10 schools to enhance quality HIV and AIDS information sharing among the youth in school. A total of 350 clients and 150 orphans and vulnerable children (OVC) benefited from the home-based care (HBC) component of the programme. Nutrition supplements were distributed to 200 clients and, 150 clients had their home care kits replenished regularly. At the same time, 345 vulnerable households and over 1,000 indirect beneficiaries were supported with food baskets and medicines (moducare). To ensure long-term nutritional support for clients at household level, KRCS, in collaboration with Molo District Hospital established a nutritional income generating activity (IGA) model farm on a 1.3 acre piece of land donated by the hospital. Twenty seven PLHIV and 26 volunteers received agricultural IGA trainings.

To increase ART uptake in the community, over 350 clients were recruited, 180 clients put on ARVs and 90 CHWs received refresher trainings on HIV and AIDS prevention, treatment, care and support. To promote knowledge on risky behaviour and enhance attitude change, 135 inmates at the Nakuru Prison and 50 youths and adult peer educators were sensitized on drug and substance abuse through focused group discussions. 1,550 clients underwent a CD4 cell count at the Molo District Hospital, out of whom 150 were referred for treatment and management of opportunistic and skin infections.

Organizational Development

Goal: All branches are viable, vibrant and service oriented with well managed local volunteer networks able to deliver affordable high impact services within their communities.

Objective 1: To establish regional coordination centres for providing technical support for building capacity around the branches and monitoring and supervision of branch activities.

Objective 2: To equip the leadership at the branch level with the prerequisite tools (knowledge and skills) to enable them to execute their duties and responsibilities efficiently and effectively.

Objective 3: To provide regional coordinators and branch managers with tools (policies, guidelines, knowledge and skills) to enable them to execute their duties and responsibilities.

Objective 4: To provide technical support through regional coordination centres for building up membership, recruitment of volunteers and the establishment of a local resource base at the branch level.

Achievements

In operationalizing its decentralization agenda, the KRCS adopted amendments to its constitution to include regional committees and offices in 2006. Two headquarters staff and two members of the National Society's development commission were supported for a study visit to the Zimbabwe Red Cross Society to study the concept of decentralization and inform the KRCS decentralization process.

Five regional offices and functional boards have been established in the Coast, Central, North Rift, Nyanza and North Eastern provinces of Kenya. Annual general meetings were held in the already established regions of the National Society during which regional boards were elected and regional board meetings held and a leadership development induction programme for the regional committees conducted. Regional staff members have also been recruited and taken through orientation sessions.

The National Society's North Rift Region, supported through the Federation, grew tremendously in its disaster preparedness and response capacity. This was evidenced in its response during a landslide disaster in Kakamega North District in August 2007 and in conducting a floods assessment and relief distribution to floods-affected populations in Trans Nzoia District in September among other response efforts.

The Regional Executive Committee carried out monitoring and supervisory visits to the branches aimed at coaching the branch committees and actualizing the strategic direction of the NS at branch level. Quarterly regional coordination meetings with branch coordinators and secretaries of all the branches in the North Rift Region were carried out during the reporting period aimed at improving the quality of service delivery to the most vulnerable, increase in volunteer recruitment targeting the youth, building new partnerships with local stakeholders and self sustenance of the branches and the region as whole. The regional office purchased a one 100-seater and two 50- seater tents that are currently being rented out for income generation.

RWANDA

Disaster Management

Goal: To reduce vulnerability to both man-made and natural disasters within communities.

Objective 1: To strengthen the activities of local community-based disaster preparedness (CBDP) volunteers corps for community preparedness and relief interventions.

Objective 2: To develop structures and systems for the proper management of CBDP volunteer corps.

Objective 3: To equip the volunteer corps with tools (knowledge, skills, guidelines and implementation tools).

Achievements

During this period, RRC procured non-food items for strategic stocks and equipment for Branch Disaster Response Team (BDRT) for use in future relief operations.

