

# FINAL REPORT



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: FOOD AID AND HUMANITARIAN ASSISTANCE

16 October 2003

### INTERIM FINAL REPORT (pending issuance of final financial report)

Appeal No. 12/02; Launched on: 2 May 2002 for CHF 6,803,000 for 12 months; revised on 22 July 2002 to CHF 89,285,274 (USD 61.6 m or EUR 60.9m) in cash, kind and services for 12 months to assist 1.3 million beneficiaries.

Appeal coverage: 91.9% [<Click here to access the provisional Summary Financial Statement>](#)

Disaster Relief Emergency Fund (DREF) Allocated: CHF 50,000

The Federation's 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 180 countries. For more information: [www.ifrc.org](http://www.ifrc.org)

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### Summary

Thanks to the positive response to this emergency appeal through the Federation and on a bilateral basis, the operating national societies have been able to provide assistance to over one million people who were threatened with starvation in Southern Africa over the past 12 months. The Southern African food security operation has successfully met most of its appeal objectives. Since the operation started in July 2002, the International Red Cross and Red Crescent Movement (Movement) has delivered at least 47,190 tones of food to more than 734,360 people in Lesotho, Malawi, Swaziland, Zambia and Zimbabwe. Some 118,860 drought-stricken farming families were helped with seeds, tools and fertilizers. A further 101,360 people were helped with hygienic and medical supplies. More than 76,000 people are benefiting from the improvement of water sources and sanitation facilities.



The Southern Africa food security operation has provided assistance to over one million people threatened by starvation.

Some relief and capacity-building initiatives between donors and implementing national societies yet to be completed; this is primarily due to uncontrollable delays, but an extended timeframe has been agreed with respective donors. These include branch constructions in Malawi and Zambia, and ECHO-funded food distributions in Zimbabwe.

During the course of the entire operation, some plans were revised to address evolving needs and financial reality. The operating national societies have demonstrated a profound commitment to overcome the tremendous logistical challenges which had thoroughly stretched their capacity. Activities have nonetheless reached the overall target in all countries of operation.

To support its relief activities, the Federation and WFP concluded an operational agreement – the TSP<sup>1</sup> - that comprised one of the largest vehicle fleets ever assembled by the Federation. In place from July 2002 to July 2003, the TSP enabled WFP to transport food commodities to remote, inaccessible areas not served commercial vehicles. More than 58,480 tonnes of WFP-provided food was delivered throughout Lesotho, Malawi, Zambia and Zimbabwe. The all-terrain transport fleet, resourced from the Norwegian Red Cross, will continue to operate from 1 July 2003 for another year in Malawi, Lesotho, Zambia and Mozambique; this continuation falls under a new partnership agreement between WFP, the Federation and Norwegian Red Cross. WFP is undertaking the overall strategic management of the TSP; the Federation is providing international experts, seconded to WFP, to support the operation and maintenance of the transport fleet. Please note that the activities of this extended TSP will no longer be reported through the food security operations updates (appeal 15/2003).

Despite a generally-favorable outlook for cereal harvest in Southern Africa, hundreds of thousands of families, mostly in Zimbabwe, are still in grave danger. The threat of famine may have seemingly retreated for now, but the crisis is only developing. There is a need to integrate HIV/AIDS prevention into everything the Movement is doing in the region. Future famines cannot be prevented otherwise; HIV/AIDS continues to be the single biggest destroyer of lives and livelihoods in this region, killing over half a million people each year in these countries at the most productive stage of their lives.

In May 2003, the Federation launched emergency appeal 15/2003 (Southern Africa: Food Security and Integrated Community Care). It supports the eight national societies of the region (Botswana, Lesotho, Malawi, Namibia, South Africa, Swaziland, Zambia and Zimbabwe) to assist approximately 347,000 vulnerable people through integrated nutrition, health care, water and sanitation, HIV/AIDS prevention and economic self-reliance. This new appeal is a logical continuation of the original appeal (12/2002), and covers the period August to December 2003. It will allow the Federation and the operating national societies to transform short-term emergency relief into integrated medium- and long-term programmes with greater impact upon the root causes of the disaster.



The balance from the Southern Africa Food Security operation (appeal 12/2002) will be transferred to the new appeal (15/2003). Nonetheless, an early response from donors remains critical to prevent the vulnerable segments from sliding into destitution caused by the continuing drought and worsened HIV/AIDS pandemic.

## **Coordination**

At the initial stage of the Southern Africa Food Security Operation there were a number of challenges. The establishment of the OMCC<sup>2</sup> in Johannesburg had proved its efficiency in co-coordinating and administering this large and uniquely complex operation. A team of international and locally hired staff had been providing readily available support in the areas of finance, logistics, telecommunication, procurement, human resources, administration, information, and reporting. Its location had been an invaluable asset to the successful implementation of the operation. A real time evaluation was conducted early in the year and the OMCC had been implementing the recommendations of the team with regards to better organization and coordination of food security operations. A number of coordination meetings had been held during the course of the operation to pool together efforts and resources from the operating and partner national societies in the region to maximize the impact of integrated and longer-term programming.

This endeavor was further reinforced by the decision to incorporate OMCC functions and human resources into the structure of the Regional Delegation. As of 1 July, the operation coordination of the Southern Africa food security operations has been officially undertaken by the Regional Delegation in Harare. OMCC was closed by the end of June 2003 while a small-scale logistics service remains in Johannesburg to support the remaining procurements and

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<sup>1</sup> TSP – Transport Support Package

<sup>2</sup> OMCC - Operation and Management Coordination Centre

those under the new appeal. The Federation has been coordinating food security activities and monitoring the latest development through the UN RIACSO<sup>3</sup> and other regional and country coordination mechanisms.

A complete list of expatriate delegates assigned to this appeal is available from the Federation Secretariat; please contact the Regional Officer listed on page 33.

## LESOTHO

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In 2002, it was estimated that over 450,000 people in Lesotho required food aid to survive. The Red Cross has reached some 100,000 of them in Berea, Butha-Buthe and Mokhotlong districts where communities live by subsistence farming, poverty is very high and children suffer from malnutrition and skin diseases. Over the last 12 months, in cooperation with the Federation and other partners, the **Lesotho Red Cross Society** has assisted more than 57,500 people and assisted them with maize, beans and vegetable oil. Some 19,000 families also received seeds, fertilizers and tools to help themselves become self-reliant.

According to the FAO/WFP crop assessment report published on 10 June 2003, aggregate cereal production for the year 2003 will be 66% higher than the very low production estimated by last year's FAO/WFP mission. A combination of better though below normal domestic cereal production and improved commercial import capacity suggests that there will be no serious cereal shortages at the national level. However, the key issue remains physical and economic access to food for certain segments of the population. Targeted food assistance is recommended to households that have lost their crops entirely and have no livestock and those affected by HIV/AIDS. Emergency provision of agricultural inputs to these families for the next cropping season will also be necessary.

Being part of a coordinated international response and a number of bilateral projects in Lesotho, the Lesotho Red Cross with support from the Federation has been maintaining regular coordination with the government and international partners to avoid possible beneficiary duplication and to fill in gaps in relief assistance.

### General Food Distribution

**Objective: To ensure secure transportation of food from the main warehouse to distribution points, and to ensure timely and fair distribution to the targeted households.**

### WFP food

As a part of the Southern Africa Food Security Operation, the Federation originally aimed at providing WFP food to 103,000 beneficiaries in Thaba Tseka and Mokhotlong districts in Lesotho through general food distributions in the country. The project has been revised and downsized according to the evolving situation and to avoid duplication. The food was distributed by the Lesotho Red Cross. Each family received a monthly ration consisting of 50 kg of maize, 5 kg of beans and 2 litres of vegetable oil. Despite sporadic shortages in the pipeline, nine distribution rounds of 4,145.4 MT of food (see table below) were successfully undertaken at 33 distribution points in Mokhotlong between October 2002 and July 2003.

Round	Date	Beneficiaries	Households	Maize (MT)	Beans (MT)	Oil (MT)	Sub-Total (MT)
1	Oct '02	27,899	7,597	379.8	34.4	11.7	426.0
2	Nov '02	38,512	8,871	443.5	38.0	17.6	499.0
3	Dec '02–12 Jan	35,145	9,266	463.3	46.3	18.5	528.1
4	Jan	35,777	9,166	458.3	45.8	18.3	522.4
5	Feb – 2 Mar	31,338	7,710	385.5	38.5	15.4	439.4
6	12 Mar – 1 Apr	36,790	9,744	250.2	48.7	19.4	318.4
7	14 – 29 Apr	36,902	9,451	472.5	47.2	18.9	538.0
8	12 – 31 May	39,826	10,359	518.0	51.8	20.7	590.5
9	9 Jun – 2 Jul	19,944	4,975	248.7	24.9	10.0	283.6
<b>Total</b>							<b>4,145.4</b>

<sup>3</sup> UN RIACSO - United Nations Regional Inter-Agency Coordination Support Office

### Federation-resourced food distributions in Berea

Distributions of Federation-resourced food to 3,000 HIV/AIDS affected households in Berea were added to the appeal target. Berea district was selected due to absence of large-scale food assistance despite it being one of the hardest hit by HIV/AIDS and having the highest number of orphans in the country. A ration of 50 kg maize meal, 5 kg beans and 2 litres of vegetable oil had been distributed on a monthly basis from February to June 2003. Contributions from the German Red Cross and the British Red Cross with funding source from their governments enabled the procurement of the food components. Procurements were undertaken by the OMCC in Johannesburg. Independent quality test was undertaken. The food items were packed and delivered to the central warehouse in Maseru, and were transported to the regional warehouse and different distribution points in Berea. Two warehouse companies in Maseru and Berea were contracted for the food storage. Forty volunteers were recruited by the Berea division from various constituencies to implement the food distributions. The volunteers were trained on distribution and the Red Cross fundamental principles. Beneficiaries, with focus on orphans and vulnerable children, were selected by the Lesotho Red Cross in consultation with the Disaster Management Authority and village chiefs.

The start of the general food distribution, originally scheduled in January 2003, was postponed to February due to a longer time needed for preparation and planning. The capacity of the Lesotho Red Cross at both the central and local level was stretched out with high concentration of activities in a particular district at the same time. The operational timeframe was therefore revised, from February to June 2003. Each household received WFP standard rations on monthly basis. As a result of lengthy process, only 1,956 out of planned 3,000 households benefited from the first distribution. With acquired experience, the subsequent food distributions were carried out successfully reaching an average of 3,000 households per month (see table below). The beneficiary lists were constantly verified and updated by trained volunteers at each distribution round.

Month	Period	Distribu- tion Points	Village s	House- Holds	Benefi- ciaries (app.)	Quantity of Food distributed			Total (MT)
						Maize Meal (MT)	Beans (MT)	Oil (LT)	
Feb	27 Jan-28 Feb	38	492	1,956	9,780	97.80	9.00	3,912	110.4
Mar	4 Mar-1 Apr	48	498	2,989	14,945	149.45	13.91	5,978	170.1
April	7-29 Apr	48	498	2,929	14,645	146.45	14.645	5,858	168.8
May	7-20 May	48	498	3,348	16,740	167.40	16.74	6,696	190.3
June	3 Jun-1 July	48	498	3,541	17,705	177.05	17.705	7,082	201.2
<b>Total</b>						738.15	72.00	29,526	<b>840.8</b>

There was a remaining balance of 14,563 litres of vegetable oil due to the changed ration of vegetable oil set by the government from the time of programme proposal. The Lesotho Red Cross is planning to utilize the stock to benefit vulnerable orphans and vulnerable children under their HIV/AIDS home-based care programme in Maseru, Berea, Leribe and Mafeteng districts.

Various media that continuously monitored the food distributions include:

- weekly visits by the Federation relief delegate and the Lesotho Red Cross relief coordinator to the distribution points;
- monitoring visits by the programme director, secretary general and committee members of the Lesotho Red Cross and the other Federation representatives;
- interviews to the beneficiaries conducted by the Federation relief delegate and Lesotho Red Cross relief officer;
- regular contacts between the Lesotho Red Cross headquarters and respective divisions on distribution preparation, implementation and progress;
- submission of distribution reports from the division to the headquarters.

Interviews of beneficiaries were conducted in April at two distribution points. Average household size was found to be 6.2 instead of five. All interviewed had marginally survived before the Red Cross food intervention. Three

proper meals have been made available and the beneficiaries are satisfied with the ration size and components. Conclusively, the Red Cross general food interventions have made the following impact on the most vulnerable:

- Improved food security: Due to unavailability of any sorts of income in cash or kinds and other coping mechanism, many could not afford to purchase basic food items. The provision of food package therefore, helped improve food security faced by the vulnerable orphans and accommodating households.
- Enhanced image of the Lesotho Red Cross in the communities: the public image of the Lesotho Red Cross has been significantly improved during the past months with its involvement in relief operation.

### **Targeted food distribution**

**Objective: To provide nutritious food supplement to 5,000 under-fives in vulnerable households of targeted communities**

There are plans to provide 5,000 children below five years of age from vulnerable households with nutritional food supplements, along with nutritional education. Under the bilateral cooperation with the German Red Cross, the Lesotho Red Cross has started in June 2003 pre-school supplementary feeding targeting 3,000 children under seven in the districts of Thaba-Tseka and Qacha's Nek. Each child is provided with 150g of corn soya blends as lunch meal. The project will continue for four months along with distribution of food parcels to 2,000 chronically sick people in Berea district following the same timeframe. Each food parcel contains 12 kg of maize meal, 6 kg beans, 2 litres vegetable oil and other basic food and non-food items.

### **Water and sanitation**

**Objective: To improve the availability of safe water and sanitation to maximize the efficiency and effectiveness of food distribution.**

It was decided not to implement the proposed water and sanitation project in Lesotho because the national society was already implementing a water and sanitation project funded by the EU.

