

PROGRAMME UPDATE



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

SOUTHERN AFRICA

22 November, 2002

This Programme Update is intended for reporting on Annual Appeals.

Appeal No. 01.16/2002

Appeal Target: CHF 15,818,226 (2002) and CHF 21,272,813 (2003)

Programme Update No. 2; Period covered: July - September, 2002; last Programme Update (no. 1) issued 5 July, 2002

"At a Glance"

Appeal coverage: 53.7%

Related Appeals: 12/02; Southern Africa: Food Security and Humanitarian Assistance

Outstanding needs: CHF 8,488,147

Operational Developments:

The general health of the people in the southern Africa region continues to deteriorate as food shortages becomes more acute. The region is badly affected by the worst drought situation yet to hit the region. Lack of food is the most serious concern and malnutrition rates are on the rise. The impact of food shortages is made worse by the high rates of HIV infection across the region with up to 34% of the adult population in some countries. To people living with HIV/AIDS, the food insecurity situation is detrimental to their health and their chance of survival diminishes.

The food insecurity operation in five out of ten countries in the southern Africa region is the main priority for the Federation and an operations centre has been set up in Johannesburg for logistical purposes. The food insecurity appeal was revised and was launched in Johannesburg on July 22nd. The revised appeal covers Lesotho, Malawi, Swaziland, Zambia and Zimbabwe. The revised appeal seeks CHF 89,285,274 (US 61.1 m) to assist a minimum of 1.3 million beneficiaries for twelve months. Zimbabwe is the worst hit country with more than six million people in need of food assistance within the coming months.

In Angola, following the cease fire, a Federation assessment mission was carried out from July 15th to August 2nd, 2002. The enormous humanitarian needs were apparent and the assessment resulted in the launch of an emergency appeal for Angola which was launched on September 6th. The appeal seeks CHF 4,966,000 to assist 100,000 beneficiaries for six months. Capacity building and organisational development are the base for the appeal intended to reinforce and strengthen the Angola Red Cross to be able to play an important role in the reconstruction of the country.

The world summit on sustainable development took place in Johannesburg from August 24th to September 4th. The President of the International Federation participated together with a group of staff from Geneva. The President underlined that with 40 million people living with HIV/AIDS and their number growing daily, the pandemic is the greatest threat to development this century, particularly in Africa. The President also recalled that despite medical advances and global efforts to improve health, 13 million people die each year from preventable diseases like HIV/AIDS and malaria - more than natural disaster and conflicts combined. In

connection with the summit, the President visited the South African Red Cross branch in Soweto and also travelled to Malawi.

The South Africa Red Cross Society hosted a press conference on 19 June together with the regional office to mark the launch of the tenth edition of the World Disasters Report. The President of the South Africa Red Cross gave the opening speech, emphasizing the current food emergency in the region, and the HoD of Mozambique Delegation introduced the content on the report with a special focus on lessons learned from the Mozambique floods. The press conference resulted in widespread coverage.

At the regional office in Harare, the reporting period has been dominated mainly by the appeal process and the large number of visitors to the region in relation to the food security operation.

Regional programming continued to build on previously successful approaches, particularly the facilitation of intra-regional networks, knowledge exchange, training and initiatives that address common cross-regional priorities. The food security pilot project in Swaziland is an example of this as is the integrated watsan and HIV/AIDS pilot project in Zambia. Integrated programme initiatives are being piloted in the acknowledgment of the interconnectedness of programmes and to optimise the impact of Red Cross activities on the lives of the most vulnerable communities. In response to realisation that individual programme support is often limited and must be harnessed in more effective ways, efforts were directed to move away from vertical programme planning to a more integrated approach at all levels. The Southern Africa Delegation continued to monitor, provide technical advice and support each National Society's specific programme area as outlined in the core activities of Strategy 2010 and in the National Society's own strategic plans.

During the period under review, the Federation's regional strategy, based on the Secretariat Priorities for 2002-2003, was developed to support the Southern Africa National Societies in the following activities: building capacity and accountability within national societies; strengthening regional capacity to respond to rapid and slow onset disasters; scaling up HIV/AIDS interventions, including through stronger volunteer management; community-based disaster preparedness with a focus on food security; water and sanitation activities; regional cooperation and knowledge sharing within the region; cooperation agreement strategies (CAS) based on national societies' priorities and building partnerships.

Of high priority during the period was the conclusion of four CAS's for Malawi, Swaziland, Mozambique and Zimbabwe. Namibia's CAS is awaiting final input by Participating National Societies (PNS) before it can be approved by the National Society's governing board. Through CAS, the regional office assumed its main role of coordination and facilitated the harmonisation of external Red Cross partnerships in priority areas and encouraged the National Societies to retain ownership of their development process whilst strengthening their capacity for service delivery. CAS have been and will continue to be the key tool in the efforts to coordinate the programming of various partners.

Disaster Preparedness and Disaster Response

During the reporting period, the DP/DR department has continued to implement its activities to support the national societies to build their capacity in disaster management. However, the food insecurity operation in the region has been the main focus of attention with several meetings held with relevant stakeholders to ensure a coordinated and appropriate response to the crisis as well as hosting a large number of visitors coming to the region in relation to the food insecurity appeal.

Following the poor response to the Federation's food security appeal launched on 2 May, 2002, a revised appeal for Southern Africa was launched in Johannesburg on 22 July, 2002. The revised appeal seeks CHF 89,285,274 (US 61,6 million) to assist 1,3 million beneficiaries for 12 months in Lesotho, Malawi, Swaziland, Zambia and Zimbabwe.

Through the national societies and in co-operation with the World Food Programme, the International Federation will distribute 61,213 MT food assistance in the five countries. Hygiene items, blankets, medical supplies, seeds and fertilisers will also be part of the national Red Cross programmes. The appeal also includes improvement of water and sanitation facilities in the rural communities.

A transport support package to facilitate the delivery of aid to remote areas has been provided by the Norwegian government, through the Norwegian Red Cross. 231 trucks arrived in Durban, South Africa, 23 August and are currently being delivered to the appropriate countries.

The response so far has seen Malawi Red Cross Society, with technical support from the American Red Cross, distributing WFP/USAID donated maize and pulses at distribution points in five districts. The Zambia Red Cross Society, with assistance from the Federation, is preparing to distribute food to 24,000 beneficiaries. In Zimbabwe, food distribution will be conducted by Zimbabwe Red Cross Society through its home based care programmes. The Baphalali Swaziland Red Cross is distributing food donated by WFP to 45,000 beneficiaries. In Lesotho, meetings are still taking place to strengthen its technical capacity to carry out the planned activities.