RRC disaster preparedness and management staff participated in a number of workshops and meetings benefiting from exchange of knowledge and skills, and establishing useful networks with other stakeholders for future collaboration. These included the disaster monitoring and evaluation workshop organized by United Nations Children's Fund (UNICEF), an inter-agency meeting on the situation of returnees repatriated from Tanzania and the ambulance taskforce meeting organized by the Ministry of Health, annual disaster management and health meeting organized by the Federation and logistics Regional Disaster Response Team (RDRT) workshop and the Peer Food Security Meeting. To strengthen the capacities and competencies of its volunteers in disaster preparedness and management, RRC carried out refresher trainings in camp management for 75 volunteers from bordering districts of Musanze, Karongi, Rutsiro, Kirehe and Rusizi and trained 160 volunteers and 8 National Disaster Response Team (NDRT) and BDRT from 8 districts in Safe Access. The recruitment, training

and organization of volunteers into emergency brigades continued; in addition to the basics of disaster preparedness, the training focused on local hazards in the different parts of the country with 190 volunteers trained and 11 branch disaster response teams established.

RRC participated in weekly road safety sessions in Kigali Town in collaboration with traffic police and 60 primary schools to sensitize primary school children on road safety rules. To aid the dissemination exercise, 1,520 leaflets and 2,250 stickers were produced and 1,420 leaflets and 2,000 stickers were distributed to primary school children and drivers respectively.

The Kigali urban disaster response team, together with the communities in disaster-prone areas, participated in hazard identification and mapping, following which educational sessions on disaster risk preparedness and response were conducted in these communities and 11 risk maps drawn from 6 districts. Community educational sessions were carried out through distribution of 5,000 leaflets and quarterly radio programmes on Rubavu community radio.

To mitigate against and check the frequency of mudslides and floods, RRC continually promoted and supported tree planting and farming. To this effect, nursery beds with 20,000 to 25,000 plants were established in 6 districts namely Nyamasheke, Nyamagabe, Karaba, Nyaruguru, Gicumbi and Musanze, leading to improvements in the nutritional status of the surrounding communities as well as the improvement of the socio economic welfare of households through the sale of the produce from their fruit trees.

Health and Care

Goal: The National Society continues to make a contribution towards improving the health and welfare of communities through scaling up ongoing activities in accordance with ARCHI 2010 and the Algiers Plan of Action.

Objective 1: To reduce the incidence of preventable diseases to which communities are vulnerable (water and vector borne and those which interfere with the normal growth and development of infants and children) through scaling up of activities.

Objective 2: To reduce the prevalence and impact of HIV and AIDS through IEC activities, targeting vulnerable groups and to improve the quality of life amongst PLHIV through psychosocial and support for access to treatment.

Objective 3: To make a contribution to the National Blood Programme by recruiting voluntary blood donors on behalf of the National Blood Bank.

Achievements

To reduce the incidence of preventable diseases, the Rwanda Red Cross (RRC) carried out Participatory Hygiene and Sanitation Transformation (PHAST) and Participatory Hygiene and Sanitation Transformation in Emergencies (PHASTER) trainings in various districts. The NS formed over 50 village PHAST groups and produced and distributed 3,000 sanitary platforms to communities in Gatsibo, Rubavu, Rusizi, Masaka and Kayonza districts. A total 900 volunteers were equipped with sanitary platform fabrication. Furthermore, the volunteers assisted in the construction of over 212 pit latrines in Gicumbi District (Ndatemwa and Gakoni sectors), Kayonza District (Kageyo and Ndego returnees' sites) as well as Nyabihu and Kicukiro districts.

Refresher trainings and 50 health education sessions on prevention and control of malaria and diarrhoeal diseases aimed at reducing the numbers of malaria and diarrhoea related deaths were carried out in various sectors in Kirehe, Incubi and Burera districts, reaching over 10,000 people with malaria prevention messages.