### **Non-food Distribution**

**Objective: to provide most vulnerable households in Mokhotlong and Butha-Buthe districts with agricultural packs and blankets**

In response to the needs of severely impoverished farmers in Lesotho, the German government through the German Red Cross funded the procurement of agricultural starter packs for nearly 9,000 vulnerable families. To implement this new initiative, field assessment was conducted by the Federation relief delegate in early September 2002. 'Kalahari Early Pearl' sort of maize seeds and a set of hoes and spades were suggested as most suitable components of an agricultural pack after consultation with the local authorities, communities and NGO. Due to successful tendering process in Johannesburg, the goods were procured at a lower market price which enabled additional quantities to be procured. Despite occasional unavailability of trucks from the contracted transport company due to technical problems, most of deliveries were made in October 2002 to the contracted warehouse in Maseru as planned. The local authorities in Mokhotlong and Butha-Buthe provided space for the seeds storage. Over 80 active volunteers were recruited and trained by the Lesotho Red Cross, with support from the Federation relief delegate.



Initial lists of beneficiaries were compiled by the Lesotho Red Cross in collaboration with the local authorities in accordance with the following criteria:

- Patients with chronic diseases and HIV/AIDS
- Orphans and teenagers from HIV/AIDS families
- Undernourished children and breastfeeding mothers
- Extended families without any income, unemployed and so called "child-headed families"
- Subsistence farmers
- People suffering from endemic diseases.

Beneficiaries who meet the criteria and own fields for cultivation were chosen. Verification of beneficiaries was carried out at distribution points by trained volunteers in collaboration with the authorities. In October and November 2002, 9,039 vulnerable farming households in Mokhotlong and Butha-Buthe districts received a ration of 15 kg of maize seeds through the Federation. A total of 135 MT of maize was distributed to the selected

beneficiaries of the two districts. In addition, 4,500 out of these families in Mokhotlong also received each a set of hoe and spade. The head of EU delegation in Lesotho and delegation from the German Red Cross observed a seed distribution in Mokhotlong in late October.

Despite limited time given for assessment, planning and implementation to meet the maize planting season, all agricultural starter packs were distributed according to the plan with good cooperation from all the concerned partners in particular the Ministry of Agriculture. Implementing the first ever relief distributions by the Butha-Buthe division was a great challenge in the absence of a structured divisional office and full time secretary. This was, however, overcome by the active involvement of the executive committee members and the appointment of supervisor whose main role was to coordinate and monitor relief distributions. The Federation relief delegate and the Lesotho Red Cross relief coordinator visited distribution sites in both districts to provide technical advice and guidance and to ensure compliance with the procedures. The Lesotho Red Cross staff and volunteers were working closely with the local authorities to ensure correct targeting of beneficiaries. The Federation relief delegate conducted monitoring trips in December and April 2003 in the two districts and interviewed beneficiaries from five distribution points. It was found that maize was the most needed seeds and the given ration was sufficient for their size of field. Average yield expected ranges between 80-100 kg, which will be sufficient to feed their families over one month period. All interviewed beneficiaries expressed their satisfaction with the assistance and appreciated the Red Cross support without which their fields could have been left empty as they could not afford the loan provided by the Ministry of Agriculture.

In May 2003, along with the WFP food distributions in Mokhotlong, the Lesotho Red Cross also distributed blankets, donated by DEC through the British Red Cross, to 8,609 families targeting orphans, child-headed households, elderly, disabled and chronically ill. One-day workshop for 28 volunteers was organized in April on proper assessment and distribution procedures. Existing lists of beneficiaries were provided by the local disaster management authority and were verified by the Red Cross volunteers. Distribution commenced on 14 May. Each selected family was given two blankets. A total of 17,217 blankets were distributed. According to the monitoring visit in the middle of May by the Federation relief delegate and the Lesotho Red Cross relief coordinator, the assistance was regarded as timely and appropriate for people in the highland where the winter had approached the region with snow and the temperature dropped to below 10 centigrade. A loss of 58 blankets incurred during transportation and distributions was reported.

Between November 2002 and January 2003, the Lesotho Red Cross also provided 10,000 families in Berea and Leribe districts each with a ration of 20 kg of maize seeds and 50 kg of fertilizer. The same families also received hoes in March. Both initiatives were implemented by the Lesotho Red Cross in bilateral cooperation with the German Red Cross.

### **Buffer Stock**

The applicability of a buffer stock was re-assessed by the OMCC in Johannesburg. All activities related to these objectives were put on hold. A continued need for a constant flow of food was assured and pipelines proved sufficient to ensure enough food supply for distributions during the operational period. Buffer stock was considered low priority in the short term, and would involve additional expenses and administration to be successfully implemented.

### **Capacity building**

#### **Objective: To strengthen the operational capacity of the Lesotho Red Cross to respond to the food insecurity situation**

The operational capacity in relief and logistics of the Lesotho Red Cross was strengthened with the appointment of a relief coordinator, a logistics coordinator and a logistics officer at the national headquarters. At divisional level, two experienced relief officers and one field officer were employed to manage and monitor relief activities in Mokhotlong and Berea districts. Reinforced human resource capacity enabled the management, implementation and monitoring of relief operations in the field of respective districts. In addition to the establishment of a logistics department with the support from the logistics delegate was essential to manage and monitor movement of goods in proper and timely manner. The relief operations at the same time upgraded the material base of the Lesotho Red Cross headquarters and divisional offices. Provision of computers with networking at headquarters in particular

enabled the Lesotho Red Cross to more effectively and jointly manage record keeping and facilitate more efficient communication and information sharing.

Out of four vehicles procured by the Federation, two were sent to Mokhotlong district to assist with the agricultural starter packs and WFP food distributions. Another vehicle was based in Berea district to facilitate the food distribution process. The last one was used for administration and programmes of the operation. The assistance with vehicles was essential to strengthen and mobilize relief capacity and resources for effective operations.

A number of relief workshops and refresher courses were conducted for volunteers in respective districts. Volunteers have gained understanding of Red Cross principles and distribution procedures as well as skills in basic distribution reporting. Logistics and Finance workshops, with the assistance from the Federation delegates, were successfully held in June for headquarters and relief staff. Participants were introduced with basic logistics regulations and procedures as well as financial management. Basic computer training was provided to the finance staff to be able to operate the newly installed accounting software ACCPAC<sup>4</sup>.

Through the food security operation, the Lesotho Red Cross with the support of the Federation has gained skills specifically in:

- designing, implementing and monitoring distribution sites and procedures;
- conducting relief training for volunteers;
- recruitment and establishment of distribution action teams;
- implementation of procurement and logistics structures and
- management and accounting of donor contributions.

#### **Assessment and lessons learned**

- The Lesotho Red Cross capacity including human and material resources needs to be critically assessed before deciding on the scale of interventions to ensure effective implementation of the relief operation.
- More active and proper coordination with the operating national societies are needed particularly at early stage of operation to avoid overstressing the capacity of the national society and to maximize resources to meet with the operational timeframe and objectives
- Continuous volunteer training and supervision are essential to efficiently implement distributions. Recruitment process needs to be strengthened to ensure the quality of the volunteers and to maintain standards in relief distributions.

## **MALAWI**

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In June 2002, it was estimated that 25% of the 11.3 million people in Malawi were facing acute food shortages and widespread hunger. The situation was exacerbated by the rapid spread of the already high incidence of HIV/AIDS. More than 54% of the population lives below the poverty line.

In response to the developing food crisis and impending famine, the **Malawi Red Cross Society**, with the support of the Federation and partners, had over the last 12 months provided food assistance to more than 241,000 people. Nutritional intake of 17,530 orphans and PLHWA<sup>5</sup> has improved through monthly supplementary rations incorporated with the HBC<sup>6</sup> programmes. In addition, nearly 87,000 farming families were given agricultural starter packs to improve their agricultural production. Water and sanitation activities have also provided 7,500 people with improved access to safe drinking water. The Red Cross interventions had provided assistance to prevent them from sliding into destitution driven by hunger and HIV/AIDS. Beneficiaries and their communities have become more self-reliant as farming has been able to be resumed on their lands and awareness of HIV/AIDS in the communities has been increased. A summary assessment at the end of July 2003 indicated that many of the activities planned by the Malawi Red Cross had been satisfactorily carried out, particularly in the areas of targeted food distribution and

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<sup>4</sup> ACCPAC is a software used for all accounting applications

<sup>5</sup> PLHWA – Persons living with HIV/AIDS

<sup>6</sup> HBC – Home Based Care

supplementary feeding. Some of the capacity building initiatives of the Malawi Red Cross were however not implemented as planned due to overstretched capacity and shifted priority.

The operation experienced duplication of efforts at the initial stage due to lack of proper coordination between the Malawi Red Cross/ the Federation and Malawi Red Cross bilateral partners. Regular coordination meetings amongst Malawi Red Cross partners had been put in place which, to some extent, improved the planning and implementation of the relief activities. The Federation, a new player in Malawi, has also gradually gained recognition from the government, UN agencies and key NGO in Malawi.

According to the FAO/WFP crop assessment report, 2003, the overall food production in Malawi has increased significantly. But food shortages still exist in parts of the country which have experienced crop failures for the third consecutive year. It is estimated that 131,500 people will require food assistance in July 2003. The number will peak to 400,000 in January 2004. HIV/AIDS affected, the destitute, and households that have experienced crop failure will remain vulnerable without food assistance.

### General food distribution

General distribution of USAID/WFP donated food was added to the appeal objective and implemented by the Malawi Red Cross in bilateral cooperation with the American Red Cross. The first distribution round started in July 2002, targeting the districts of Rumphi, Karonga, Chitipa, Nkhoskotota and Ntchisi. Malawi Red Cross branch volunteers and staff were involved in planning, verification and distribution in collaboration with the local authorities. Only maize was distributed in the first two distribution rounds. Distributions were based on households with an average size of 5.5 people. Increased numbers of beneficiaries were targeted as distributions continued. Starting September 2002, the distribution had continued with basic WFP monthly rations of 50 kg maize, five kg pulses and five kg CSB<sup>7</sup> for each family. Since February 2003, two litres of vegetable oil had been added to the food baskets. The operation encountered difficulty to deploy commercial trucks to some areas during rainy season and towards the end of the operation. But the TSP had provided reliable support. More than 223,600 people received food assistance between July 2002 to June 2003 (see table below):

Round	Month	Beneficiaries	Households	Maize (MT)	Beans/pulses (MT)	CSB (MT)	Oil (MT)	Total (MT)
1	July '02	43,038	-	368.6	-	-	-	368.6
2	Aug '02	43,038	-	358.6	-	-	-	358.6
3	Sept '02	102,324	-	852.6	84.5	84.5	-	1021.6
4	Oct '02	128,102	23,017	1,143.8	112.5	108.2	-	1,365.0
5	Nov '02	150,186	25,031	1,251.5	103.7	84.0	-	1,439.2
6	Dec '02	125,706	20,951	1,076.0	169.1	32.7	-	1,277.8
7	Jan '03	147,984	24,664	1,076.0	169.1	202.2	-	1,447.3
8	Feb '03	159,070	28,940	1,456.7	145.6	145.6	40.1	1,788.0
9	Mar '03	223,574	40,651	1,886.2	188.5	75.4	188.5	2,338.3
10	Apr '03	223,574	40,651	617.0	123.0	308.0	0	1,048.0
11	May '03	223,670	40,651	605.5	121.0	302.2	0.05	1,028.8
Brought forward	June '03	19,813	3,538	44.4	5.8	-	-	50.2
<b>Total</b>								<b>13,531.4</b>

Vast improvement in nutritional level of beneficiaries and reduction in malnutrition cases were reported. Most benefiting households were women-headed. Beneficiaries felt that the intervention was timely. They have also gained increased awareness of HIV/AIDS from the drama performances by the Red Cross volunteers during the distributions.

<sup>7</sup> CSB – Corn Soya Blend

### **Targeted food distribution / supplementary feeding**

**Objective: To ensure secure transportation of food from main warehouse to distribution points, and to ensure the timely and fair distribution to targeted households, namely child-headed and female-headed households, as well as the elderly and people living with HIV/AIDS.**

Starting March 2003, approximately 5,000 orphans and PLWHA received the Federation sourced supplementary food rations to improve their nutritional situation. The monthly ration for each beneficiary consists of ten kg of maize flour, two kg beans, three kg CSB, 500 ml vegetable oil, one kg sugar and 500 g salt. The distributions were conducted through the HBC programme in the districts of Mwanza, Balaka and Lilongwe and continued up for five months, up to July 2003. Despite delays of distribution due to the persistent heavy rains in March in Lilongwe, overall distributions were implemented smoothly. The Malawi Red Cross distributed a total of 416 MT of the Federation-resourced foods.

Under a bilateral cooperation project with the Spanish Red Cross which was funded by ECHO, Malawi Red Cross had also provided since February 2003 monthly supplementary rations to a total of 11,000 beneficiaries. Chronically ill and orphans in the districts of Mzimbe, Kasungu, Lilongwe, Mchinji, Zomba, Chiradzulu and Blantyre were targeted. Each beneficiary received each month two kg beans, one kg CSB and one kg sugar.

The Red Cross targeted food distribution and supplementary feeding have increased the nutritional levels and physical strength of the beneficiaries. Many beneficiaries found ways of supplementing the resources they received from the distributions, for example, by making efforts at backyard gardening. Malawi Red Cross staff and volunteers involved in the distribution exercises have also gained knowledge on how to better organize a supplementary feeding programme.

### **Water and sanitation**

**Objective: To improve the availability of safe water and sanitation to maximize the efficiency and effectiveness of food provision**

The project only started in May 2003 with funds contributed by the Irish Red Cross. Procurement and beneficiary selection was completed by the end of June and work began in July. Beneficiaries were selected through coordination with all stakeholders in the districts including the local authorities, UNICEF and NGOs. Communities benefiting from the Red Cross HBC in Nkhotakota district without safe, adequate water supply within one km were targeted. The major challenge in the project implementation was the reduced time scale which is stretching the capacity of the Malawi Red Cross staff and volunteers. The Malawi Red Cross has rehabilitated 15 hand pumps benefiting 7,500 people, 150 people have been trained in the management, operation and maintenance of hand pumps, and 45 in pump mechanics. In addition, hygiene promotion has been carried out to the 7,500 users of the hand pumps. The Federation food security water-sanitation delegate has provided technical support to the Malawi Red Cross water-sanitation staff who has improved their project management and technical skills through formal and informal training and advice.