Since August, a cholera outbreak has been affecting two districts in the Masvingo Province, Zimbabwe, with close to 500 people affected and 25 deaths. The Ministry of Health called upon support from the Zimbabwe Red Cross to make use of its volunteer network to distribute cholera kits. The Society supported the MoH by providing four cholera kits, hospital tents for cholera treatment centres and bicycles. The Society has mobilised its volunteers to engage in hygiene promotion activities in the affected communities. Jerry cans and water chlorinating tablets have been distributed. However, there is a need to mobilise and train even more volunteers as the disease is spreading fast.

Objective 1: Improved national society capacity to advocate with government for social protection programmes that pro-actively assist vulnerable communities in the aftermath of disasters to recover from shocks.

Sensitization and consultations conducted indicated that the national societies do not have well-structured advocacy action plans in place. Some countries have social protection programmes to cushion the vulnerable members of society. The national societies are being urged to enter into dialogue with their respective governments and to raise advocacy issues in all relevant fora. Advocacy issues are being raised in the current food security operation fora with various stakeholders including government departments.

Objective 2: Improved national society and regional capacity to prepare for and respond to disasters and the use of community based early warning systems (CBEWS).

Following assessment of national society disaster management capacity, priorities have been agreed and plans of action developed, some of which will extend over the next two years. Namibia has no current disaster management programme and has recruited a disaster management officer to spearhead the programme.

The main national society developmental needs identified included the:

- Development of community based early warning systems that include establishing situation monitoring systems as part of disaster preparedness. The regional office will support the national societies to establish these.
- Capacity of the national societies in conducting credible disaster assessments has been identified by the societies themselves as being weak. This will be the focus of the next RDRT training.
- The national societies of Botswana, Namibia, South Africa and Zambia have prioritised the need to conduct VCA as a diagnostic and planning tool to enable better understanding of the community vulnerabilities and help in prioritising developmental actions.

At the regional office level, information sharing with relevant agencies and partners through regular meetings and reports is on-going, as well as the maintenance of the situation monitoring system which was introduced by the department to monitor and track potential hazards and disasters.

Objective 3: Improved state of readiness at regional level through the establishment of a Regional Disaster Response Team as well as emergency stocks for 5000 people.

Ideal rapid onset disaster response benchmarks, that serve to inform regional staff and national societies on the ideal procedures to follow when a disaster strikes have been developed, including the stock piling of non-food emergency stocks at the warehouse in Harare. Those that address slow onset disasters such as famine are being developed through the food security strategy which is in the pipeline.

A Regional Disaster Response Team (RDRT) has been established and members have been deployed on several missions. Review of current members and updating of the database is done on-going. Currently, preparations for the annual RDRT are in progress although the dates had to be deferred until late November due to current food insecurity interventions. To strengthen response capacities this year's training will focus on the identified weaknesses which include disaster assessment, reporting and co-ordination skills.

Objective 4: Improved household food security through sustainable food security programmes in Botswana, Lesotho, Swaziland and Zambia.

The Swaziland food security pilot programme is on course with all programme staff recruited and implementation of activities having taken off despite initial delays. The task force team established to monitor the programme held its second meeting in Swaziland end of June. Separate reports for the food security project are available from the regional office upon request.

Through the initiatives being undertaken to overcome the current food crisis in the region, the national societies of Botswana, Lesotho and Zambia are identifying sustainable food security initiatives to be incorporated into all their sector programmes. Furthermore, the Food Security Consultant, who was engaged to oversee the development of the Regional Food Security Strategy, has completed the first draft of the document which is now going through consultations with various stakeholders.

Objective 5: Promotion of SPHERE standards in DP and DR by the end of 2002.

The DP/DR department continues to explore every opportunity to promote the SPHERE standards in relief packages through training and workshops conducted by other departments. Currently, the food distributions taking place in the region have provided an ideal opportunity for the promotion of SPHERE standards and all staff and volunteers involved with the food aid interventions have received training on the application of the SPHERE standards.

Objective 6: Conduct vulnerability capacity assessments in Lesotho, Malawi, Namibia and Zimbabwe.

Following the sensitization of the relevant national societies with regards to conducting vulnerability capacity assessments, the national societies of Botswana, Namibia, South Africa and Zambia have identified this as one of their priorities and have requested assistance from the regional office to facilitate the process. In response, the regional office is facilitating VCA training of staff and volunteers in Botswana between 1-5 October 2002 and will assist in developing the plan of action. Consultations for conducting VCA in Namibia have also begun and a plan of action is being developed.

Objective 7: Increased level of DP & DR support and capacity building of NS including increased collaboration and co-ordination of support among the departments at the regional office.

Collaboration and integration with other departments within the regional office has been enhanced. Task force teams with technical department support maintain close collaboration in specific response and mitigation efforts. Information sharing and pulling together of financial resources has increased. Examples include the health and watsan departments' involvement in the review of refugee operations in Zambia with financial support from the DPDR programme. The VCA to be conducted in Botswana is likewise a collaborative effort between OD and DPDR departments.

Objective 8: Support to ongoing refugee operations in Botswana, Malawi and Zambia as well as other refugee situations that may emerge in the region.

Technical support continues to be provided to ongoing refugee operations in Botswana, Malawi and Zambia. The disaster response officer facilitated a visit to Botswana to assist with the preparation of refugee repatriations to Namibia from the Dukwi refugee camp. A technical support visit was undertaken by the health delegate and water and sanitation officer to review the refugee programme in Zambia.

Health and Care

Regional HIV/AIDS Programme

The reporting period has been dominated by the concern over the food insecurity situation and the deteriorating nutritional state of the vulnerable people in the countries affected by the drought. The food insecurity situation particularly affects the people living with HIV/AIDS, as they need a very nutritional diet for their survival. The food insecurity situation hence adds to the vulnerability of those already vulnerable. Through the Federation's regional appeal launched for five countries, food distribution will mainly be given through the national societies' HIV/AIDS programmes. The southern Africa region is disproportionately highly affected by the HIV/AIDS pandemic and all the national societies in the region have committed themselves to massively scale-up activities to mitigate the impact of the humanitarian disaster that the disease causes as it continues to spread.

A regional HIV/AIDS meeting was held in Johannesburg to update the regional HIV/AIDS coordinators on new developments in the region and to sensitise them on the edutouch programme. The edutouch system is a computer-based training solution to HIV/AIDS awareness and counselling. It is a stand-alone terminal, where the users can interact with the course material by touching the screen, which requires very little computer skills if any. The course material has been developed by edutouch in Johannesburg in collaboration with a leading HIV/AIDS researcher in South Africa. To date, edutouch has installed the systems in several major corporations in South Africa. The regional information systems management (ISM) project has initiated the use of edutouch in collaboration with the regional HIV/AIDS programme. The system will be tried out in 6 national societies in a variety of settings to see how they are received. The initial trial period is one year.

