National Context

Following sixteen years of war, peace was restored in Mozambique in 1992 and the country has since been struggling with reconstruction and development. The political situation is stable, but may be affected by the parliamentary and presidential elections in 1999. Inflation has been brought under control and the annual GNP growth rate is among the highest in Africa, but the country is heavily dependent upon external aid and has to cope with a growing debt service burden.

As a result of the rapid introduction of structural adjustment there is growing socio-economic polarisation. Mozambique is still one of the 10 poorest countries in the world and faces daunting development challenges. Almost 70% of the population live in absolute poverty and the number of street children continues to grow. A fragile human resource base constitutes one of the most critical problems in the country.

Access to health and social services is far from adequate and both rural and urban vulnerability are high. Approximately 37% of the population have no access to drinking water, 61% are without health services, and 46% lack basic sanitation. The principal causes of death are malaria, communicable diseases, epidemics, infant and maternal mortality, malnutrition and diarrhoeal diseases. It is estimated that 1.2 million people are AIDS carriers, of whom 141,000 are children.

Mozambique is a disaster prone country affected by droughts, floods, cyclones and epidemics, and the capacity of communities and the government to respond is limited. Cholera epidemics in particular have taken a heavy toll, and it is anticipated that there will be a longterm need for a disaster prevention and cholera response. The provision of health education and treatment to people affected by cholera is included as a priority in the 2000/2001 health programme.

Estimates indicate that there remain 2 million antipersonnel mines in the country.

Country Assistance Strategy

The Federation will assist the Mozambique Red Cross Society (MRCS) to build or reinforce capacity to improve the effective delivery of assistance to the most vulnerable, particularly in the fields of health and social welfare. In the core areas of disaster preparedness, health, institutional development and mine programmes, in view of capacity constraints resulting from down sizing and to augment the overall programme impact, the MRCS will focus efforts on one target district in each province.
Programe Objectives

Disaster response
While an MRCS Disaster Response project in collaboration with the regional DP delegate is pending, it is likely that the focus will be placed on supporting the development of communities to reduce their vulnerability, and to improve disaster response capacity through an integrated policy of disaster prevention and preparedness. The Federation will provide assistance to the MRCS to consolidate structures at all levels, enabling the National Society to respond more promptly to any type of disaster.

Disaster Preparedness
The objectives of the Disaster Preparedness Project (2000/2001) are to establish an MRCS policy and strategic plan on disasters, to assess and upgrade MRCS human and material resources throughout the country, to increase knowledge and ability to work on issues related to disaster preparedness, and to establish disaster management systems. A significant element of disaster preparedness is the landmine programme, a bilaterally supported activity which is primarily intended to raise awareness among the population on the dangers of land mines; to improve and maintain danger signs in mine-affected areas; to provide direct assistance to the victims of land mines; to contribute to the development of a database on land mine accidents, and mine affected areas at the national and provincial levels.

Health
The objectives of the 2000/2001 Community Based Health Programme (CBHP) are to improve the health of vulnerable communities by promoting Community Based First Aid in 11 priority districts; to collaborate in the promotion of preventive measures and long term reduction of the impact of HIV/AIDS. The HIV/AIDS activities included here focus on counselling and first aid for the terminally ill, which are integrated into the MRCS Primary Health Programme.

The regional programme on HIV/AIDS is in the process of being developed. Consequently other HIV/AIDS activity areas such as providing drinking water facilities and essential basic sanitation in the identified target districts (communities) to reduce the level of transmittable diseases related to poor water/sanitation facilities will be included in the regional health programme.

Capacity Building
The Federation will assist in the development of the MRCS from crisis management to proactive quality programme intervention by supporting improved management structures at all levels; adequate planning, implementing, evaluating and reporting procedures; improved financial sustainability through technical support to the Finance Resource Development Programme; improved disaster response and prevention capacity at all levels; improved communications between the MRCS and the Federation/PNS; and active support to the Financial Resource Development Programme.

During the current ONS consolidation phase, Federation assistance will support the capacity building of the MRCS, especially within the fields of institutional and financial resource development. The objectives of the Financial Resource Development Programme are planned to develop a financial resource development strategy and plan by mid-2000; to promote the MRCS, its values and its work to enhance revenue generation; to introduce adequate and effective fundraising at all levels; to set up viable revenue generating projects. In addition, the foundations of the society will be strengthened at all levels, with a focus on humanitarian values, promoting the image of the MRCS and the Movement’s principles. Finally, the operational and managerial capacity of the MRCS will be developed.