RRC volunteers participated in cleaning 30 water points ensuring that people who relied on these water points accessed clean water, thereby reducing incidences of outbreak of water-borne diseases. During the reporting period, 29 water points were constructed in the particularly vulnerable Karongi, Nyamasheke, Rushaki and Rutsiro districts, 3 water springs, 8 water tanks and 40 fountains were rehabilitated. In addition, 12 new fountains and 1 water tank were constructed, enabling over 7,000 households to access clean water. Twelve health education sessions on the importance of immunization and vaccination for infants and pregnant women were carried out reaching 2,500 mothers. A total of 200 volunteers from 21 sectors in Gicumbi District participated in mobilizing the community during vitamin A and deworming tablets distribution to young children. Monitoring and evaluation on measles campaign in 7 districts have been carried out

Rwanda Red Cross, through its trained volunteers, organized regular clean up campaigns for the eradication of mosquito larvae in 40 sectors spread over 18 districts. The NS reached 11,320 people with home and environmental hygiene messages and distributed or sold at subsidized prices 13,550 long lasting insecticide-treated mosquito nets (LLITNs) to vulnerable households. The demand for LLITNs increased during the reporting period and monitoring visits revealed that households are using them appropriately.

HIV and AIDS sensitization campaigns were carried out in the transit camps, targeting repatriated persons from Tanzania, resulting in 565 people volunteering for counselling and testing. To support PLHIV in livelihood activities, 26 PLHIV were supported financially over the reporting period.

In addition to the traditional ways of disseminating HIV and AIDS information among the youth, the NS organized a football tournament as an innovative way of implementing this activity. It is reported that an estimated 40,000 spectators, both adult and youth, watched the matches during the tournament season at which HIV and AIDS messages were disseminated. Advantage was taken of the HIV and AIDS dissemination activities to dispel fears about becoming a blood donor.

Support for PLHIV continued throughout the year in economic and livelihood activities as well as financial support for medical insurance. A total of 8,241 PLHIV received financial support for medical insurance. Eighty nine PLHIV on anti-retroviral therapy were closely monitored for compliance to treatment regimes and received LLITNs; 800 LLITNs were distributed to other categories of PLHIV. HBC facilitators regularly visited clients, identifying and referring those in need of medical care and counselling.

RRC volunteers carried out 21 blood donation mobilization sessions in 13 sites in various districts, attracting 22,420 blood donors. The National Society took part in the preparation and participation at the International Blood Donors Day celebrations.

Organizational Development

Goal: Quality programmes facilitated by delegating responsibility, authority and accountability for the implementation, monitoring and supervision of activities to the operational (province/branch) level.

Objective 1: To decentralize responsibility, authority and accountability for the implementation, monitoring and supervision of activities to the operational level (province/branch).

Objective 2: To equip the leadership at the branch level with the prerequisite tools (knowledge and skills) to enable them to effectively execute their routine monitoring and supervision role with respect to their field extensions of the Secretariat in close consultation with management at Headquarters

Objective 3: To provide technical support for structures and systems development at the provincial/branch level and tools (policies, guidelines, knowledge and skills) to enable field managers to execute their operational duties and responsibilities efficiently and effectively.

Objective 4: To support the headquarters and field staff to internalize the new order in which the national level role is reduced to overall coordination of activities as opposed to direct implementation of activities.

Achievements

During the reporting period, Rwanda Red Cross elected a new board to office and confirmed the acting incumbent as Secretary General during its 2006 general assembly.

To further strengthen the National Society at the provincial and branch levels and for ease of coordination and in order to align itself with government structures, the National Society went through a restructuring exercise. This exercise resulted in the establishment of 5 provincial committees, 30 district committees and varying numbers of local, sector and cell committees. Branch leadership development training, targeting the newly established 5 provincial committees was conducted and an orientation seminar for all 30 RRC district committees focusing on the Red Cross/Crescent Movement, RRC policies, good governance and decentralization were carried out.

The district committee activities are coordinated at the district level and the local committees have autonomy in making programmatic decisions, management of local human resources, planning and implementing programmes.

The RRC also embarked on entrenching youth structures in the decentralized system of the National Society. This will facilitate the involvement of the youth in the NS activities. The youths are represented in the National Society decision making processes from the cells to the district levels.

The National Society embarked on recruitment to ensure that there was adequate staff for purposes of proper running of the NS operations. Assistant regional coordinators were recruited in eight districts and taken through on-the-job training and orientation seminars to equip the staff with necessary skills and information for optimal performance.

Quarterly planning and coordination meetings at the headquarters, provincial and branch levels involving all its departments, including regional and project coordinators continued throughout the reporting period thus ensuring proper coordination of activity implementation in the National Society.