The project exit strategy is to enable the communities to maintain the facilities. There are plans in future to evaluate the intervention as part of the ongoing Red Cross water and sanitation projects and to involve the branches in supporting these facilities through means of a revolving fund for hand pump spare parts and advice to the community through providing linkages between them and the local authorities.

### **Non-food distribution**

**Objective: Distribution of seeds and agricultural tools to improve the 2002-2003 harvest seasons to 150,000 beneficiaries in targeted areas of Chikwawa, Mchinji and Nkhotakota.**

Through bilateral co-operation between the Malawi Red Cross and the Spanish Red Cross, agricultural starter packs were distributed in November 2002 to 45,000 families in Chikwawa and Mchinji districts. Each starter pack contained 10 kg of maize seeds, 10 kg of fertilizers, and one hoe or spade. Another 41,585 farming families in Lilongwe, Ntcheu, Phalombe and Mwanza also received a total of 20 MT of seeds and fertilizers between

November and December 2002 from Malawi Red Cross in bilateral cooperation with the German Red Cross. Improved harvests were reported from starter pack beneficiary farmers in most of the districts that received the assistance.

In addition, the Malawi Red Cross bought 400 irrigation treadle pumps, instead of the planned 500, with support from the Federation to assist subsistence farmers with agricultural irrigation. Training was provided in June and July intended for beneficiary group leaders from Salima, Mzuzu and Machinga districts. The pumps were distributed in July to the selected beneficiaries in the three districts. They are expected to be used for the next planting season which will start in November. The Malawi Red Cross will undertake follow-up visits at the end of the farming season in 2004 to evaluate the effectiveness on the use of the pumps.

### **Buffer Stock**

Not implemented. See Lesotho.

### **Capacity building**

#### **Objective: To strengthen operational and response capacity of the Malawi Red Cross to carry out the operation**

One 7-ton trucks, two 4x2 double cab, four motorcycles and eight bicycles were purchased with funding from the Federation for the Malawi Red Cross HQ and branches involved in food security operation. These vehicles assisted Malawi Red Cross greatly in relief distribution, administration and monitoring activities. Six cell phones were also provided to related staff from the HQ and branches. This had facilitated the implementation of relief and development activities in areas where telephone communication facilities are not accessible. A new switchboard was also installed at the Malawi Red Cross HQ to meet the increasing internal and external communication needs of the Society. Construction of an office for the Malawi Red Cross branch in the capital city of Lilongwe was also included in the capacity building initiatives for the Malawi Red Cross. The construction work was completed in October 2003 and is serving as a catalyst for further development of the branch. A number of in-house and on-the-job training were organized by the Federation logistics and finance delegates for the Malawi Red Cross counterparts and other staff. A workshop on 'characteristics of a well-functioning society' and 'counterpart relationship' was organized by the Federation Country Office in May, with support from the Federation Regional Delegation, for 20 relief and programme staff and volunteers.

### **Assessment and lessons learned**

- An earlier/permanent presence of the Federation in Malawi will contribute to exercise its role of coordinating Red Cross partners who have long-established set up in the country. This arrangement is particularly crucial in the first weeks of the relief operation.
- As part of its coordination responsibility, the Federation country office should be involved in the process of leasing Federation vehicles to bilateral Red Cross partners, to ensure proper use of the vehicle and the emblem it carries.
- The definition of coordination and leading roles needs to be communicated and agreed between the Federation and all Red Cross partners to avoid misunderstanding or resistance to cooperate and be coordinated.
- Lack of coordination resulted in inconsistency in supplementary food rations between the Federation and Spanish Red Cross projects which carried similar objectives. More should therefore be done towards joint planning of similar activities as a single Red Cross operation in future.
- The capacity of Malawi Red Cross was overstretched simultaneously by numerous bilateral initiatives in this operation. It soon faced capacity problems in relation to organization and volunteer mobilization. Programmes planning and implementation became too headquarters-directed, and implementation of development programmes received secondary attention. In addition, there were not insufficient volunteers at divisional level who had received basic training and experience.
- There is a need for Malawi Red Cross to undergo a capacity assessment as part of its development programme for addressing relief needs in future. In addition, Malawi Red Cross should in accepting such Red Cross partners, ensure that provision exists in their arrangements for realistic development of their capacities.

## SWAZILAND

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The FAO/WFP joint crop and food supply assessment was conducted in early May which indicated that harvest prospects are favorable in 2003. There will be no cereal shortages at the national level. However, access to food for certain segments of the population remains very difficult as the country is undergoing a serious socio-economic crisis due to the continuing spread of HIV/AIDS that is further exacerbating the already severe impact of high unemployment, income inequality and poverty. The mission estimated that 157,750 people require immediate food assistance up to the end of the year. An extremely targeted approach for food aid is required, with primary focus on HIV/AIDS affected. Adult HIV/AIDS infection rate in Swaziland is estimated to be 38.6%.

About one-third of the population, mostly in the drought-prone lowveld and Lubombo plateau, has relied on food aid from aid agencies to stay alive. The **Baphalali Swaziland Red Cross Society**, in cooperation with the WFP, the Federation, and other partners, provided general food distributions to more than 115,600 people in Hhohho, Manzini and Shiselweni districts. Through HBC programmes, the Red Cross clinics and schools, some 3,400 school and malnourished children were provided with enriched food, and 1,500 PLWHA received food baskets and hygiene items. Basic drugs for 20,000 HIV/AIDS clients were provided to the Red Cross clinics. In addition, 5,500 drought affected farming families in these districts were also helped with agricultural starter packs.

Following the severe drought that affected the Southern Africa region in the nineties, the government of Swaziland established a national disaster task force to coordinate disaster relief activities. The Baphalali Swaziland Red Cross is a key member of the task force which consists of government ministries, NGO and UN agencies as well as the private sector. The Red Cross is also an active member of consortium of non-governmental organizations (CANGO) which holds meetings on a weekly basis.

### **General food distribution**

**Objective: To ensure a continuous support of approximately 45,000 beneficiaries for a period of four months with basic food items.**

The general food distribution was a part of an overall coordinated national food security effort to respond to an emergency caused primarily by compounded effects of multi-year drought and HIV/AIDS. Total number of beneficiaries of this overall national effort by the agencies peaked at around 300,000 beneficiaries, approximately one third of the population, during the summer and autumn hunger gap. The beneficiary numbers have since been cut down to about half while awaiting final agreement on the target scale from the Swaziland government, WFP and other agencies after July 2003.

In partnership with the WFP, Baphalali Swaziland Red Cross started general distributions of WFP donated food in August 2002 in the regions of Hhohho, Manzini and Shiselweni. Up to the end of June, some 30,000 beneficiaries (4,700 households) on average received monthly ration via 27 distribution points. The intervention targeted rural vulnerable households without food, livestock, fixed assets or permanent job. Priority was given to child, grandparent and female-headed households.

Each food ration consisted of 12.0 kg of maize, 1.8 kg beans and 0.75 litres of oil. CSB had been added in the food basket and a new district, Nkwene, was covered in March. Despite some interruptions in the pipeline of maize and oil, the general food distributions were successfully implemented reaching 55,753 people, the highest, in December 2002. The target size was reduced to 19,458 in June.

Round	Date	Beneficiaries	Households	Maize (MT)	Beans/ (MT)	Oil (MT)	CSB (MT)	Sub-total (MT)
1	Aug '02	19,963	2,224	239.5	23.4	13.8	-	276.7
2	10 Sep-15 Oct '02	19,453	2,323	233.4	-	13.4	-	246.8
3	20 Oct-18 Nov '02	24,422	3,738	293.0	44.0	16.8		353.8
4	10 Dec-7 Jan	55,753	8,988	635.5	100.3	38.5		774.3
5	13-30 Jan	55,015	9,482	663.1	25.8	40.0		728.9
	Feb	Distribution stopped due to lack of maize						
6	10-13 Mar	42,186	8,038	498.5	65.3	29.1	53.4	646.3
	Apr	Distribution stopped due to retargeting exercise and lack of maize and oil						
7	6-23 May	29,714	-	356.6	33.1	9.2	42.4	441.3
8	June	19,458	-	233.4	28.1	-	28.0	289.5
<b>Total</b>								<b>3757.6</b>

Following a new assessment, the Baphalali Swaziland Red Cross started in March the distribution of basic food ration, funded by ECHO, to 26,531 people in the areas not covered by WFP in the Hhohho, Manzini and Shiselweni regions. Each ration contained 12.00 kg maize, 1.80 kg beans and 0.75 litre vegetable oil. Beneficiaries were selected in consultation with other stakeholders using the commonly agreed beneficiary selection. Procurements were carried out by the OMCC in Johannesburg following the Federation procedures. Due to late of arrival of funding, a significant part of the January-April hunger gap was not filled. Nearly 30,000 people benefited from the food assistance. The successful tender process and favourable exchange rates had also allowed the distribution to continue to July assisting an addition 18,000 beneficiaries with maize and beans. A four-day workshop on assessment and monitoring and another three days on beneficiary retargeting were provided to the Red Cross staff and volunteers to ensure proper targeting. Monitoring questionnaire was also introduced and group discussions held with community leaders to ensure proper registration of beneficiaries.

In addition, the Baphalali Swaziland Red Cross distributed 360 MT maize grains donated by the Swaziland government to 30,000 people in northern Hhohho in March and 124 MT to 10,300 people in Shiselweni in April in view of the worsened food crisis. The Federation supported the distribution costs.

### Targeted food distribution

**Objective: To provide nutritious food supplements to the under-fives and to people infected and affected by HIV/AIDS.**

Starting November 2002, under a bilateral project between the Baphalali Swaziland Red Cross and the German Red Cross, 1,270 malnourished children and 1,880 school children have been identified through weight monitoring in Red Cross clinics in Hhohho, Manzini and Shiselweni. The children received monthly ration of 9 kg CSB per person for three months. A school feeding programme was also started by the same bilateral partners in May with the training of cooks. Provision of food supplements; CSB and sugar, started in the first week of June and profited approximately 37,000 pupils in primary and high schools. The programme lasted till July.

Through cooperation between Baphalali Swaziland Red Cross and German Red Cross, 1,500 PLWHA in the three regions were provided with three monthly rations of food and hygiene parcels between November 2002 and February 2003 through the Red Cross clinics in these areas. The original plan was to assist 700 HBC clients for five months. Each monthly ration consisted of 12.5 kg maize meal, 5.0 kg beans, 3.0 kg sugar, 0.5 kg tea, 2.0 litres oil, 0.5 kg salt as well as basic hygiene items such as soap and toothpaste. The programme halted in February due to shortage of funds. As soon as funding was secured, the Federation took over the project and supported the Baphalali Swaziland Red Cross to resume in May distributing food and hygiene parcels to 1,880 targeted beneficiaries within the catchment areas of three Red Cross clinics. Beneficiaries were selected by 182 HBC facilitators under the supervision of three HBC nurses, which included HBC clients, orphans and child-head households, elderly destitute and handicapped. A total of 3,750 parcels were distributed each containing 12.5 kg maize, 5.0 kg beans, HEPS<sup>8</sup> (high energy protein supplement), 10 kg sugar, 20 litres oil, 0.5 kg salt, candles, match boxes and other hygiene items (body lotion, toothpaste, washing soap and toilet soap). The procurements of these items were made locally.



Ensuring beneficiaries receive the appropriate ration is one of the main tasks of Red Cross volunteers at each relief distribution.

### **Non-food distribution**

#### **Objective: Disaster rehabilitation of subsistence farmers by the provision of seeds and fertilizers and basic drug availability in clinics in Red Cross operation areas.**

With assistance of the Federation funded by DFID, the Baphalali Swaziland Red Cross distributed agricultural starter packs for drought affected farmer households between January and February with a small quantity distributed in March. Unfortunately, this initiative could not be carried out before the essential planting season as the bilateral partner only confirmed lack of funding in December. The Baphalali Swaziland Red Cross and the Federation proceeded efficiently with local procurements of fertilizers, beans and cow pea seeds. Each of the selected 5,556 drought affected farmer households in Hhohho, Manzini and Shiselweni received during January and February 10 kg beans seeds, 5 kg cow pea seeds, and 50 kg fertilizers. The Baphalali Swaziland Red Cross has at the same time piloted agricultural food security pilot programmes such as commercial chicken farming, and communal vegetable gardens. These projects have progressed very well and will provide some models for the sister societies in the region.

Through bilateral co-operation between the Baphalali Swaziland Red Cross and the German Red Cross, distribution of basic drugs to 20,000 HIV/AIDS affected people was conducted through the home-based care programme and Red Cross clinics in the country. The drugs consisted of 45 medical kits containing basic drugs according to WHO standards. The kits were delivered by the end of August 2002 to three Red Cross clinics in Hhohho, Manzini and Shiselweni. The Federation also resourced procurement of drugs for the three clinics adhering to their actual needs of drugs and drug management. A training course, facilitated by the Federation health coordinator, was provided to the head nurse and clerks of the clinics on use, storage and management of drugs.

In response to the outbreak of cholera in Shiselweni, the Swaziland Red Cross undertook a need assessment in collaboration with the Ministry of Health and subsequently distributed, during February and March, 1,400 ORS packets, 700 water canisters and 350 water purification packs to 350 households in the affected areas. The national society also trained 139 community members to have better understanding of cholera and HIV/AIDS.

### **Buffer Stock**

Not implemented. See Lesotho.