A memory box project has been initiated for children in AIDS affected households and workshops have been held to train the regional HIV/AIDS coordinators on the project. Memory boxes are a way of empowering HIV infected parents to communicate with their children and to start to plan with them for the future. The memory boxes provide information about the parents, the family history, stories about the parents and the child, photographs, drawings and special family memories. The project aims to help children understand their past and feel more secure about their future, so that when the parents die the children have a sense of identity and belonging.

Although there is high momentum in implementation of HIV/AIDS programmes, this has been negatively affected by lack of funding at the regional office. Several national societies had to suspend implementation of activities due to lack of funding. However, the regional office submitted a proposal to the Netherlands Embassy in Harare and the outcome has been very positive. Funding has been ensured for the next five years in support of home based care programmes. The official signing of the contract took place on October 1st, 2002. The Swedish Embassy and Irish Aid joined in funding the proposal.

Objective 1: Knowledge, skills, attitudes, practices and behaviour of 200,000 youths (10-24 years of age) on HIV/AIDS prevention improved within the communities of the ten national societies by the end of year 2002.

During the period under review there was little activity at the regional office and in the countries due to reduced funding for implementation of activities. However, the following was nevertheless achieved; South Africa Red Cross Society trained 40 peer educators. Currently the national society is reaching 5000 youths within the Home Based Care projects and through youth activities. A total of 45,000 condoms were distributed.

Namibia Red Cross Society reached 29,434 youths through its Puppet Power Team. The team comprises of 8 team members who travel around the country to conduct performances in schools and public places. A total of 15,000 male condoms were distributed. The Society plans to train more youths in the Puppet Power Team programme with a view to decentralize the programme to the regions. This approach will enable the Society to reach more youths. The regional office facilitated a consultant to assist the puppet power group to develop a training curriculum.

Mozambique Red Cross reached approximately a total of 40,000 youths at the end of this quarter with its 47 youth peer educators. A KAP study was conducted in 4 districts (Tete and Nampula provinces) where the HIV/AIDS Youth Peer Education Programme will be established.

Angola Red Cross Society continues to focus on the 11 youth peer education projects. Plans are underway to expand the programme to other districts with the new Developments in the country. The Spanish Red Cross supports HIV/AIDS work in 3 districts. Together with the Federation, the national society conducted an assessment. The Society is hoping to establish 5 new projects in 5 provinces, which are likely to be the entry points for refugees as they come back home. Angola Red Cross has a very good HIV/AIDS coordinator and has trained 200 peer educators who reach approximately 30,000 youths and adult per quarter with behaviour changing messages.

Swaziland Red Cross has conducted a KAP study among the prisoners whom the Society intends to work with in HIV/AIDS awareness campaigns. The results of the study will soon be ready. Two youth peer education projects have been establish reaching youths through drama in schools in conjunction with the blood donor recruitment campaign.

Objective 2: Quality and condition of 20,000 PLWHA improved and maintained in Malawi, Mozambique, Namibia, South Africa, Swaziland, Zambia and Zimbabwe as well as their families and the communities, through the use of home based care strategy.

Under the home based care project, the total number of clients in the regional HIV/AIDS HBC programme increased from 18,619 clients to 19,168 clients. The total number of home based care projects increased from 37 to 43. This quarter the total number of active care facilitators in the region is 1002, working approximately 3 days in a week of 4 hours per day. The total number of people who benefited from the HBC projects was approximately 120,000. The number includes family members. The clients and the family members received food parcels, HIV/AIDS education and medical supplies specifically for the clients.

Objective 3: Establish 200 functioning support groups for 20,000 PLWHAs in HBC Projects.

By the end of the third quarter, a total of 120 support groups had been established throughout the region. Each support group has an average of 30 clients. The support groups are engaged in income generating activities such as soap making, sewing and running of kiosks. The support groups help PLWHA in the fight against stigma. The clients find the support groups very helpful as this is a place where the clients share experiences with one another and discuss issues concerning their well-being in the community. The funds realised from the income generating projects is used to support clients that require medical attention, school fees for children of the clients and to buy food for some of the support group members. In Zimbabwe and South Africa, there are support groups for the care facilitators only. These support groups assist them to relax and reduce stress and burn out. In South Africa during the meetings of care facilitators, a psychologist is invited to address the members on various issues and this has been found to be very helpful.

Objective 4: PLWHA advocated for in order to improve their socioeconomic status through increased social and legal status within the ten national societies.

Mozambique Red Cross has been doing public shows and community level interventions to address stigma and discrimination. In all these events PLWHA have been invited to participate in educating the participants. Many of the countries have already done the action plans and are waiting for support in terms for funding from IFRC to implement the plans.

The regional office established partnership with 'ambassadors of hope'. A meeting was held to discuss the way forward after the Pretoria meeting. It was agreed that the 'ambassadors of hope' would be working with the regional office in sensitizing national societies on the need to work with PLWHA.

Objective 5: Improved capacity of the ten national societies in the management of the programme as well as the provincial and district levels in programme formulation, design, implementation and monitoring by the end of 2002.

Collaboration with the OD department continued to develop the capacity of branches in national societies. The trainings were held for governance members in Zambia, Swaziland, Botswana and Malawi. The development of branches is essential for the scaling-up of HIV/AIDS activities in the region.

South Africa Red Cross has a delegate from the British Red cross to give technical support on the HIV/AIDS programme, Zambia has a finance delegate to support the national society on financial issues, Botswana Red Cross has a delegate from the Finnish Red Cross to give the national society technical support on the HIV/AIDS programme.

Objective 6: Community based support for 80,000 OVCs in ten countries promoted and advocated for by the end of year 2002.

Lesotho Red Cross continues to champion the care and support of orphans. 120 orphans are being supported with school fees and receive clothes.

South Africa Red Cross cared for about 700 OVCs and Zimbabwe Red Cross supported 3,000 OVCs. Namibia is looking after 1397 orphans and Zambia has identified 85 children. The region is giving support to a total of 5,402 orphans. There are 15 orphan projects throughout the region.

Objective 7: Food security integrated into home based care projects in Malawi, Mozambique, Swaziland, Zambia and Zimbabwe.

Southern Africa's food crisis is taking place in the context of a severe HIV/AIDS epidemic and coping mechanisms that previously saved lives may now facilitate the spread of the disease, according to a report by the UN Children's Fund (UNICEF). "During food crises, affected populations adopt a variety of coping mechanisms to survive. Such strategies often include: finding additional sources of food or income, migrating, dropping out of school, engaging in hazardous work, exchanging sex for food or cash," UNICEF said. However, these coping strategies are putting young people, especially girls, at high risk of HIV/AIDS infection. For some young girls, commercial sex work provides the only way to support themselves and their families. Approximately 13 million people face starvation in this region, Zimbabwe being the worst hit country with a total of 6 million people facing food shortages while Zambia, Lesotho, Swaziland, Mozambique and Malawi are also badly affected.