To build the capacities of the new district committees, RRC provided financial support to Kirehe, Gatsibo and Kayonza districts to establish IGA by renting 50 chairs to generate funds in Kirehe and 60 chairs to generate funds in Kayonza District. In addition to providing office materials for the three districts, Kigali District was supported in acquiring three tents for rental income generation.

TANZANIA

Organizational Development

Goal: Greater efficiency and effectiveness in the provision of technical support for branch capacity building, and the monitoring and supervision of branch activities through the establishment of regional coordination centres.

Objective 1: To establish regional coordination centres for providing technical support for building capacity in branches, and monitoring and supervision of branch activities.

Objective 2: To equip the leadership at the branch level with the prerequisite tools (knowledge and skills) to enable them to execute their duties and responsibilities efficiently and effectively.

Objective 3: To provide regional coordinators and branch managers with tools (policies, guidelines, knowledge and skills) to enable them to execute their duties and responsibilities efficiently and effectively.

Objective 4: To provide technical support through regional coordination centres for building up membership, recruitment of volunteers and the establishment of a local resource base at branch level.

Achievements

Due to limited resources, the National Society prioritized the consolidation of four regional centres involved in the Swedish Red Cross-supported Lake Victoria Programme (LVP). Three of the four regional coordinators and a member of the national management (executive) committee attended a peer supported capacity building study visit to the Zimbabwe Red Cross Society to inform the regionalization concept. The Tanzania Red Cross National Society (TRCNS) subsequently developed a plan of action for strengthening the coordination role of their respective regional coordination centres, including quarterly coordination meetings, regular monitoring and supervision visits, reporting protocols and strategies for membership recruitment.

A new governance board was elected during the NS general assembly that took place in December 2006. Regional elections were also successfully conducted in 16 regions of mainland Tanzania and five regions in the Island. Branch committees were also put in place. Subsequently, the National Society held an orientation seminar for the new board members with support from the Federation, International Committee of the Red Cross (ICRC) and peer support from Kenya Red Cross Society. Thirty three members of the Zanzibar Regional Management committee were taken through an orientation seminar with the support of the ICRC. Due to limited funds, members from the Pemba Island did not participate at the training. A total of 13 out of 23 regions were able to conduct regional management committee meetings during the reporting period.

The new OD director appointed to the National Society carried out eight supervisory visits to Kagera, Kigoma, Dar-es-Salaam, Mara, Mwanza, Mtwara, Dodoma and Zanzibar regions during which follow up and monitoring meetings were held with the regional management committee members, district management committee members, branch leadership and members. Due to limited funding for the OD programme, it was not possible to visit all 23 regions.

The National Society distributed its revised constitution to all its 23 regions and 13 board members. Furthermore, volunteer management policy manuals and the NS strategic plan were also distributed to all 23 regions. It is expected that the regions would disseminate these further to the branches.

UGANDA

Organizational Development

Goal: All branches are viable, vibrant and service oriented with well-managed local volunteer networks that able to deliver affordable high impact services within their communities.

Objective 1: To establish regional coordination centres for providing technical support for building capacity around the branches and monitoring and supervision of branch activities.

Objective 2: To equip the leadership at the branch level with the prerequisite tools (knowledge and skills) to enable them to execute their operational duties and responsibilities efficiently and effectively.

Objective 3: To provide regional coordinators and branch managers with tools (policies, guidelines, knowledge and skills) to enable them to execute their duties and responsibilities efficiently and effectively.

Objective 4: To provide technical support through regional coordination centres for building up membership, recruitment of volunteers and the establishment of a local resource base at the branch level.

Achievements

The Uganda Red Cross Society (URCS) effected staff transfers in a number branches across the regions so as to expose them to different work environments while building their skills at same time. Branch governing board members were oriented, making the transfer process smooth. Supervisory and coaching visits were made to monitor and follow up on programme implementation in 17 branches.

As a means of networking and cross-branch exchange and peer support, branch committee members and staff were supported to visit other branches to share ideas on income generating activities, cross border relationships, ways of initiating branch projects and networking with other service providers at the local level. Youth exchange visits were made between Entebbe, Kasese, Hoima and Jinja branches while Kalangala Branch had exchange visits with Busia Branch, while Mukono Branch had a cross border exchange visit to Busia Branch in Kenya.