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<sup>8</sup> HEPS – High Energy Protein Supplement

<sup>10</sup> VIP - Ventilated Improved Pit Latrines

### **Capacity building**

One 9-ton truck was purchased and delivered in December to Baphalali Swaziland Red Cross to strengthen their transport pool for the increased work load combined with the Southern Africa food security operation. A 4x4 pickup was also supplied to the Baphalali Swaziland Red Cross disaster management department for use in the food security operation. A number of newly recruited staff were also in place in the national headquarter funded by the Federation starting November including one disaster preparedness manager, one disaster preparedness assistant, one warehouse manager, one accountant, and one logistics officer. Two site officers were also recruited for the Shiselweni and Hhohho branches. Training on logistics, finance and distribution has been going on since February. During 12 to 16 March, a training course on monitoring and food security was conducted for 13 staff from Manzini and Hhohho branches. A team building workshop for 15 national societies' management and field coordinators was also implemented during 15-18 March in Manzini. One laptop, one printer, one photocopier and two fax machines were purchased and delivered to the Society. The fax machines were allocated to the warehouse and Shiselweni division. In April, a food security assessment workshop was conducted for 26 Baphalali Swaziland Red Cross staff and volunteers. The course was a follow-up session on the targeting workshop in March and was facilitated by the Federation food security adviser and regional disaster preparedness officer. The newly acquired skills are being put into practice in the retargeting exercise for a downsized operation in the extended appeal, once the key assessments reports become available.

### **Assessment and lessons learned**

- A long delay in the project funding process caused a corresponding delays and missing a significant portion of the hunger gap, the primary time target of the program.
- Adequate and appropriate food distribution infrastructure (warehousing, transport, and trained staff) has been put in place and the actual reaching of the beneficiaries can be said to take place efficiently and professionally.
- The lingering concern is the targeting of beneficiaries which, despite the trained staff, is a difficult task due to political and other pressure from the local communities and changing beneficiary lists due to deaths amongst the aid recipients.
- The lack of base line data, such as mortality rates, makes the objective measuring of the bottom line results an impossible task. But using the number of beneficiaries in each community as a yard stick, the distribution has reached its target.
- In the Swazi context, it is still debatable whether the relative strength of the Federation lies in general food distributions. As WFP already has the mandate and muscle for the job, the Federation should perhaps concentrate more on agricultural self-reliance projects and, should involvement in food distributions be needed, seek synergies with the HBC programs through the clinics and continue with food parcel distributions through those channels that are unique to Red Cross.
- The national society could very well continue to act as WFP implementing partner in those regions where its presence is strong. The Federation has no role in this activity.
- The fact that the local Red Cross has also been used by WFP as an implementing partner for the WFP procured food has led to inflationary pressures with regards to staff and volunteer compensations. This has not only led to significantly higher than expected distribution costs, but also to potentially undermining the concept of volunteerism of the Movement – backbone of any national society.
- There are needs to develop the national society financial capacity. Increasing financial self-sufficiency of the national society has been identified as a priority. This needs to be coupled with structural changes in human resources and clear strategies for future development.

**ZAMBIA**[<Click here to return to title page>](#)

The food distributions in Zambia throughout the 2002/2003 hunger gap have helped to avert the predicted famine. The **Zambia Red Cross Society** alone will have provided Red Cross food to up to 121,400 targeted beneficiaries in the severely drought affected south of the country from November 2002 through to the harvests in June 2003. Over 71,500 people in the extremely remote north western region benefited from the monthly distribution of WFP donated food. The community health of 200,000 people has also been improved with better access to clean water and good sanitation facilities, health and hygiene items, health education and HIV/AIDS awareness activities.

Good donor support and unallocated donations have enabled the Zambia Red Cross and the Federation to rapidly to overcome a number of challenges including the government's decision to refuse GM (genetically modified) maize, and logistical difficulties. The Zambia Red Cross has also successfully shifted the focus of the relief operations from providing supplementary food to providing a fuller food ration. The Red Cross has long recognized the indivisible link between food security, diet and HIV/AIDS. For many years the core beneficiary caseload of the Zambia Red Cross has been PLWHA (people living with HIV/AIDS). The main entry point of the relief operation was the home-based care (HBC) programme for chronically ill people, the vast majority of whom are PLWHA. The relief programme benefited from a strong local Red Cross presence. The HBC programme and clients in turn benefited with resources and food for the HBC clients. The relief operation has achieved not only its aim to provide humanitarian assistance to people in desperate need of food but has also helped to strengthen the local Red Cross and the HBC programme and its clients.

In addition, the food security operation has helped the Zambia Red Cross in its first vital steps to integrate programmes to provide a comprehensive health and food security response to the community's needs. A programme has subsequently been embarked to assist HBC clients to develop vegetable kitchen gardens to improve their long-term food security.



Zambia Red Cross volunteers in Livingstone verifying carefully the beneficiaries against the distribution register.

The government disaster management and mitigation unit (DMMU) has been in charge of the co-ordination of humanitarian assistance in Zambia. The WFP has closely coordinated activities with the DMMU throughout the drought relief operation. Monthly meetings were held with all of their implementing partners including the Zambia Red Cross. In addition, NGO forum meetings are held bi-weekly for information sharing and relief coordination. Nutrition meetings were also held at UNICEF. The Zambia Red Cross and the Federation have been attending these meetings whenever possible. At both national and district level, the Red Cross is co-ordinating activities with the other key actors such as CARE and World Vision. Concerted coordination and good spirit of cooperation has minimized duplication of efforts. The Zambia Red Cross officers from the HQ also maintain regular contact with Regional Delegation in Harare for exchange of experiences and technical advice in the fields of health, HBC and water and sanitation.

### **General food distribution**

**Objective: To ensure secure transportation of food from main warehouse to designated distribution points and ensure the timely and fair distribution to targeted households**

Since December, the Zambia Red Cross had been distributing both government DMMU and WFP food, initially in Zambezi and Chavuma districts only but the Zambia Red Cross was requested to extend their distributions to assist more beneficiaries in four additional districts. The targeted beneficiaries were poor subsistence farmers whose crops were destroyed by drought and floods. The households targeted were those which were female- or child-headed, housed a chronically ill person, elderly, pregnant and lactating mothers. Food ration included 350g of maize sufficient for one person per day (10.5 kg per month) which was later increased to 400g per day (12.0 kg per month) following the VAC (Southern Africa Development Community Vulnerability Assessment Committee) results, 60g

beans sufficient one person per day (1.8 kg per month), 180g blended food of soya/high energy protein supplement sufficient for one person per day (5.4 kg per month).

From January the Zambia Red Cross was requested to increase its distribution to nearly 58,000 people in the two districts. In February four additional districts of Kasempa, Kabompo, Mufumbwe and Mwinilunga were added in order to reach out to more people. All of the districts are extremely remote with notoriously difficult road conditions and are vulnerable to annual flooding. The inevitable flooding cut off roads, bridges and many parts of the districts. The flooding and severe transport constraints led to insufficient food being delivered in time for all the beneficiaries. The March relief distributions had to be stretched into April and May and there was insufficient food for many beneficiaries. The Zambia Red Cross was however able to reach more than 71,000 people per month during the operations peak in March 2003. In March, the WFP requested for retargeting exercise in order to scale down the beneficiary number to 21,000 people in just Zambezi and Chavuma districts towards the end of the emergency operation. The Zambia Red Cross still has 25 MT beans, 57 MT maize, 9 MT HEPS in Chavuma and 70 MT maize, 2 MT beans in Zambezi yet to be distributed as the flood affected west bank became only accessible a month ago. Distribution was not possible in July. Constant breakdown of the trucks, reduced transport capacity and shortage of fuel delayed the conclusion of the emergency operation.

Round	Donor	Date	Beneficiaries	Maize (MT)	Beans / pulses (MT)	Blended Food (MT)	Subtotal (MT)
1	WFP	December	11,800	178.0	0	0	178.0
2	WFP/DMMU	January	57,823	693.9	0	0	693.9
3	WFP/DMMU	February	61,224	615.8	0	0	615.8
4	WFP/DMMU	March	71,536	874.9	0	0	874.9
5	WFP/DMMU	April	67,666	731.0	52.7	0	783.7
6	WFP	May	14,976	286.2	24.8	0	311.0
7	WFP	June	20,630	247.7	33.8	13.4	295.0
Total				3627.5	111.3	13.4	<b>3752.3</b>

### **Targeted food distribution**

**Objective: To ensure that HIV/AIDS infected and affected people and malnourished children below five years have access to nutritious food supplements.**

The detailed operational planning highlighted that the initial number of beneficiaries in the appeal was too high. This was partially due to the fact that the number of HBC clients had been overestimated and that this vital long-term care programme requires time to train staff and gradually expand. The total appeal target for the targeted food distribution in Zambia was therefore revised to 110,000 beneficiaries. The initial Red Cross plan was to provide high protein food supplements which would complement government and WFP provided maize. People qualify for the Red Cross assistance are chronically ill patients and their family members, if they are elderly and their dependents, orphans and their care family, and other vulnerable HIV/AIDS affected. Existing Zambia Red Cross HBC clients known and cared by the Red Cross HBC facilitators were listed along with other vulnerable people through a comprehensive registering and verification process by trained Red Cross volunteers in consultation with the community leaders and village chiefs.

Beneficiary register and verification were undertaken on monthly basis to ensure proper targeting. The precise registering process has meant that the beneficiary register is growing each month and the programme consequently grew in size. The Zambia Red Cross has developed vital skills, which will greatly assist them in future operations, in assessing, targeting, registering and verifying.

The first distributions of monthly rations of 3.6 kg beans commenced in November 2002. The pipeline for the general food distribution was however severely interrupted due to government's decision to ban import of genetically modified food, transportation problems and funding shortages. For many beneficiaries there was therefore no staple diet with which to complement with Red Cross food supplements. In response to the situation the Red Cross added 10.5 kg of maize per person to the food ration from December 2002. In March 2003, the food ration was further improved by increasing the maize to 12 kg per person per month to align with WFP rations and

VAC recommendations. From April, one litre of vegetable oil per person per month was also added to improve the food content.

### Federation-resourced food

The Federation worked with the Zambia Red Cross to provide for up to 60,000 beneficiaries in the districts of Kapiri Mposhi, Maamba (in Sinazongwe), Livingstone and Choma. First distributions started in November 2002 for 8,562 people in Kapiri Mposhi, Maamba in Sinazongwe, and Livingstone. Choma district was included from January 2003. The programme grew as needs increased (each month into the 'hungry gap' means less food left from the previous harvest), and as the beneficiary register was developed. The beneficiary caseload and programme grew each month eventually reaching 64, 145 people in May. From the harvests, in June and July 2003, much smaller-scale distributions continued for the most vulnerable 12,000 chronically ill HBC patients and their households.

Round	Date	Beneficiaries	Maize (MT)	Beans/pulses (MT)	Oil (MT)	Sub-total (MT)
1	Nov	8,563	0	41.5	0	41.5
2	Dec	25,881	265.0	96.9	0	361.9
3	Jan	40,700	439.4	154.5	0	593.9
4	Feb	53,217	566.2	182.3	0	748.5
5	March	55,237	574.0	112.0	0	686.0
6	April	60,273	714.7	228.1	56.0	998.0
7	May	64,145	772.9	222.7	46.0	1042.0
8	June	8,608	110.4	30.3	7.9	148.6
9	July	11,099	41.3	39.7	10.2	91.2
<b>TOTAL</b>			<b>3,483.9</b>	<b>1,108</b>	<b>120.1</b>	<b>4,712</b>

The vast majority of the procurement of the Federation-resourced relief items was made centrally by the OMCC in Johannesburg. Some local procurement was also made in Zambia by the Zambia Red Cross with technical advice and support from the Federation logistics delegate based in Zambia. A central warehouse in Choma functioned as the main receiving and dispatching centre for operations in the south. Additional district-level warehouse space was also secured. Relief goods for Kapiri Mposhi in the north were dispatched there directly. With the exception to the long delay in the delivery of the hygiene items for the HBC clients, no major delays were encountered.

### Food assistance through bilateral co-operation between Zambia Red Cross and the Netherlands Red Cross, together with the Belgian Red Cross (Flanders Section)

The Netherlands Red Cross and Belgian Red Cross (Flanders Section) contributed to the Zambia Red Cross total target to provide 110,000 beneficiaries with supplementary food assistance in Zambia. ECHO financed the Netherlands Red Cross and provided for 20,000 beneficiaries and with assistance from the Belgian Government through the Belgian Red Cross provided for an addition 10,000. The 30,000 beneficiaries (using the same Zambia Red Cross beneficiary criteria outlined above) were located in Choma, Maamba (in Sinazongwe), Kalomo, Kazungula and Livingstone. Due to the gradual scaling up of the beneficiary lists, the distributions became relatively small but rose to more than 35,000 beneficiaries per month from April.

Round	Date	Beneficiaries	Maize (MT)	Beans/pulses (MT)	Oil (MT)	Sub-total (MT)
1	February	19,298	199.0	64.0	0.0	263.0
2	March	21,250	337.0	105.0	0.0	442.0
3	April	34,561	415.0	117.0	35.0	567.0
4	May	27,557	299.0	103.0	30.4	432.4
5	June	36,112	297.0	167.0	58.0	522.0
6	July	21,115	285.0	47.0	5.0	337.0
<b>Total</b>			<b>1,832.0</b>	<b>603.0</b>	<b>128.4</b>	<b>2,563.4</b>

**Food assistance through bilateral co-operation between Zambia Red Cross and the German Red Cross**

With German government funding, the German Red Cross sourced the Zambia Red Cross food assistance programme for more than 21,000 beneficiaries in Choma and Kapiri Mposhi. A total of 591.0 MT of maize and 181.6 MT of beans were provided to meet the beneficiaries' food needs for three months, from February to April. The beneficiaries were targeted by the Zambia Red Cross using their standard criteria and targeting system (see above). Each beneficiary received a monthly ration of 10.5 kg maize and 3.6 kg beans. Two distributions were made during March, the latter one was an early distribution for April. The Federation assisted the same beneficiary group during the May distributions.