All clients under the HBC projects received food packages during the quarter. There is good response coming from the international community to address the food crisis in this region.

Objective 8: HIV/AIDS policy for staff and volunteers advocated for within the national societies and the Federation.

A need to address the HIV/AIDS concerns of staff and volunteers with the national societies in the region was observed and it was decided that each national society should develop and implement an HIV/AIDS policy.

Lesotho, Namibia, Swaziland and Zimbabwe managed to complete HIV/AIDS policies in the work places. The rest of the countries are working on the drafts. The Federation developed an HIV/AIDS staff policy which has been successfully implemented at the regional office.

The regional office has been working with an organization for the PLWHAs based in Harare to educate the IFRC staff, spouses and children on positive living skills. This quarter two sessions for staff at IFRC were held.

Objective 9: VCT promoted within communities with special emphasis on youth 10-24 of age so that an additional 200,000 people are tested for HIV/AIDS by the end of year 2002 in Botswana, Malawi, Swaziland and Zimbabwe.

The National Societies were engaged in counseling, mobilising and educating people in communities to go for testing through youth peer education and other prevention activities. During HIV/AIDS education campaigns, youths and other people reached are encouraged to go to the near-by counseling and testing center. Swaziland Red Cross and Zimbabwe Red cross have spearheaded this process.

Regional Health Programme

During the reporting period, the health department has been heavily involved in the Angola assessment. Both the regional health delegate and the health officer participated in the Federation assessment team which led to the launching of an appeal in the beginning of September. Participation in the assessment itself provided an opportunity for the health department to understand the magnitude of the health problems in Angola. Following the cease fire, the enormous humanitarian needs in the country have become apparent.

The regional health programme also provided support to the Angola Red Cross in preparation of the national measles eradication campaigns which was planned for at the end of the year. Although this has now been postponed until April next year, the national society is already a member of the National Immunization Co-ordination Committee.

Following the community based first aid workshop in June, the national societies have drawn up plans to spearhead community based first aid activities in their national societies. Unfortunately, these cannot yet be implemented due to lack of resources. Instead the planned for activities have been included in the 2003-2004 appeal.

The regional health programme has established a good working partnership with the WHO in the field of malaria control in Malawi, Zambia and Zimbabwe. Several meeting have been held at country level to look into the practicability issues. Joint proposals for malaria control is being considered by both WHO and the regional health programme. A joint proposal for malaria will ensure availability of resources for both Red Cross and National malaria control programmes.

The regional health programme keeps a close eye on the deteriorating food insecurity situation and the effects it has on the general health situation throughout the region. Malnutrition rates are expected to soar as the food situation becomes worse. A health delegate and a nutritionist are now based in Harare, working with the Johannesburg food security based operation.

The need for community based primary health care in the region is as big as ever before to address the deteriorating health standards and assist those already vulnerable to cope during the present crisis situation.

The major constraint that the regional health programme is facing is the lack of funding which seriously affects implementation of activities. Linkages are being strengthened with the HIV/AIDS and watsan departments as an effort to have a more integrated approach. Some national societies have not been active enough in building partnerships with donor organisations and in particular the ministries of health. This limits the national societies in accessing locally available funds. The regional health programme continues to encourage the national societies to apply for such funds.

Objective 1: Support the national societies in Malawi, Mozambique, South Africa, Swaziland, Zambia and Zimbabwe to develop focused commercial and community based first aid programmes in line with ARCHI.

Following the regional community based first aid (CBFA) ToT, eight national societies have produced their plans of action to further spearhead the CBFA activities in their communities and link it with existing national society programmes. Due to limitation in financial resources, the plans of action have been incorporated in the appeal for 2003/4.

Objective 2: Strengthen community based health care programmes (CBHCP) and encourage the integration with OD, watsan and HIV/AIDS to promote health behaviours in the vulnerable communities in the six national societies' country programmes.

The regional health is working with Angola Red Cross and Zambia Red Cross in the preparations for the National Measles Campaigns, which had been planned for in November. However, this has now been postponed to next year, which will provide more time for the initial preparation. The regional health programme has established an agreement with WHO regional office to use Red Cross CBFA volunteers in three countries for malaria control programmes. The countries which will benefit are Malawi, Zambia and Zimbabwe. These programme activities will start during the fourth quarter of 2002.

Due to difficulties for national societies to access funds from the global funds against TB, HIV/AIDS and malaria, WHO and the Federation have presented a joint proposal to the global funds for malaria control in five countries.

Objective 3: To support two national societies in strengthening/designing blood programmes by end of 2003.

This objective could not be implemented due to lack of resources, activities planned for this year has been included in the appeal for year 2003/4.

Objective 4 To strengthen the capacity of six national societies in the provision of training in psychological support so that expert counselling and support can be given to care givers and vulnerable communities by the end of 2003.

The psychological support training of national society staff was integrated in the CBFA training in June and the plan of action has been included in the appeal for 2003/4.

Objective 5: To provide technical support in monitoring and evaluation of health services provided to the two refugee operations (Namibia and Zambia) in 2002-2003.

Zambia Red Cross Society refugee health programme received technical support from the regional health delegate. Areas which were improved include drug control, referral of refugees, case definition and prevention of epidemics. Due to measles outbreak in the district and in other parts of Zambia, all under five's have been vaccinated against measles with a coverage of 100%. The group from 5 to 14 will be covered as soon as the vaccines arrive in the camp.

Objective 6: To build regional health capacity to prevent and respond to epidemics (cholera, meningitis and other diarrheal diseases).

The Zimbabwe Red Cross recently responded to a cholera outbreak in two districts in the Masvingo province. The Ministry of Health called upon the Society to make use of its volunteer network to distribute cholera kits and water purifying tablets. The Society has gained a lot of experience in this field and is recognised by the government as an important player in emergency situations.

The regional health programme is preparing to support national societies during the cholera season which is just about to start with the coming rains. The preparations include the purchasing of cholera kits, aqua tabs and IEC materials as approved by the MoH.

Water and Sanitation

Water and sanitation activities have been included in the food insecurity appeal for the five countries in the region, in the acknowledgment of the interconnectedness of the problem. Inadequate nutrition makes people, especially children, far more susceptible to diseases. When combined with malnutrition, insufficient access to clean drinking water and basic sanitation contribute to the leading causes of death in children under five. Federation watsan activities will play a key role in addressing the needs of the beneficiaries. Watsan activities in all countries will aim to conform with SPHERE standards. The Federation seeks to strengthen the capacities for self-help among the target population, by providing access to safe water and safe sanitation while raising health awareness. Communities will be empowered to operate and maintain their own watsan facilities.