To strengthen membership data management at branch and national levels, the National Society initiated rapid processing and documentation of membership cards and volunteer management information.

The URCS held its leadership elections during which all 47 branches elected their office bearers. Branch leadership orientation seminars were carried out in more than half of all the branches. These branches were issued with copies of the constitution and other branch management instruments. Cross-posting of branch managers to expose them to new challenges was carried out. In addition, branch monitoring and supervision visits by the headquarters, technical support and on-the-job coaching for more effective programme implementation were undertaken.

Working in partnership

The five National Societies in the East Africa Sub-Zone received support for their programmes and collaborated with various Red Cross/Red Crescent Movement partners as well as United Nations (UN) agencies such as UNICEF, OCHA, the World Food Programme (WFP), the United Nations High Commission for Refugees (UNHCR) and international non-governmental organizations notably CARE Canada and Pathfinder International.

The Canadian Red Cross expressed interest in working with the TRCNS in disaster preparedness as part of its broader post-tsunami related interventions in the Indian Ocean islands, while the Japanese Red Cross expressed an interest in working with the Kenya Red

Cross Society bilaterally and with Uganda Red Cross Society through the International Federation food security interventions. In 2007, the Finnish Red Cross came on board to support Burundi Red Cross Society in organization development and health-related activities and Rwanda Red Cross in organization development through the Federation. In addition to coordinating these working relationships, the East Africa sub-zonal office supports the five National Societies in monitoring progress in their programmes.

Contributing to longer-term impact

The health and care programmes in Kenya and Rwanda have contributed to ensuring that the capacity of local communities and Red Cross/Red Crescent to address the most urgent situations of vulnerability is increased. The KRCS's health and care programme has contributed to scaling up of anti retroviral therapy uptake and trained PLHIV, community health workers and staff from the MoH to enhance their skills in the management of PLHIV, fighting stigma and discrimination amongst health care providers and providing home-based care to the most vulnerable.

To ensure long-term nutritional support for clients at household level, KRCS, in collaboration with Molo District Hospital, established a nutritional income generating activity model farm in a 1.3 acre piece of land donated by the hospital. The Rwanda Red Cross volunteers constructed and distributed more than 3,000 sanitary platforms to communities in Gatsibo, Rubavu, Rusizi, Masaka and Kayonza districts ensuring hygiene and sanitation is maintained thus reducing incidences of disease outbreaks. Cleaning of water sources and building new water sources has ensured that the communities easily access safe water for domestic use.

The disaster management programme in Rwanda made positive contributions towards building and strengthening the capacities of local communities and Red Cross/Red Crescent to address the most urgent situations of vulnerability.

The Rwanda, Tanzania, Uganda and Kenya Red Cross societies have consolidated their decentralization policies and built the capacities of the structures of management and governance at the lower operational levels (province/regions/branches) ensuring that programme implementation is carried out efficiently and effectively, closest to those most vulnerable.

Burundi Red Cross Society developed its strategic plan for the period 2007-2009 and a Cooperation Agreement Strategy and these are expected to guide the National Society in its future interventions and partnerships in alleviating the suffering among the most vulnerable in Burundi.

Looking ahead

Technical support to all the five National Societies will continue to be availed in operationalizing their new plans for the two year period (2008-2009) and especially building on the outputs for the 2006-2007. Through the zonal planning, monitoring, evaluation and reporting (PMER) unit, support will be provided to all five National Societies in addressing gaps related to general programming with a view to improving the quality of monitoring and reporting on programme outcomes and measuring the impact of the programmes. Furthermore, all five National Societies will be provided with technical support in the implementation of the Lake Victoria Programme and more so in taking on board recommendations brought out during the programme evaluation carried out in 2007.

How we work

All International Federation assistance seeks to adhere to the [Code of Conduct](#) and is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering quality and

accountable assistance to the most vulnerable. For support to or for further information concerning Federation programmes or operations in this or other countries, or for a full description of the national society profile, please access the Federation's website at <http://www.ifrc.org>

The International Federation's activities are aligned with its 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".

Global Agenda Goals:

- 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.

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