Round	Date	Beneficiaries	Maize (MT)	Beans/pulses (MT)	Subtotal (MT)
1	Feb	19,698	203.3	62.1	265.4
2	March	19,202	200.1	55.3	255.4
3	Late March (for April)	21,168	187.6	64.2	251.8
Total			591.0	181.6	<b>772.6</b>

The distributions of Netherlands and Belgium Red Cross in Livingstone were delayed and maize was not distributed because the Zambian authorities queried the alcohol content in the maize despite its passing rigorous Federation testing. With that one exception the Red Cross food logistics pipeline has been excellent and the Zambia Red Cross has been able to provide food to beneficiaries on a regular and timely basis.

During the course of the programme the Federation regional food security nutritionist /food security advisor worked with the Zambia Red Cross and developed a monitoring system and trained staff. Beneficiaries are monitored at both the distribution point and after the distributions at households. Five per cent of the household recipients per distribution point were interviewed and food rations weighed. Household monitoring visits were also made using another questionnaire. A team of 28 volunteers worked exclusively on monitoring. The results assured the Zambia Red Cross that the beneficiaries were satisfied with the service, that they were largely using the rations themselves, and that the vast majority of the beneficiaries fell into the 'poor' and 'very poor' category. The HBC clients taking anti-TB drugs reported that they were better able to complete their drug courses. The HBC programme also reported that number of HBC clients dying significantly decreased.

In May and June 2003, HIV/AIDS awareness performances were held during the food distributions both in Livingstone and Maamba. The drama groups conducted role plays with music conveying HIV/AIDS prevention messages to hundreds of beneficiaries at each distribution point. This new initiative of the Zambia Red Cross was well received and will be developed and greatly expanded for future distributions.

The Zambia Red Cross and all partners have held regular review meetings to address food security operation challenges, to ensure good cooperation and to institutionalize lessons learnt. These meetings have highlighted the vital need for good radio and telecoms equipment, and earlier monitoring measures. The Zambia Red Cross has acquired good volunteer management techniques and recognized the importance of integration of programmes and volunteers. HBC programme was the entry point of the food security programme. Many food security volunteers have in turn over the course of the operation been trained to become HBC care facilitators.

**Water and sanitation**

**Objective: To improve the availability of safe water and sanitation to maximize the efficiency and effectiveness of food provision.**

With the Federation support sourced from the British Red Cross and Canadian Red Cross, the Zambia Red Cross has been able to rehabilitate, since February 2003, 75 handpumps and installed 29 new boreholes fitted with handpumps in Choma, Kalomo and Livingstone in Southern Province (instead of the originally planned 15 water points and 15 new bore holes due to greater demand from the beneficiaries). A total of 500 latrines (instead of 1,000) were also constructed under the Zambia Red Cross supervision, out of which 100 latrines were VIP<sup>10</sup> latrines built at schools and health centres with inadequate sanitation facilities. Many of the schools targeted were facing risk of closure due to poor sanitation facilities. The remaining 400 were basic pit latrines fitted with a high quality

concrete slab. The Zambia Red Cross provided advice and training to beneficiaries who were responsible for the digging of their pits and for the construction of walls and a door around the latrine.

All of the facilities were planned in coordination with the local authorities responsible for the water and sanitation in the given region. Local communities were also involved in the decision making. A total of 109 community-based management (CBM) committees were formed to ensure local community participation, management and sustainability of the interventions. The committee members attended a two-day training course on community-based health, hygiene and training messages in order that they could disseminate to their communities. A further 40 volunteers were made responsible for monitoring the utilization of the facilities. During a three-day course they were provided training on the monitoring of the proper use and maintenance of the sanitation facilities. 25 volunteer pump menders, who had previously been provided with district water, sanitation, health and education committee (DWASHE) training, were provided with a two day refresher course and their spare pump part and tool kits refreshed. The Zambia Red Cross/the Federation water and sanitation intervention has ensured clean water and hygienic waste disposal for 50,000 people in Choma. The Federation food security regional water and sanitation delegate has provided regular technical support and monitoring visits throughout the project.

The Netherlands Red Cross, with ECHO funds, has also enabled the Zambia Red Cross to expand its water and sanitation services further. The Zambia Red Cross has been able to rehabilitate 273 water points and build 31 refill/recharge dams, benefiting approximately 155,000 people in Livingstone, Sinasongwe and Choma districts. These dams are constructed in valleys where rainwater can collect for irrigation and for cattle. This will have to be updated with Netherlands Red Cross in Lusaka

### **Non-food distribution**

**Objective: To ensure that people living with HIV/AIDS (PLWHA) have access to hygiene supplies.**

The Federation and Zambia Red Cross have both provided assistance to ensure health benefits commensurate with good hygiene and have also started to help beneficiaries to improve their longer-term food security by assisting HBC clients and their families to establish vegetable gardens.

All beneficiaries were provided with a 250g bar of body soap per month when collecting their food rations. Chronically ill HBC clients in Sinasongwe, Livingstone, Kapiri Mposhi and Sesheki districts were provided with an additional monthly ration of 500g laundry soap and a 100g jar of petroleum jelly and a one-off contribution of towels (between two to six towels per family depending on the household size). In addition to the food items, all of the 60,000 Federation supported beneficiaries in Choma, Kapiri Mposhi, Sinazongwe and Livingstone were provided with a 250g of body soap per month for five months from March 2003. During the first distribution, a further 15,393 bars were also provided to the German Red Cross supported beneficiaries in Choma.

Due to the greater importance of good hygiene to chronically ill patients with HIV/AIDS and their susceptibility to opportunistic infection, the HBC clients were provided with a more comprehensive hygiene package. After a long delay, the hygiene items were eventually received in March and distributed to the districts for distribution in April. As planned, the HBC facilitators began to provide their chronically ill clients with monthly rations of laundry soap and jars of petroleum jelly from April. It soon transpired that this additional task to the HBC facilitators in addition to caring for their clients was hampering their usual work and causing distribution delays. To ensure regular distributions and to speed up the process, all of the hygiene items were distributed by the food security teams during the food distributions from May. This proved to be more effective and consequently about 2,800 chronically ill people were provided with hygiene items in May only. The delays in delivery and slow start of distributions resulted in a minor balance of items which will be distributed beyond this appeal period. In May, refresher training on health and good hygiene promotion was provided to all of the 131 HBC facilitators in each district to maximize the good use of the hygiene items.

## Hygiene items provided to chronically ill HBC clients

Round	Date	Beneficiaries	Laundry soap (500 g bar)	Vaseline (100 g jar)	Towels	Blankets
1	April	474	474	470	470	0
2	May	2,795	2,795	2,795	1,882	0
3	June	5,750	2,923	3,220	3,331	1,836
4	July	5,611	3,822	5,611	986	4,821
Total			10,014	12,096	6,669	6,657

The new food security appeal has included plans to support Zambia Red Cross ongoing initiatives to contribute to the longer-term food security needs of these HBC clients and their households who have access to land and minimal labour. The intervention, in the form of developing kitchen gardens, will help to improve the nutritional content of the diet of PLWHA, who require better diets and more calories to stay healthy and productive.

**Buffer Stock**

Not implemented. See Lesotho.

**Capacity building**

**Objective: To strengthen the operational response capacity of the Zambia Red Cross to carry out the operation.**

The Zambia Red Cross and the Federation have jointly agreed a number of capacity building interventions from improving the resource capacity building to training and personnel development. Three 4x4 pickup vehicles were provided, one allocated to the HQ in Lusaka, one to the Livingstone branch and one to the water and sanitation project based in Choma. Three motorcycles - one for Maamba office, one for Livingstone and one for the water and sanitation project in Choma were also provided by the Federation. In addition five motorcycles have also been repaired and allocated to the branches accordingly. The Netherlands Red Cross has also assisted the Zambia Red Cross with two motorcycles for the Kalomo and Maamba teams and 70 bicycles for the food security volunteers. With funds from WFP, the Society has also bought six computers, four motorcycles and one pickup. The Federation telecoms delegate installed a HF base station at the Zambia Red Cross branch in Maamba, Sinazongwe, where very poor telephone connections had been experienced and greatly hampered communications and operations. The Federation purchased three desktop and one laptop computers. In addition a fax machine was purchased for Livingstone branch. The German Red Cross provided a photocopier for Choma project office.

In response to the urgent need for additional headquarters office space, six office containers (four 20 ft and two 40 ft) were purchased and installed and telephone, power and computer network connected. The Zambia Red Cross has also made some basic repairs and improvements to the headquarters offices and upgraded computer facilities. At the same time, to facilitate the implementation of the food security operation, the Federation has supported the overhead costs of the Zambia Red Cross HQ since January and the senior management costs from April. Six food security coordinators were recruited by the Zambia Red Cross in cooperation with the Federation to be stationed in Kapiri Mposhi, Livingstone, Maamba (in Sinazongwe), Zambezi, Choma and Kalomo. They were trained on the Red Cross Movement and principles and food security coordination. One warehouse assistant was also recruited for Maamba.

The Federation has worked with the Zambia Red Cross headquarters staff to provide training for the volunteers in beneficiary targeting and food aid distribution techniques and procedures since the beginning of the programme. More than 280 volunteers have attended training courses, including HBC facilitators and branch executive committee members. The food security regional nutritionist and food security delegate provided training to Zambia Red Cross food security coordinators and home-based care managers on nutrition, malnutrition and the special nutritional needs of PLWA. In addition, she worked with the Zambia Red Cross to develop a food aid monitoring system. Further training was provided to a team of 23 Zambia Red Cross food aid monitors.

### Assessment and lessons learned

The implementation of the food security operation has exceeded all expectations. Although statistical analysis cannot prove that lives would be lost if food was not provided, it is sufficiently clear that the Red Cross food security intervention has had a significant impact on the lives of the beneficiaries during the drought period. Nearly all the food items were actually consumed by the targeted beneficiaries and virtually none was seen on sale at local markets. Only a few beneficiaries were reported using a small quantity of food to feed their livestock. A considerable number of beneficiary families were enabled to use their limited cash to send their children back to school. The monitoring reports indicated that half of the beneficiaries belonged to the group “very poor” and the second largest group of beneficiaries fell under the classification ‘poor’. More than half of the recipients of the food aid were women who tend to be caretakers and burden the responsibility of caring for orphans. Another result revealed that the beneficiaries became increasingly satisfied about the food distributions organized by the Zambia Red Cross during the course of the programme period.

During the course of the programme, the mutual confidence between the parties had gradually improved. The Zambia Red Cross coordinators and delegates have also become more experienced in their respective management roles. As a result working relations are excellent and the relief operation has improved to a point where it is very efficient and effective. The Zambia Red Cross has also started to play a more vital role in the implementation of the programme, both at HQ and field levels. The short communication lines under the Federation disaster management and coordination (DMC) division in Geneva have developed a more rapid decision making process thereby eliminating unnecessary delays.

Other lessons learnt from the food security operation in Zambia include:

- The Federation would have been in a better position to work with the Zambia Red Cross if there had been a permanent presence in country. At the request of the Zambia Red Cross a permanent Federation delegation will be established and a new head of delegation has been identified and in place before the end of the emergency operation to ensure a smooth and effective hand over and that lessons are learnt and institutionalized. Many of the new Federation team members have experience working in Zambia which will further ensure a smooth continuation of support.
- Coordination with the UN and other actors is time-consuming but vitally important work which the national society should actively lead whenever possible.
- Although all Red Cross partners have a positive spirit of cooperation, PNS appreciate and expect the Federation to host formal coordination meetings and facilitate written cooperation agreements.
- As with the Federation appeals, all project proposals under coordinated partnership programmes should be agreed upon by the national society and shared with the Federation prior to being submitted to donors.
- The national society should take a greater lead in the coordination of the Red Cross partners.
- The Federation should preferably recruit delegates with previous Red Cross experience and working experience in the country of operation.
- It is important that emergency operations under the DMC structure are implemented in close cooperation with other Red Cross structures and ongoing development programmes.
- The Zambia Red Cross has recognized the need for clearer job descriptions, organizational changes, lines of communication and reporting, especially when programmes are becoming more integrated and there are several projects in the same district.
- The Zambia Red Cross has learnt valuable lessons and skills in beneficiary targeting during this operation. The Zambia Red Cross has been able to do this involving local government, chiefs and the community in a very effective way. As resources become even more limited, the Zambia Red Cross requires concerted support and technical advice. The targeting experience will be documented.
- The Zambia Red Cross has developed an effective monitoring system. It has however learnt that there must also be resources made available at headquarters in order to process and compile assessment reports in the field.
- During Zambia Red Cross food security review meetings it has regularly been highlighted that lessons learnt must be institutionalized. The Zambia Red Cross has plans to compile a basic ‘Zambia Red Cross relief manual’ with good practice, roles and responsibilities which will assist future operations.

**ZIMBABWE**[<Click here to return to title page>](#)

The overall goal of the relief intervention in Zimbabwe was to provide a safety net to 100,000 highly vulnerable people targeted through the existing home-based care (HBC) programme of the **Zimbabwe Red Cross Society**, by meeting their nutritional and hygiene needs, and by providing some water, sanitation and agricultural inputs. The HBC programme itself, provides care and support to the affected households, other medical and hygiene inputs, counselling for those affected and infected, networking and signposting to other agencies, and linked work in prevention and advocacy. HBC clients have a medical referral showing symptoms of diseases associated with HIV/AIDS, and have been assessed as being 'very poor' against a set of standard criteria. Other beneficiaries of the programme include orphans and other children made vulnerable by HIV/AIDS, including a number of child-headed households.