Apart from the food insecurity operation in the region, the reporting period has focused on preparing the 2003-2004 appeal with the active involvement of the entire watsan team.

The watsan department also participated in the Angola assessment team and contributed positively in the development of the emergency appeal for Angola.

Cholera outbreaks in two districts in the Masvingo Province, Zimbabwe, spurred the national society to conduct an assessment and draw up a proposal for an emergency intervention. The proposal has been submitted to potential donors for funding. So far, close to 500 people have been affected and 25 have died.

During the reporting period, a one week water and sanitation emergency training was held in Kenya with thirty participants from eastern and southern African national societies. The training focused on rapid needs and technical assessment, the establishment of temporary water supplies, the building and improvement of existing latrines and bathrooms as well as water testing and the promotion of health and hygiene. The training was very successful and the participants expressed that they had learned a lot and had profited by sharing experiences with colleagues from other regions. The training workshop has been considered a milestone in capacity building and regional networking.

Country watsan delegate for Zimbabwe ended her mission at the end of July after 18 months of successful co-operation with Zimbabwe Red Cross. The water and sanitation capacity of the Zimbabwe Red Cross has greatly increased and there is only need for minimal support from the Federation.

The integrated watsan and HIV/AIDS pilot project in Zambia has started up very well. Current funding commitment up to year 2003 has been pledged by the Swedish Red Cross and the project has been included in the appeal. A similar project in Kwazulu Natal, South Africa, is in the pipeline but has not yet been included in the appeal. The integrated approach of new programmes reflects the regional office's aim to break down the divides between the different programme sectors in the acknowledgment that a more sound impact can be achieved with the integration of programme activities to assist the most vulnerable.

Objective 1: Sustainable and appropriate watsan infrastructure established for a target of 125,000 in 2002 in accordance with SPHERE standards and national society watsan policies.

The infrastructure already provided by the project for the second phase has shown that the beneficiaries are very happy to use them and to maintain them. The current drought has exerted an additional pressure in the utilisation but there is a positive sign that the facilities are appropriate and sustainable.

Malawi has so far handed over 15 boreholes in Chikwawa and 7 boreholes in Nkotakota. Casting of the sanitation platforms is still outstanding in all the districts.

In Swaziland, the construction of 3 springs has been started and one is completed. Latrine construction is ongoing with 100 structures at roof level.

Zimbabwe finished all the 11 boreholes in Mudzi and Rushinga. Latrines are under construction. Mozambique has just tendered for the construction of the 2002 boreholes. Latrines are under construction. In Zambia, materials are being procured and activities will commence by the coming quarter.

Objective 2: Increased beneficiary participation in the design of watsan interventions encouraged, including the promotion of health and hygiene interventions. This will be in cooperation with health and care and HIV/AIDS community based initiatives.

Community based management activities strengthen the capacity of the beneficiary communities with regards to project ownership. All the projects have therefore facilitated the formation of community structures in the form of various committees during the quarter. Red Cross structures at a peripheral level have also been supported through the formation of branches and/or organised volunteer bodies.

The pre-siting of water points in all projects has been done by the communities themselves. The water points are safe-guarded by appointed members of the community.

Red Cross volunteers and branches have played a major role in community sensitisation and mobilisation. Project cost sharing has been improved through involvement of local Red Cross branches who have facilitated the process of participatory monitoring. All national societies have committed some of their own scarce resources, such as transport, to the project.

Objective 3: Increased technical and programming capacity of the national societies to a level where dependency on support from the regional office is significantly reduced.

The quality of watsan infrastructure in all projects meet the minimum standards and it has stood its test in the current drought situation where the facilities are still operational when others are breaking down.

Regional technical support was given to Swaziland where spring protection has been introduced. Zimbabwe and Zambia also benefited from regional technical support. All regional technical support has been in the form of partnership skill development whereby both parties have something new to gain.

Efforts still have to be made in the area of hygiene education for behavioural change and skills need to be developed further. The introduction of PHAST need to be backed up with relevant tools. Unfortunately, most projects had no budgets for that purpose and with the current funding situation, not much can be done at the moment.

The capacity of the Zimbabwe Red Cross to implement water and sanitation programmes has significantly increased through the technical supervision from the Federation and there is now only need for minimal support from the Federation.

Increased 4: Increased capacity of national society based water and sanitation technicians to implement regional watsan emergency interventions in the region. This will be achieved in cooperation with the organisational development and disaster preparedness regional programmes.

Ten regional watsan members attended a watsan technical training in Kenya. The training involved, among other things, the designing and setting up of emergency watsan units as well as the management of these systems. The training was considered very successful and a milestone in regional capacity building and knowledge sharing.

In the up-coming RDRT training next quarter, two watsan members will participate.

Institutional and Resource Development

The food insecurity situation in the region has led to a large-scale intervention from both the national societies and the Federation. This presents a great challenge for the regional OD programme as attention is diverted from development to relief. However, it is also an important opportunity that must be taken for the national societies to build up their capacity and to develop branches where the food security operation is taking place. Nevertheless, these interventions are likely to lead to delays or disruption of the originally planned activities.

A major OD activity during the reporting period was the planning and preparation of the 2003-2004 appeal document.

The OD delegate has been heavily involved in the Angola appeal process and has visited the Angola Red Cross to facilitate an organisational analysis workshop and to brief and debrief the Angola assessment team. The

output of the mission was a draft recovery plan for the ARC, called “CVA Plan of Action 2002-2004”. The OD delegate contributed to finalising the assessment mission report as well as the appeal document itself. The appeal was launched on 6 September seeking CHF 4,966,000 to assist 10,000 beneficiaries for six months. Capacity building and organisational development are the base for the appeal intended to reinforce and strengthen the Angola Red Cross.

Resource development continues to be viewed as a high priority area for support and discussions have been undertaken with the national societies for a better planning on this issue. A regional workshop is being planned for later in the year to encourage regional experience sharing.

In the area of financial development, substantial work has been done in developing a standard Financial Information System for the region in collaboration with the regional Information Systems Management (ISM) programme. Overall, the demand for support in the area of financial development continues to grow in the region, but strategies are in place to cope with this.

On staffing, the British Red Cross has indicated that they will no longer be able to support the post of regional finance development delegate with effect from October 2002. The finance development delegate is the process of handing over to the OD delegate and has his last day in the office on October 14th.

Objective 1: Seven national societies in the region have reviewed and developed their constitutions, strategic plans, human resource systems, and project design and management to provide the foundations for a well-functioning national society.