The operation was able to meet these goals in a fairly comprehensive manner, taking over from and expanding the existing supplementary nutritional component of the HBC, which was faltering in the face of shortages of food and rapid increases in commodity prices. As the HBC programme underwent planned growth into new project sites, these areas were included in the food distributions. Non-food items, specifically blankets, hygiene and medical items were provided through the appeal and distributed by the Zimbabwe Red Cross. Water and sanitation inputs were also included, both in response to outbreaks of cholera in southern Zimbabwe and as part of Zimbabwe Red Cross longer-term water and sanitation plans in the areas around the Beitbridge and Matobo HBC sites.

HBC households in rural areas also benefited from the timely provision of agricultural inputs, including locally appropriate seeds and in some cases also fertilizer. Despite a promising start into the season, poor rains reduced the yield of the maize provided. In the drier areas of the country, the programme also provided sorghum seeds which fared rather better, and made a positive contribution to household food security when harvested. Vegetable seeds for all beneficiaries improved their access to micronutrients.

At the time the appeal was launched last year, the situation in Zimbabwe was generally seen as an agricultural crisis, and the international response therefore was geared towards the small-scale rural farmers in communal farming areas. This response has proved as incomplete as the analysis which supported it. The understanding of the crisis has now become rather more sophisticated, and it can be described in three levels as follows:

- A long-term HIV/AIDS crisis with high, and rising, infection rates, the impact of which is only beginning to be understood and felt. Even once infection rates are brought under control, the impact of the following waves of opportunistic diseases, AIDS, and eventual death will inevitably follow. Although the qualitative effect of HIV/AIDS on vulnerable households is now being explored, there is little quantitative work yet available, and this impacts upon the ability of all parties to the emergency to effectively plan and manage interventions.
- A medium-term economic crisis, characterized by a loss of productive capacity (due both to HIV/AIDS and the 'brain drain' of qualified personnel out of the country), the desperate shortage of foreign and local currency, fuel and spare parts, and spiralling inflation (which rose from 130% to 500% during the operation).
- Short-term food shocks, influenced by poor rainfall, but also by the non-availability of farming inputs, the effects of land reform and in affected households, the loss of productivity to HIV/AIDS.



Orphans and other children made vulnerable by HIV/AIDS have been one of the main target groups of the food security operation.

In the light of this developing analysis, the Red Cross response should also focus on the most vulnerable individuals and households in society, cutting across rural and urban environments and providing a vital, comprehensive and integrated safety net.

The HBC programme, which started in Chitungwiza in 1990, has grown from 15 projects to 23; a total of 92 project sites. Beneficiary numbers within each project have also grown, probably reflecting the impact of the food aid component of the HBC overcoming some of the stigma associated with an 'AIDS programme'. The project sites

have been chosen on the basis of HIV infection rates, Zimbabwe Red Cross capacity and the lack of alternative support. While the HBC programme is in many ways the flagship of Zimbabwe Red Cross programming, the national society is involved in a number of other programming areas including water and sanitation, youth, and disaster management. In order to maximize the benefits of the Zimbabwe Red Cross interventions, all these programming areas are increasingly being focused on the HBC beneficiaries. In this way it is hoped to provide an increasingly comprehensive safety net approach for these most vulnerable households, arresting the otherwise inexorable slide into poverty.

During the second quarter of 2003 a thorough re-screening exercise was undertaken to ensure beneficiaries meet the tightened socio-economic criteria. This led to a 30% reduction in the size of the HBC programme. Given no obligation for testing, it is not possible to know the size of HIV affected population within each project site area. The exercise at the same time provided an opportunity to improve the targeting of children and orphans made vulnerable by HIV/AIDS. Children living in child headed households, and orphans of deceased HBC clients remain a priority.

In early March 2003, a tropical cyclone, Japhet, made landfall in Mozambique and the weather patterns over Zimbabwe were strongly influenced for several weeks. Flooding occurred in some parts of the country, damaging crops and displacing people. Zimbabwe Red Cross made several interventions, with support from the Harare Regional Delegation, parallel with its ongoing relief work under this appeal, and the provinces affected were able to cope with assessments and distributions for both purposes simultaneously. Transport arrangements were disrupted due to flooding, but otherwise the food security operations were not greatly affected.

### **Coordination**

At the national level, the Zimbabwe Red Cross and the Federation participate in a number of coordination structures around food aid, health, nutrition, agriculture inputs and urban responses, as well as general coordination meetings called under the UN Humanitarian Coordinator. Both the Federation and the Zimbabwe Red Cross took part in the UN CAP (consolidated appeal process) development workshops, and were influential in bringing an HIV/AIDS perspective to the centre of the thinking in the sectoral discussions and the development of the common humanitarian action plan. Also at the national level, practical coordination between Zimbabwe Red Cross, the Federation, the WFP, CRS and World Vision has covered gaps in the pipeline and ensured continuous food supplies to our beneficiaries. At the local level, effective coordination between Zimbabwe Red Cross and the 11 implementing partners of WFP ensures that there is no overlap in the beneficiary lists, and has helped to improve targeting.

### **Targeted food distribution**

**Objective: To ensure that HIV/AIDS infected and affected people and malnourished children under five have access to nutritious food supplements.**

The objective identified in the appeal was slightly revised in the light of the general distributions also carried out in Zimbabwe. A complete ration was provided to all qualifying beneficiaries, and an enhanced ration to the HBC clients themselves. Cooked food was provided in those locations where Zimbabwe Red Cross had established wet-feeding programmes. The food distributions built up gradually, focusing initially on the urban HBC clients only, and growing over a couple of months. As the situation intensified, the HBC programme grew and the beneficiary numbers increased within each project. At the peak of the hungry period, just before the 2003 harvest, beneficiary numbers were over 105,000, including 11,794 HBC clients.

Distribution Round	Dates	Numbers of Beneficiaries			Total Food distributed (MT)
		HBC clients	Wet feeding	Total	
Nov-Dec	15 Nov – 20 Dec 2002	2,060	-	2,060	35.8
January	6 Jan – 10 Feb	8,141	762	75,978	1,072.5
February	3 Feb – 28 Feb	8,141	857	78,650	1,320.1
March	3 Mar – 31 Mar	10,161	1,001	93,129	1,344.2
April	1 April – 15 May	11,794	1,001	105,034	1,535.4
May	22 May – 10 June	11,794	1,001	105,034	1,540.4
June	23 June – 12 July	9,831	1,001	72,839	936.3
July	17 July – 6 August	8,189	1,001	66,239	1,156.6
<b>Total</b>					<b>8,941.3</b>

International procurement of food was undertaken by the Federation through the Johannesburg office. In times of pipeline interruption, it had been possible to borrow food within Zimbabwe from WFP and from other agencies. The food initially borrowed from WFP was later converted into a donation. It has not always been possible to provide a complete food basket to all beneficiaries, but a full ration of maize meal and either beans or CSB have always been available. The strong volunteer base of Zimbabwe Red Cross was used for relief distribution. Training was provided to recruited volunteers. Existing procedures and documentation was revised and compiled into a distribution manual which was circulated to all distribution points.

The ration for beneficiaries meets Sphere standards, is entirely locally acceptable and is more complete than that of general distributions. The HBC clients additionally receive a supplementary food component in recognition of the greater nutritional needs, especially for protein and calories, of chronically sick people. A further decision was taken to mill all maize distributed. Providing a full ration of milled grain ensures that nutritional needs are completely met and reduces costs to the household. Efforts are also made to improve utilization and access to food. Simple food messages have been devised specifically targeted at the client group, relating to common problems associated with opportunistic infections – sores in the mouth and diarrhoea for example. These are delivered both during the pre-distribution talks and by the care facilitators during their household visits.

The re-screening exercise in April reduced beneficiary numbers considerably. However it was felt inappropriate to undertake also the planned post-harvest reduction in ration sizes given the continued poor situation in Zimbabwe and the extreme vulnerability of the targeted households. Distributions to these households will continue and phase directly into the new Appeal 15/03: Food Security and Integrated Community Care. Assuming reasonable harvests, distributions of full rations will need to continue until May 2004, and then revert to a supplementary basket, locally purchased and delivered through the HBC programme.

At the end of the July distributions, a considerable food stock remains in the country. Much of this stock has been funded through ECHO, which has agreed an extension period for its distribution. All stocks will be distributed by September 2003.

Monitoring is undertaken at distribution points with randomly selected beneficiaries. The rations are checked with a weighing scale (scoops are used for distributions). Beneficiaries are interviewed, providing useful information on the distribution arrangement, convenience of location, and means of transporting food home. Randomly sampled monitoring is also undertaken at household level to assess household vulnerability, food availability and uses, and to determine other possible benefits the food inputs may have on the household: for example that reduced expenditure on food increases money available for school fees, and the regular provision of food has decreased TB medication defaulting rates. Care facilitators are used for the household monitoring due to issue of confidentiality associated with the HBC programme and their knowledge of the clients and circumstances. While the extra workload is stretching these volunteers, they have made valuable inputs to the operation. Other volunteers are recruited and trained for distribution purposes as necessary. Distributions are monitored by provincial staff, including specialist food security officers employed through the operation. Regular visits are made to distribution centers by the

Federation and Zimbabwe Red Cross HQ staff to ensure high and uniform standards across all eight provinces. Feedback from these field visits led to the development of a standard distribution questionnaire and checklist which has proved to be a valuable monitoring tool. Provincial officers gather on a monthly basis for further training, to share information and good practice relating to distributions and the HIV/AIDS programme, and to feedback on problems they are facing in the field.

Getting the distribution network in place presented some major challenges. The highly targeted nature of the beneficiary group inevitably leads to a large number of disbursed distribution points with relatively few beneficiaries at most of them. The detailed information about the breakdown and location of the beneficiaries themselves was not held at the central level but in the provinces. Local communications are poor and storage is extremely limited. Food and beneficiaries must arrive at the distribution point at the same time, and the distribution be completed in a single day. Especially during the rainy season this presents difficulties, compounded by the lack of fuel and spare parts. Work stoppages and stay-aways have contributed to difficulties and prolonged delays.

### **Water and sanitation**

**Objective: To improve the availability of safe water and sanitation to maximize the efficiency and effectiveness of food provision.**

The water and sanitation operation did not start until February 2003. Procurement and beneficiary selection was completed by the end of April and work began in May. Procurement in Zimbabwe was challenging due to the shortage of cement and fuel, a high inflation rate and unpredictable exchange rate. These and other factors resulted in a number of changes to the project. Whereas prices in Zimbabwe were extremely competitive compared to other countries in the region when the project was designed, due to price controls, costs moved to the region norms as these controls were removed. Fuel had to be imported by the Federation to allow the drilling contractor to work. This delayed the start date of drilling. The requirement for geophysical investigation additionally delayed implementation of the drilling. Geophysical investigation is necessary in Zimbabwe to increase the chances of drilling a borehole that accesses groundwater. Groundwater in Zimbabwe is present only in fractured rock. Fractured rock bearing water is difficult to find and even with geophysical investigation some drilled holes are invariably dry. All of these factors and the reduced funding available (175,000 CHF compared to appeal of 228,000 CHF) meant that the number of new boreholes and rehabilitated boreholes was reduced from planned 50.

A contractor was engaged by competitive tender to undertake the construction of new boreholes and the rehabilitation of old boreholes. Thirteen holes were drilled and fitted with handpumps. Twelve pumps were rehabilitated. The contractor performed well under supervision from the Red Cross engineers funded from the project. The cost of the work was competitive. Beneficiaries were selected through coordination with all the actors in the sector in the districts including the rural district councils, UNICEF and NGOs. Target districts were those that had suffered most during the drought (Beitbridge in Mataberland South) or where water related diseases were endemic (Zaka and Bikita in Masvingo). All these districts were receiving food aid from various agencies and communities without safe, adequate water supply within one km were targeted.

The Blair latrine is the standard latrine in Zimbabwe. Households in the villages targeted for improved water supply were selected by village water and sanitation committees to benefit from Blair latrines. Households provided labour and bricks for the latrines while the Red Cross (in cooperation with government health workers) contributed to the training of latrine builders and supply of cement and reinforcement. 400 latrines instead of originally planned 200 will be built. A total of 200 latrines were constructed. Completion of the remaining 200 is delayed due to weather conditions and unavailability of cement. They will be completed by the end of the year. Six field workers were added to the existing Zimbabwe Red Cross water-sanitation team and volunteers helped implement the project. The Federation food security water and sanitation delegate provided on-the-job training, specifically in the rehabilitation of handpumps and in drilling supervision. Eighty-five volunteers were trained in sanitation/hygiene promotion and HIV awareness and performed these services in the selected villages benefiting 17,000 people in the communities. A total of 75 members from 25 village water and sanitation committees received two days training in the management, operation and maintenance of their water supply, in hygiene and sanitation promotion, HIV awareness and in humanitarian principles. This training was performed by branch Red Cross staff with assistance from the local government. This project has improved the project management and technical skills of the Zimbabwe Red Cross staff.

### **Non-food distribution**

**Objective: To ensure that the HIV/AIDS affected beneficiaries have access to basic drugs, winter weather protection and means for income generation for a more dignified lifestyle.**

This objective included the provision of hygiene, medical items and blankets for HBC clients, and additional medical items for the use of care facilitators as they make their weekly household visits.

In December 2002, blankets and towels along with other hygiene items were provided to 8,141 HBC clients in 19 project sites. A total of 8,430 blankets, 8,800 towels, 4.9 MT laundry soap, 2 MT bath soap and 8,496 jars of petroleum jelly were distributed. Basic drugs for 10,000 clients for 12 months and 500 HBC kits were also provided by the Zimbabwe Red Cross.

A key and timely area of intervention was the provision of agriculture inputs for rural households. Despite shortages of seed in the country, adequate stocks were purchased in good time. Distribution took place in November 2002 in Mudzimurema, Zvimba and Shurugwi districts. A total of 1,086 HIV/AIDS affected families in the existing home-based care programme each received 10 kg maize seeds, one kilogram of cow pea seeds, 1 package vegetable seeds and 150 kg fertilizer. Another 2,094 HIV/AIDS affected households in Buhera, Beitbridge, Gwanda, Chivi and Zvishavane districts also received agricultural starter packs which contained 4 kg maize seeds, 2.5 kg sorghum seeds, one kilogram of cow pea seeds, and 1 package of vegetable seeds. Yields were however limited due to lack of rainfall in most parts of the country. Zimbabwe was divided into two parts, following government land classification based on average rainfall. Different packages of inputs were provided in natural regions II and III (where rainfall is more reliable) and in natural regions IV and V (where rain-fed agriculture is marginal). This approach will be taken again in 2003, with greater emphasis on drought resistant crops (in line with the Zimbabwe Red Cross disaster preparedness strategy) and livestock inputs in the driest areas.

### **Buffer Stock**

This objective has not been necessary as it proved possible to hold adequate buffer stocks and manage the pipeline in Zimbabwe. See Lesotho.

### **Capacity building**

**Objective: To strengthen the Zimbabwe Red Cross by increasing its capacity at central and divisional level, particularly in the field of human and logistical resources.**

A large-scale operation such as this provides excellent opportunities to build capacity of the national society. At the initial stage of the operation, much of the procurement, logistics, and planning for the distributions was undertaken by the Federation but the majority of these tasks has been gradually handed over to Zimbabwe Red Cross. Access to resources is usually the constraining factor for any operation. Through the food security appeal, the Zimbabwe Red Cross was equipped with several computers, mobile telephones, and fax machines at HQ and provincial level. A 4WD vehicle has been procured for the national food security officer, and eight motorbikes have been allocated to the provinces in support of monitoring activities. In addition, support to staff positions has also been made available in the HQ logistics and the disaster response departments. New positions were created in the provinces to support the food distributions.

The Zimbabwe Red Cross is also undertaking, with minimal support from the Federation, the complex task of analyzing field data, quantifying requirements, and developing a distribution plan to reach all 92 project sites, maximizing the use of the available vehicles and spreading the load as far as possible for each of the provinces. Volunteer training has been undertaken in all eight provinces, including training on the Red Cross Movement, distributions, reporting, sexual exploitation and the abuse of power. Zimbabwe Red Cross has also carried out further training, on induction, sexual exploitation and the abuse of power, and reporting for their staff. The Zimbabwe Red Cross existing distribution procedures have been revised in the light of the scale of the response and the use of HBC as a vehicle. These revisions have been collated in the form of a manual. This manual will be updated during August following feedback from the provincial officers.

With support from the British Red Cross, the national society undertook a baseline study examining the livelihoods of the HBC clients in two areas, one rural and one urban. The field work and analysis was undertaken by Zimbabwe Red Cross provincial and HQ staff. In addition to providing some clear baseline data as basis for the monitoring processes, the survey was of great value in building skills and knowledge of livelihoods analysis within Zimbabwe

Red Cross provincial staff. For the findings and recommendations of this study please see the section on assessment and lessons learned.

Along with these initiatives, the Zimbabwe Red Cross has been implementing its own management development. During the course of the operation, Zimbabwe Red Cross has also created and staffed an internal audit department, which has tackled a number of issues arising through the programme.

### **Assessment and lessons learned**

There exists a significant bank of historic data for the HBC programmes, including a baseline survey for each project site. However, during analysis for purposes of monitoring and establishing the impact of food security, this information was found insufficient. Efforts are being made within the HBC programme to improve the reporting and monitoring. Changes have been made to the structure of the baselines for the newly established project sites as well as to the registration and management of client records. In the light of this shortfall, two baselines surveys were completed to provide at least indicative data for the food security interventions. This provided the first snapshot of the composition of HBC project clients in terms of health, wealth and livelihoods in rural and urban areas. It also provided the field data, which led to the improved targeting criteria implemented immediately after the harvest period 2003.

Despite ongoing monitoring at both distributions points and household level, the capacity of Zimbabwe Red Cross to analyze the data collected remains limited. This will be a prioritized area for reinforcement in the new appeal. There remains an opportunity for the Zimbabwe Red Cross and the Federation to undertake some research about the interface between HIV, nutrition and vulnerability. It was agreed with the Zimbabwe Red Cross early in the operation to transfer responsibility for managing the logistics, specifically the trucking operation, to Zimbabwe Red Cross. This decision however did not adequately take into account the capacities of the national society and had to be reversed. Responsibilities were handed over to Zimbabwe Red Cross against a set of jointly identified criteria, rather than against a timetable.

The programme managers received strong feedback that it would have been appropriate to undertake seeds distribution in urban and peri-urban areas as well as rural. People in these areas usually have good access to water, and have access to small areas on which to plant vegetables or cereals. This will be implemented in the new appeal.

Various programmes within Zimbabwe Red Cross offer a range of training to the staff and volunteers across all sectors. These training programmes could be better coordinated in time and content to maximize the benefits and minimize costs. There is a real need to train more care facilitators in some of the HBC projects which is being implemented at the end of the appeal period. It is likely that beneficiary numbers will grow during 2003-4 in a similar manner as during this appeal, and this growth must be planned for at early stage.

Key findings of the two baseline studies included:

- The wealthy are perhaps at higher risk of HIV/AIDS infection (disposable incomes), although the effects of HIV/AIDS infection are greater in those identified as 'very poor' by the survey as they die more quickly once the disease becomes symptomatic.
- A greater proportion of clients in the urban areas are known to be HIV positive. This probably reflects greater opportunities for testing, but also highlights the lack of an agreed clinical case definition in Zimbabwe.
- Access to services of health, education and social welfare is better in the urban areas; access to GMB maize and public works programmes is better in the rural areas.
- The impact of the drought has been: reduced access to food from people's own production; increased price of staple and non-staple foods; increased time spent looking for food/money; decreased value of savings and pensions; and reduced value of government social welfare programmes.
- The impact of HIV/AIDS on affected households has been: increased numbers of widows, widowers and orphans; increased time spent caring for sick family members; deteriorated dependency ratio; reduced expenditure on inputs; increased medical costs; increased movement of people from rural to urban (looking for treatment) and from urban to rural (looking for a cheaper lifestyle).
- Factors that impacted particularly on the poor include: a worsened dependency ratio with households having significantly fewer productive adults and more dependents, less access to relatives in urban centres or abroad,

less access to formal employment and pensions, less access to nutritious foods and education. In the rural areas the 'very poor' received less WFP food aid than the 'poor' and 'middle' wealth groups, reflecting the double stigma of poverty and HIV/AIDS.

Recommendations of the study included:

- Provision of full nutritional support for HBC client households while the present situation prevails.
- Inclusion of nutrition messages through the care facilitators and during distributions.
- Targeting criteria to identify the most vulnerable (poor/very poor) should resources become a constraint.
- An emphasis on targeting HIV/AIDS (this has been a debatable subject), including the development of standard clinical criteria for the identification of clients; increased focus on orphans and child-headed households, the need for viable projects for support groups.
- An emphasis on field trips during project exchange visits between HBC projects.
- The development of baselines to enable change to be measured over time.
- The inclusion of two types of monitoring: food basket monitoring at the distribution point and impact monitoring at the households.

With the exception of the recommendation around inter-project exchanges, all the recommendations above have been implemented in the food security operation. The inter-project exchanges will restart during the third quarter of 2003.

## SOUTH AFRICA

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### Preparation

The **South African Red Cross Society** has secured office premises in Messina municipality office complex as a part of their activities related to the monitoring of the border with Zimbabwe. Staff and equipment are being put in place and the office will be under the supervision of the Mokopane branch. It will also be the base for all activities including ongoing mass population movement related activities and other activities still to be implemented including home-based care, HIV/AIDS and first aid. A vehicle has been purchased to facilitate logistics between the Mokopane branch and Messina office. Volunteers are now monitoring the border situation in collaboration with the local Joint Operations Committee (JOC) for possible cross border population movement. The JOC comprises of various government departments (local, emergency services, police, army, hospitals, and home affairs), the UNHCR, South African Red Cross and other local and international NGO's (such Save the Children). The current situation at the border is normal, although it is feared that the steadily deteriorating situation in Zimbabwe may possibly result in increased cross border migration into South Africa.

In preparation for the possible arrival of large numbers of refugees into South Africa, the South African Red Cross has recruited 40 volunteers in Messina at the beginning of 2003 to respond to the humanitarian needs that may arise. Forty volunteers have been trained in first aid. Home-based care training will follow shortly along with the implementation of a South African Red Cross youth HIV/AIDS peer education project. The establishment of a community home-based care HIV/Aids project is also currently being considered for Messina as part of the expansion of the national project and the existing volunteers can be utilized to assist the new projects.

### Contingency planning

**Objective: The implementation of a contingency plan for the possible mass movement of people across the border from Zimbabwe and refugee camp preparedness for an initial period of three months.**

Included in appeal targets is also camp management training for 80 volunteers. Training in camp management for key staff members of the South African Red Cross took place in February. The four staff members undertook field trips to refugee camps in Malawi and Zambia in order to gain experience in camp management. In addition the Federation regional delegation in Harare facilitated a disaster management and camp management training workshop in Johannesburg from 31 March to 4 April for 26 South African Red Cross staff and volunteers from various branches. They in turn disseminated training at local level. The national society has been officially appointed to take care of camp management for the identified camp site near Messina. A South African Red Cross disaster management meeting took place in East London on 13 and 14 May 2003 to develop a plan of action to roll out the training acquired thus far to other provinces. Under the new food security appeal, the Western Cape will be

the next province to receive the Disaster management training and the Gauteng province will conduct VCA training and carry out a pilot VCA in October 2003.

### **Federation support and coordination**

**Objective: To support and contribute to the Federation Appeal by supporting the components of the operation based in South Africa.**

In the original appeal the South African Red Cross was planned to set up a regional office at the Federation's OMCC premises in Johannesburg. Due to concerns of sustaining the planned regional office when the food operation comes to an end, it was decided to strengthen instead the existing South African Red Cross regional office premises in Germiston. Through coordination activities such as the JOC at provincial level and with other role players outside of the JOC meetings South African Red Cross has raised its profile in the field of population movement. South African Red Cross has also received greater recognition in recent months in terms of disaster relief and was called upon to distribute relief in the Limpopo and Mpumalanga provinces in the northern areas and later in the Eastern Cape as well. The regional office also currently represents South African Red Cross at the national governments Disaster Management Committee.

A minibus was acquired to improve its logistical capacity to support the region covering four provinces Gauteng, Mpumalanga, Limpopo and North West. The regional office has also upgraded its communications and computer systems. Three South African Red Cross staff undertook field trips to refugee camps in Malawi and Zambia to gain camp management experience. Training has been implemented in the region as previous objectives mentioned. A regional disaster response team has been set up to cover the four provinces serviced by the regional office following the disaster management training.

### **Assessment and lessons learned**

Implementation of the project was affected by a delay in transferring the funds. A number of activities were however implemented that have set in place a strong platform for further development. This includes:

- An established presence in Messina
- Trained volunteers in place for mass population movement, refugee camp, disaster management and health and HIV/AIDS education activities.
- A stronger South African Red Cross regional office to serve the four provinces covered by the office and improved coordination between South African Red Cross branches in the region.
- A network of coordinating partners from both government and the NGO sector that can be utilized to deal with issues other than mass population movement and refugee camps.

The focus of the project is on preparation and the South African Red Cross was able to utilize its own strength in recruiting volunteers and training. Where South African Red Cross lacked the capacity to conduct relevant training, the Regional Delegation could support South African Red Cross by providing the necessary skilled facilitators. Although this newly acquired disaster response capacity has not so far been put to test, it is clear that South African Red Cross has to continue strengthening its capacity in disaster management not only in the northern provinces but throughout the country. The threat of mass population movement across the borders still exists and South African Red Cross needs to remain prepared.

The food security situation in South Africa is also serious in communities affected by poverty and HIV/AIDS. It would have been beneficial to South African Red Cross to be included in the actual food interventions to build on the other capacities gained. The South African Red Cross acknowledged its limited capacity in disaster response prior to the implementation of this project and recognizes the opportunities that this project has provided to build these capacities. The South African Red Cross will continue to build on capacities already gained from this project.

**MOZAMBIQUE, NAMIBIA AND ANGOLA**

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Although the appeal made provision for inclusions of food security interventions in Mozambique, Namibia and/or Angola, the food security operation has not extended to any of these three countries. A separate emergency appeal was launched last year to address the post conflict humanitarian needs in Angola. The prevailing food crisis in Namibia as a result of reduced crop output and HIV/AIDS demands innovative and integrated approaches to address the changing patterns of vulnerability. The new appeal 15/03 Southern Africa: Food Security and Integrated Community Care has included a plan to provide nutritional food supplements and other support to the most vulnerable people and orphans affected by HIV/AIDS and drought.

**TRANSPORT SUPPORT PACKAGE (TSP) FOR WFP**



The WFP Southern Africa Crisis Appeal operation aimed to provide over one million MT of food aid to 10.2 million people in six southern African countries: Lesotho, Malawi, Mozambique, Swaziland Zambia and Zimbabwe. Food distribution would be an extraordinary challenge given the high numbers of beneficiaries and the vast distances to cover. With the support of the Norwegian government, the Norwegian Red Cross and other national societies, the Federation worked with WFP to provide a Transport Support Package, as part of an operational partnership with WFP for the distribution of food throughout the region from 1 July 2002 until 31 March 2003. The Operational Partnership Agreement with WFP was executed by the Federation Food Security head of operations and WFP regional director on 30 August 2002 at the WFP offices in

Johannesburg. The TSP was extended to 30 June 2003 and would operate in Zambia, Malawi, Zimbabwe and Lesotho. The TSP was the largest food transport operation that the Federation has ever carried out. The Federation was to transport food provided by WFP, not only for distributions by Southern African national societies, but also on behalf of other agencies working with WFP in response to the emergency, therefore helping to reach hundreds of thousands more people in addition to the people the national societies and the Federation would directly support through their own distributions.