A plan of action has been prepared for each national society and sent to them for their comments and approval. The plan is linked to a MOC to ensure a common understanding on the OD objectives and activities. The feedback from the national societies was taken in consideration in preparing the regional appeal 2003/2004.

Angola Red Cross produced a draft document called plan of action 2002-2004 during a Federation-facilitated workshop held in Luanda in July. The workshop included staff and governance members from national and regional level and the ICRC. There are obvious challenges facing Angola Red Cross and the first, as highlighted by the participants at the workshop, are the governance and management issues. It is anticipated that a new memorandum of collaboration between ARC, Federation and other partners will minimise the incentive issue facing the Society.

Lesotho Red Cross initiated a capacity building proposal that concentrated on several organisational areas including its strategic plan and constitution. A visit was made in April by the finance development delegate to follow up on this. The OD delegate will travel to Lesotho in October to support the strategic plan workshop and to assist with the drawing up of the volunteer management policy.

Objective 2: National societies in the region have developed and strengthened branches, youth structures and volunteer management systems in accordance with Strategy 2010 and the Ouagadougou Declaration 2000 to mobilise the power of humanity through scaling-up the response to the HIV/AIDS pandemic. Six national societies will achieve this by end of 2002 and the other four national societies by end of 2003.

The overall justification for the branch development programme arises from the shortcomings in the implementation of technical programmes due to low capacity in areas such as branch development, youth and volunteer management. This in turn links into operational, management, and governance systems and structures. In southern Africa, the major focus is on improving the organisational capacity of the national societies to enable the effective implementation of Strategy 2010 and the Ouagadougou Declaration. The branch development project started up in May 2000 and the first two years focused on the development of the training manual through a participatory approach and through training of HQ staff on how to use the manual. The focus has now shifted towards supporting the national society trainers in carrying out their improvement of the Red Cross structures and the management of volunteers.

During the reporting period, the final branch development training manual was distributed to the national societies electronically. The manual was utilised by the Zambia Red Cross for the resuscitation of its branches and structures. Swaziland Red Cross made use of the manual for training its volunteer coaches and provincial staff and in South Africa it was used in the training of volunteers for the HIV/AIDS home based care programme.

The emphasis on linkages between branch/volunteer development and project activities continued to be strengthened throughout the quarter through the participation of the Regional Branch Development Officer in the HIV/AIDS and IMS' Edu-touch workshop that was held in Johannesburg.

The regional branch development officer technically supported the regional water and sanitation programme in the development of the integrated HIV/AIDS for the Kwazulu Natal project that is awaiting funding. Support was also extended to the national societies that had requested branch development support, such as Swaziland and Zimbabwe.

Objective 3: Seven national societies earn or source sufficient revenue to meet core costs and service delivery costs on a long-term basis.

Resource development continues to be viewed as a high priority area for support. A regional workshop is being planned for later in the year to encourage regional and intra-regional experience sharing.

Objective 4: Improved financial management systems in seven national societies in the region support strategic and operation decision-making for effective service delivery and better partner relationships.

A professional finance volunteer has arrived in Swaziland for a two year period through the regional partnership with Skill Share International. The objective of this initiative is to build up the financial management capacity of the national society.

In Malawi, following the dismissal of the Director of Finance in June, a Finance delegate has been placed in Lilongwe for six months to support the Society in finance development and to assist with the food security operation.

Regional Cooperation

Objective 1: Strengthen regional cooperation and priority setting through SAPRCS forum in order to build national society capacity for Strategy 2010 core programme areas and Ouagadougou commitments, with HIV/AIDS prioritized, thereby reaching more vulnerable people through more responsive and targeted programmes.

According to Strategy 2010, one of the Secretariat's main roles is to help strengthen capacity within the national societies in the four core programme areas. The Southern Africa Partnership for Red Cross Societies forum (SAPRCS) is one way in which this has been achieved. SAPRCS forum met in May in Maputo bringing together all the ten societies in the region, ICRC, the Federation's regional office representation and Secretariat's team led by the Secretary General, Didier Cherpitel. The forum enabled sharing of knowledge and best practices as well as the development of agreements on appropriate priorities. Support to national society leadership in certain contexts, such as the facilitation of common positions on advocacy (e.g., HIV/AIDS) and integrity issues, or relationships with governments were amongst specific items on the SAPRCS agenda. SAPRCS meetings are held twice yearly and will continue to be the main body that determines priorities and monitors trends in the region. Next meeting is scheduled for November 2002 to be hosted by Namibia Red Cross Society.

Also, during the period under review, the Federation regional office strategy based on national societies' priorities was developed to support the Southern Africa National Societies in the following activities:

- building capacity and accountability within national societies.
- strengthening regional capacity to respond to rapid and slow onset disasters.
- scaling up HIV/AIDS interventions, including through stronger volunteer management.
- community-based disaster preparedness with a focus on food security.
- water and sanitation activities.
- regional cooperation and knowledge sharing within the region.
- cooperation agreement strategies based on national societies' priorities.
- building partnerships and resource mobilisation.

Objective 2: Strengthen movement-wide coordination of planning and implementation

The Southern Africa regional office in Harare coordinated its activities closely with the ICRC regional delegations in Harare and Pretoria, and the country office in Angola in order to harmonise activities together

with the National Societies. During the time leading up to the presidential elections in Zimbabwe in March, the Federation's regional office and the ICRC delegation in Harare formed a taskforce together with the Zimbabwe Red Cross, for contingency planning and for taking appropriate action in accordance with the provisions of the Seville Agreement. Cooperation with the ICRC was also witnessed in Zambia and SARCS regarding the development of those Societies recovery plan documents. Harmonisation and planning of activities for 2003-04 appeal process was carried out in close consultation with ICRC. Cooperation with PNSs working with various national societies in the region was encouraged, particularly the Danish Red Cross representative in Zimbabwe. The Federation's regional office continues to foster this working spirit within the Movement.

Objective 3: SAPRCS and regional networking used as tool to empower national societies and to encourage capacity building and sustainability through peer support and to enable them to advocate on behalf of vulnerable people.

The Southern Africa regional office in Harare prioritised its work according to the expressed needs of the National Societies in the region. The Southern Africa Partnership of Red Cross Societies (SAPRCS) forum is an invaluable mechanism to assure the Federation regional office remained responsive to its national society membership base. One of the most important roles in the Southern Africa region is to strengthen the capacity of the National Societies in order to empower them to reach more vulnerable people. The regional office enabled and facilitated knowledge sharing and lessons learned between the National Societies. Highly successful programmes are now replicated in other countries.

Objective 4: Skilled and experienced personnel within the region accessed and exchanged

For successful implementation of project activities, the regional office refocused on competencies and skills of its personnel for better delivery of support. The regional recruitment and training programme launched in 1998 remained a priority area during the reporting period. Expatriate staff were engaged and maintained only where the need was deemed absolutely necessary. Establishing and maintaining a regional resource personnel pool has proven a highly effective capacity building tool and contributed to disaster response and programme implementation. Over the last two years, ten Federation delegates and seventeen RDRT members recruited from the region have been deployed to various Federation-managed relief operations. Concerning the future regional office staffing needs, it is anticipated that the current strength of expatriate staff, including that of regionally recruited and local staff will be maintained save for the position of finance development delegate and those engaged within the Information System Management Programme that concludes at the end of 2002.

Coordination and Management

Objective 1: An "added value" change effected in the co-ordination and facilitation role of regional office through implementation of the action research project helping to create greater capacity within national societies to deliver services to vulnerable people.

The lessons learned continue to be applied in the work of the Regional Office. While being responsive to national society needs and priorities and respecting the regional priorities, the Federation attempts to tailor assistance to each national society according to its capacities and the leaderships' possibilities to effect change. The focal delegate approach is maintained and was used for the planning process this year, in preparation of the annual appeal 2003 - 2004. Each national society identified its priorities for support from the Federation in the coming years and this formed the basis for the appeal.

A meeting of all regional delegates, with ICRC participation, was held in July to harmonise the planning process. A separate meeting of the Southern Africa Management Team to address strategic directions and approach was held. The Desk Officer from Geneva attended both meetings to assure management coherence and consistency. The Region finalised three more CAS documents, now establishing CAS for Malawi, Mozambique, Swaziland and Zimbabwe.

Objective 2: Federation regional-based resources managed for optimal efficiency and effectiveness.

The Zambia refugee operation continues to be implemented with support from two country-based delegates and technical assistance and advice from the regional office in Harare.

In Angola, the office with two advisors and support staff has been maintained by this programme to assure the necessary support for Angola Red Cross and the assessment team that visited in July and which produced a comprehensive assessment in the light of the ceasefire and possibilities to expand humanitarian activities. The team was assisted with all practicalities, including visits to nine provinces.

The Mozambique delegation has been assisted in planning for eventual phase out in 2003. The regional office in Harare will then assume responsibility for ongoing support to Mozambique Red Cross.

A Federation Representative assumed her duties in South Africa in August. With a reporting line to Harare, she is able to access all the technical support required from the regional office.

Lastly, to address the problems of food insecurity in the region, the Federation opened an office in Johannesburg. The influx of delegates in several countries has been managed by the Johannesburg Office but with close consultation and integration, as possible, with the Harare regional office. While co-ordination, logistics and relief functions are centred in Johannesburg, the components of the food insecurity programme linked to health, HIV/AIDS, water and sanitation, information and capacity building are facilitated by the Harare office. Close consultation and co-ordination has been necessary to assure most efficient use of Federation resources and to avoid confusion for the operating national societies that have become familiar in dealing with the established regional office. The Disaster Management Co-ordination Division led Food Insecurity response will continue to be fully integrated into the permanent secretariat structures in the region.

Objective 3: The provision of technical advice and support co-ordinated from the regional office and from PNS/ICRC to assure programmes are mutually reinforcing and build capacity and sustainability.

The role of the Regional Programme Co-ordinator is crucial in making sure that programme assistance to national societies is delivered in a co-ordinated way, with capacity building crosscutting all activities. Programme managers meet frequently for this purpose and project planning programme (PPP) training was conducted for all programme managers in September.

The Federation took the lead, in consultation with ICRC and with the involvement of several PNS, to assist Angola Red Cross in devising an appropriate plan for addressing humanitarian needs whilst building national society capacity. Governing Board member, Dr M. Jalloh, led an assessment team July. Based on the teams' findings, an appeal for CHF 4,966,000 was launched on 6 September. The goal is to reach 100,000 beneficiaries over a six month period and, as the capacity of Angola Red Cross grows, to expand this assistance package in following periods.

Objective 4: Manage priorities within the regional office so that there is support to national societies to build the capacity required for scaling up and meeting the commitments of the Ouagadougou declaration.

The quarter was marked by shortage of funding for HIV/AIDS activities. This meant that the regional office was unable to meet monthly commitments to national societies for on going and agreed programme implementation. An important PNS donation towards the end of the quarter enabled the Federation to recover the situation but our credibility with operating national societies is at risk when priorities cannot be adequately addressed on a timely way.

Negotiations continued with the Netherlands and Swedish Embassies, based in Harare. At the end of the quarter, agreement had been reached on support for a US\$ 14 million partnership package for HIV/AIDS support to ten national societies over a period of five years. This significant new partnership, launched on 1 October, opens a new era of guaranteed funding for many of the core activities.

Assessments of food shortages in six countries in southern Africa have continued to worsen with the UN now reporting that 14.4 million people are threatened over the next six months. The impact of food shortages is made worse by high rates of HIV infection across the region. The HIV/AIDS pandemic, which affects up to 34 per cent of the adult population in some areas of the region, has depleted the labour force and reduced food production as well as wage income. Having initially appealed on 2 May for assistance to three National Societies, on 22 July the Federation launched a revised appeal for CHF 89,285,274 to assist 1.3 million beneficiaries for 12 months in five countries (Lesotho, Malawi, Swaziland, Zambia and Zimbabwe), plus support to South Africa Red Cross in case of population movements. Red Cross assistance throughout the region is being targeted at households made vulnerable by HIV/AIDS, including those headed by children,

females and the elderly. The response operations are country specific but are focussed on emergency food supply, HIV/AIDS, water and sanitation, hygiene, vector control, capacity building and in some instances the provision of seeds and basic agricultural tools.

As mentioned above, a Federation office for this operation has been established in Johannesburg with out posted delegates in Lesotho, Malawi, Zambia and Zimbabwe. There is close integration with the Regional Office in Harare. In response to the appeal, Norwegian Red Cross donated 231 trucks and support vehicles. An agreement has been signed with WFP which will deploy the vehicles to transport food made available through its pipeline. Appeal coverage for all activities at the end of the quarter stood at 42,4%.

Objective 5: Transformation and implementation of recovery plans supported for South Africa and Zambia Red Cross societies.

The change process in South Africa Red Cross continued with a process underway to appoint a permanent Secretary General. Following the partnership meeting held in June, the Acting Director General became ill and was absent on sick leave for the quarter. This set the development process back. A Federation Representative was posted in August to help facilitate development in line with the findings of the assessment team that visited in December, 2001. She has been well accepted by the Society's leadership and is helping to identify priorities for assistance as she advises in the preparation for the October Annual General Meeting. Important decisions are to be taken at this meeting, including the appointment of a Secretary General and the election of a new board after several members resigned.