The Norwegian Red Cross approached the Norwegian government to supply a number of vehicles, ancillary equipment and financial assistance to support the relief operation. The Norwegian foreign ministry agreed to provide the Federation with 200 M620 all-wheel-drive trucks and spare parts along with financial support to prepare the trucks and fully equip the package. The package was off-loaded in Durban on 23 August 2003.

**Components of the Transport Support Package**

Quantity	Item
200	M-621 6x6 5 MT distribution trucks
2	M-621 6x6 4,500 ltr fuel tankers
1	M-35 recovery vehicle
10	Toyota landcruiser support vehicles
10	Truck/trailer combinations
4	Toyota pick-ups

**Preparation of TSP deployment**

Some of the Norwegian Red Cross delegates arrived in Durban during the third week of August to commence with the procurement of additional tools for the fleet’s workshop, and arrangements were made by the Federation in consultation with the WFP for the shipment of vehicles by rail. At the same time, the TSP telecommunications team has been ensuring that vehicles and workshops are appropriately equipped for communications. Due to late

contracting, railway wagons were not available and the transport of the trucks to the countries of operation was executed over a period of three weeks. The first railway shipment left Durban on 3 September and arrived in Maseru, Lesotho on 6 September. Due to some custom formalities the last railway wagon arrived in Lusaka, Zambia only on 29 November.

The request for delegates started in the middle of September. A team of delegates from the Norwegian, Spanish and Austrian Red Cross had taken a leave of absence from their regular jobs and in some instances volunteered to work with the Federation and the national societies in Southern Africa.

The employment of drivers posed a challenge as the terms and conditions regarding the hiring of drivers would need a great deal of flexibility due to the need to constantly relocate TSP vehicles between the operating countries. As the national societies in Southern Africa were fully engaged by their respective emergency operations, in addition to their ongoing core activities, the Federation entered into agreement with a South African HR agency to provide drivers. The Federation's Human Resources (HR) coordinator has been made responsible for coordinating the contracting of drivers. Following the contracting of the drivers, four Norwegian Red Cross delegates with previous experience working with and maintaining M6 vehicles and in trucking were deployed to work with the locally contracted drivers. Maintenance of the fleet was supervised by the Federation's fleet manager and carried out by the Federation's technical delegates, sent by the Norwegian Red Cross, in strategically placed workshops. Additional staff for workshops was to be recruited locally depending on need. Local drivers assigned to the TSP received technical training as well as training on an overview of the Red Cross/Red Crescent Movement and basic humanitarian principles, a security briefing and a briefing in regard to the abuse of power.

The WFP country offices were responsible for the importation, registration and allocation of the trucks but different approaches and solutions were undertaken in different countries due to lack of coordination.

### **Deployment of TSP**

Due to long delays in some of the countries because of constraints in the transportation, import and registration of the trucks, the deployment of TSP took phases to implement in the four countries of operation, starting with Malawi, Lesotho, Zambia and Zimbabwe.

However, as food distributions started in the countries of operations, the importance of the M6 trucks had become more evident. The TSP M6 trucks had been able to ensure successful delivery of food aid to many remote areas that were not accessible by conventional vehicles due to difficult road conditions. The M6 trucks, designed and equipped for transportation in extreme conditions, were the only viable means of delivering food aid to the most inaccessible regions where lack of access to other food sources has made the impact of the food situation particularly severe. It had not been possible to hire commercial trucks to carry out transportation on the most difficult roads, as it carried great risks for less equipped vehicles, and limited chances of actually being able to transport the food to the final destinations.



The all-terrain TSP M6 trucks ensured the successful delivery of food aid to many remote areas that were not accessible by conventional vehicles due to difficult road conditions .

Towards beginning of 2003, the 200-strong fleet of powerful all-terrain vehicles, started to gain full momentum with acquired experience and improved efficiency. By the end of the operation in June, the TSP had driven 3.5 million kilometers and delivered some 58,500 MT of food in Lesotho, Malawi, Zambia and Zimbabwe.

**Metric tones (MT) of food transported by TSP**

Month	Lesotho	Malawi	Zambia	Zimbabwe	Sub-total (MT)
Nov – Dec 2002	1,018.7	849.5	3,177.6	1,373.3	6,419.1
January 2003	0.0	2,101.9		1,004.0	3,105.9
February 2003	452.3	4,007.7	3,394.3	873.4	8,727.7
March 2003	683.2	4,193.3	4,272.1	413.7	9,562.3
April 2003	788.6	4,252.9	6,253.5	1,622.1	12,917.1
May 2003	675.9	2,548.8	3,807.5	1,552.2	8,584.4
June 2003	524.2	2,866.3	4,430.0	1,348.7	9,169.2
<b>Total</b>	4,142.9	20,820.4	25,335	8,187.4	<b>58,485.7</b>

The operational partnership with WFP had shown the importance of humanitarian agencies developing new strategies to collaborate and coordinate given the massive needs of Southern Africa. The TSP operation allowed the Red Cross, WFP and its implementing partners handling final distribution, to maximize use of available resources. Twenty-four TSP trucks were located in Lesotho (two clusters around Mafeteng and Thaba Tseka), 58 in Malawi (three clusters in the north, the central and the south), and 116 in Zambia (five clusters). In Malawi and Zambia they were supported by fuel tankers and eight long-haul trucks normally based in Zimbabwe. The long-haul trucks were used as backup for the WFP when local transportation was not available. The trucks initially delivered spare parts, rubb halls, oil, lubricants and forklifts to destinations in Zimbabwe, Malawi and Zambia but had since December been involved in food transport. By the end of the operation, 192 M-621 trucks were still operational. Eight were lost during the operation mainly because of driver's technical failure.

**Assessment and lessons learned**

During May, a comprehensive evaluation of TSP was undertaken. One encouraging finding is that the package has been operated at a lower cost (USD 53.4 for each tonne / USD 0.89 for one kilometer driven) than expected given the complex operational context and terrain. The trucks have had an impact on the overall operation and possibly saved lives and avoided internal population movement.

The trucks are maintenance demanding (more than 30 years old) but easy to be undertaken by the driver himself. Its multi-fuel capacity was also proven when Zambia experienced fuel shortages and kerosene had to be used. Spare parts, especially consumables, were thought to be a problem but have been available from South Africa.

Some lessons learned from the operation include:

- A thorough training should be arranged for the transport and workshop managers on management issues prior to implementation. The course should cover fleet management, workshop management, reporting, human resources management, vehicle knowledge, Red Cross principles and abuse of power;
- At least one month before the arrival of the vehicle fleet, the management team should be in place to:
  - Establish contacts with the partner organizations in order to formalize responsibilities, information flow and communication.
  - Contract a forwarding agent to prepare and ease reception and custom clearance/formalities.
  - Establish communication with the national society and assess their capacity to support and involve in the future operation
  - As appropriate, identify and contract an outsourcing agency for required staff
  - Identify and contract a logistical company/agency to perform movements of trucks to their destinations if the vehicles are not self-driven.
  - Identify and contract fuel company/ies.

The WFP, the Federation and Norwegian Red Cross decided to continue the Transport Support Package for another year from July 2003 to June 2004. The package is now being operated in Lesotho, Malawi, Zambia and Mozambique under the strategic management of WFP. The Federation provides fully-funded transport manager and workshop manager for each country of operation, seconded to WFP country offices to support the operation and maintenance of the transport fleet.

## **RED CROSS AND RED CRESCENT MOVEMENT - PRINCIPLES AND INITIATIVES**

- Sphere standards were respected for food aid in relation to nutritional requirements and rations.
- Women and child-headed households, subsistence farmers, and elderly with low income, were given priority in the beneficiary selection.
- Women were prioritized throughout the implementation of the operation, not only as beneficiaries but as participants in beneficiary assessment, and volunteers in relief activities. Women comprised about half of the Red Cross volunteer teams involved in distribution and monitoring. Monitoring results confirmed that more than 50% of the recipients of relief assistance consist of women, due to traditional roles as caretakers particularly of orphans.
- The Southern Africa Food Security Operations were closely linked with various other programmes in the region, and placed strong emphasis especially on education in relation with HIV/AIDS, which is causing widespread devastation in Southern Africa. The national societies have prioritized HIV/AIDS in line with the Ouagadougou declaration and ARCHI 2010. Home-based care, HIV/AIDS prevention and advocacy for PLWHA to reduce stigma and discrimination have become the fundamental part of the Red Cross work in the region.
- The Federation is a member of the IASC (Inter-Agency Standing Committee) task force on sexual abuse and is placing strong emphasis on addressing abuse of power and humanitarian aid vis a vis sexual exploitation. During the course of the operation, the Federation delegates had to sign on new codes of conduct which include various new issues addressing abuse of power. Some of the national society staff were also trained on preventing sexual abuse and exploitation, and rolled out training within the national society at different levels.
- Efforts were also made to ensure all Red Cross volunteers and staff have good knowledge of the fundamental principles of the Red Cross Red Crescent Movement. These training sessions were reinforced when necessary. ICRC supported some of these sessions.

The provisional financial report is attached below as an annex to this Interim Final Report. It reflects the current information on income, expenditures and closing balance.

The issuance of a definitive Final Report has been delayed until such time as the Final Financial Report can be validated; this is anticipated for mid-December 2003.

### ***For further information please contact:***

- *Alasan Senghore, Federation Head of Regional Delegation, Harare; Email [ifrczw02@ifrc.org](mailto:ifrczw02@ifrc.org); Phone 263 4 705 166; Fax: 263 4 708 784*
- *Alfred Hasenohrl, Federation Regional Food Security Coordinator, Harare: Email [ifrcsa02@ifrc.org](mailto:ifrcsa02@ifrc.org); Phone 263 4 705 166; Mobile: 263 91 263855; Fax: 263 4 708 784*
- *Richard Hunlédé, Federation Regional Officer, Geneva; Email [Richard.hunlede@ifrc.org](mailto:Richard.hunlede@ifrc.org); Phone 41 22 730 43 14; Fax 41 22 733 03 95*

*All International Federation Operations seek to adhere to the Code of Conduct and are committed to the Humanitarian Charter and Minimum Standards in Disaster Response (SPHERE Project) in delivering assistance to the most vulnerable. The procurement for this operation was carried out in full compliance and conformity with the Federation's standard for international and local procurement.*

*For support to or for further information concerning Federation operations in this or other countries, please access the Federation website at <http://www.ifrc.org>.*

*This operation sought to administer to the immediate requirements of the victims of this disaster. Subsequent operations to promote sustainable development or long-term capacity building will require additional support, and these programmes are outlined on the Federation's website.*

***[<Provisional Financial Statement below - Click here to return to title page>](#)***

## Project Summary Financial Statement by Appeal

All Donors.

Period: January of 2002 through October of 2003

Appeal: 12/02 - SOUTHERN AFRICA: FOOD INSECURITY (02/05/2002 - 01/05/2003)

Project	Opening	INCOME					EXPENDITURE									Closing
		Voluntary Contributions.		Transfers	Other Income	Total Income	Supplies	Capital	Transport	PS	Personnel	General Expenditure	Transfers	Provisions	Total Expenditure	
		Selected Donors	Others													
PLS507 - Lesotho-SA Food Security 2002	0	1,423,055	0	55,858	0	1,478,913	561,461	189,976	213,595	109,176	167,647	104,999	0	0	1,346,854	132,059
PMW507 - Malawi - SA Food security 2002	0	1,418,255	0	-87,690	640	1,331,205	398,759	102,540	153,770	78,084	203,251	131,479	0	0	1,067,883	263,322
PZA507 - South Africa - SA Food Secu 2002	0	223,500	0	0	0	223,500	0	76,693	4,481	9,585	35,950	20,749	0	0	147,458	76,042
P63507 - S.Africa - Food Insecuti 2002	0	5,490,679	0	-3,079,389	0	2,411,290	894	224,510	167,245	232,401	1,045,156	733,586	0	0	2,403,792	7,498
P63508 - S.Africa - Food Insecuti WatSan	0	0	0	771,066	0	771,066	429,297	58,891	53,036	50,677	94,839	57,190	0	0	743,930	27,136
P63509 - S.Africa - WFP Food Security	0	5,000,178	0	146,350	0	5,146,528	0	8,567	3,756,403	987,569	1,978,376	336,922	0	-767	7,067,070	-1,920,542
P63510 - SA-Operations Support Food Security	0	44,265	0	36,314	0	80,579	0	0	64	2,552	5,977	30,667	0	0	39,260	41,319
PSZ507 - SZ-South.Africa Food Insecurity	0	1,105,995	0	-140,000	0	965,995	675,497	99,013	56,775	65,552	24,945	25,915	0	0	947,697	18,298
PSZ508 - SZ-ECHO Swaziland Food Security	0	793,223	0	0	0	793,223	727,227	0	115,228	63,424	62,058	7,816	0	0	975,753	-182,530
PZM507 - Zambia- SA Food Security 2002	0	3,727,650	0	572,534	0	4,300,184	2,847,517	156,384	430,276	320,247	368,546	215,407	0	-38	4,338,339	-38,155
PZW507 - Zimbabwe - SA Food Security 2002	0	3,325,265	0	1,021,146	0	4,346,411	3,286,676	96,083	500,096	285,871	110,449	78,122	0	0	4,357,297	-10,886
PZW508 - Zimbabwe - Food Insecuti ECHO	0	1,978,075	0	0	0	1,978,075	1,704,760	0	542,624	167,579	72,918	16,207	0	0	2,504,088	-526,013
<b>12/02</b>	0	24,530,140	0	-703,811	640	23,826,969	10,632,088	1,012,657	5,993,593	2,372,717	4,170,112	1,759,059	0	-805	25,939,421	-2,112,452
<b>Grand Totals</b>	0	24,530,140	0	-703,811	640	23,826,969	10,632,088	1,012,657	5,993,593	2,372,717	4,170,112	1,759,059	0	-805	25,939,421	-2,112,452

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