In Zambia, KPMG finalised the recovery plan proposal after extensive consultation with Zambia Red Cross. This plan is to be finalised with Federation agreement in October and an Annual General Meeting is now set for December to consider and, hopefully, accept the recovery plan. Elections will be held for a new board to lead implementation.

Objective 6: Narrative reports on programmes and operations in the region issued in conformity with the Federation's minimum standards and training to national societies on Federation reporting formats and report writing techniques as well as to respond to queries from PNS and donors to ensure that their concerns on reporting issues are taken into account.

The reporting period has been dominated by the 2003-2004 appeal writing process. With the introduction of the new appeal format, the process was considerably more complex and time consuming compared to last year.

Updates from the region are written bi-weekly to keep sister societies and donor societies informed of events and new developments as well as listing visitors to the region. As part of the Reporting Action Team, the reporting delegate will participate in the first workshop to be held for reporting delegates in Sweden in October. The workshop will aim at developing new reporting procedures and revising the job description of reporting delegates. The reporting action team is a cross-departmental initiative which identifies solutions and prepare proposals for the improvement of Federation reporting.

Objective 7: The profile of the Red Cross strengthened and support and partnership fostered with international organizations and the donor aid community, including advocacy on selected issues such as HIV/AIDS.

Food insecurity: The time of the regional information delegate during this quarter has been preoccupied with raising the profile of the Red Cross response to the food crisis in the region. The information delegate was appointed as the overall information coordinator for the Southern Africa Food Security Operation, and has cooperated closely with the Johannesburg office and the information delegates seconded to support the appeal launched on 22 July. Frequently updated Q&A's on the evolving food situation and the work of the Red Cross societies involved in the operation have been produced and shared with donor societies, as well as information schedules stating upcoming events, story ideas and visits to the region. The regional office together with the Johannesburg office and the national societies have so far facilitated media visits for the Norwegian, Danish, Icelandic and Japanese Red Cross Societies for fundraising purposes in their respective countries, and more national societies are expected to follow suit. The information delegates have produced dozens of web site stories profiling the work of the Red Cross Societies in Lesotho, Malawi, Swaziland, Zambia and Zimbabwe, and four video news releases revealing the many layers of this disaster - to be used both to enhance the visibility of the Red Cross in the region as well as an advocacy tool on the various issues increasing the vulnerability of more than 14 million people facing starvation in the region.

World Summit on Sustainable Development: Provided support to the Federation Delegation (including the Federation President) to the WSSD in Johannesburg in the last week of August. Wrote website story of the President's participation in UNV side event on volunteers and his visit to Soweto Red Cross HIV/AIDS project, and set up interviews together with a media team from Geneva Secretariat. Prepared for a joint off-site press conference with Ericsson on a new partnership signed during the Johannesburg Summit.

HIV/AIDS: The Zimbabwe Red Cross information officer was commissioned to travel around the region to write a new edition of the regional HIV/AIDS news letter, edited by the regional information delegate.

The information delegate prepared a press conference for the launch of the Federation's regional HIV/AIDS programme for US\$ 14 million, with donations from the Netherlands and Swedish governments, which will support Red Cross Red Crescent HIV/AIDS programmes in 10 southern African countries for up to five years. The countries to be assisted through the Red Cross are: Angola, Botswana, Lesotho, Malawi, Mozambique, Namibia, South Africa, Swaziland, Zambia and Zimbabwe. The programmes focus on home-based care and support, anti-stigma and discrimination against people living with HIV/AIDS and education and prevention. They will also strengthen the 10 Red Cross Societies' capacity to scale up their response to the HIV/AIDS pandemic that is devastating the African continent.

An HIV/AIDS component has been incorporated into all publications and video news releases, as it is recognized as being a major component of all problems the 10 countries in Southern Africa face, such as the food crisis.

Objective 8: The core programme area of the promotion of Red Cross principles and humanitarian values fostered, both through the delivery of regional programmes and through fostering commitment and skills to promote humanitarian values within national societies.

The establishment and reinforcement of fundamental principles and humanitarian values within the Federation regional office and national societies remained a big challenge. Nevertheless, support was provided to national societies in the area of capacity building for the promotion of the principles. Promotion of principles and its implementation was encouraged through compiling and sharing of best practices in the region. In the area of promotion of humanitarian values, ICRC took the lead in the development and coordination of activities. National societies continued to scale up their efforts and lobby their respective governments to implement international humanitarian law in accordance with the Geneva Conventions. Inter-ministerial commission has been set up in Mozambique to coordinate and implement IHL, and advise government in its obligation.

Objective 9: Overall management for an efficient and effective regional office provided.

With support from the regional office, the Federation President visited both the Malawi Red Cross and the South Africa Red Cross Societies in conjunction with his representation of the International Federation at the World Summit on Sustainable Development held in Johannesburg August/September. He had the opportunity to witness food security and HIV/AIDS programmes.

Some of the key programmes of the Zimbabwe Red Cross face the threat of reduced donor support given the policies adopted by the EU regarding targeted sanctions and the interpretation placed on this by certain countries. Efforts are being made to assure ongoing support for humanitarian activities.

The workload associated with the establishment of a food insecurity assistance programme has affected some of the regional office priorities, even though the extra capacity requirements were initially handled by the Johannesburg office. The need to assure strong co-ordination mechanisms has paid off and some of the workload is shared for optimal efficiency with the regional office.

Preparations are under way to convene the next meeting of the Southern Africa Partnership of Red Cross Societies (SAPRCS) on 21 & 22 November, hopefully linking the event to a three day Legal Base workshop, sponsored by the Danish Red Cross.

During the quarter, the regional office has met and organised many programmes for visits and media crews. These include visits from the Vice Chairman of the British Red Cross, Secretaries General from Denmark, Iceland and Norway and senior national society international staff from Canada, Japan and Netherlands

societies. Several of these visits have been accompanied by media representatives and in addition there have been separate media visits.

In relation to staffing at the regional office, in October, the Regional Finance Development Delegate's assignment will end. It has been decided not to reopen this position as good progress has been made during his assignment in identifying regional technical resources. In the organisational development programme budget for 2003, the department will be strengthened with regionally recruited staff to carry this work forward.

Outstanding needs

While the low coverage of this appeal means that there are many outstanding needs, donors are requested to turn their attention and support to the Federation's 2003 appeal for southern Africa which will be launched in December, 2002.

For further details please contact: Richard Hunlede, Phone: 41 22 730 4314; Fax: 41 22 733 03 95; email: hunlede@ifrc.org

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.

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

John Horekens
Director
External Relations Division

Bekele Geleta
Head
Africa Department

Southern Africa regional						ANNEX 1
APPEAL No. 01.16/2002		PLEDGES RECEIVED				21.11.2002
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
CASH						
REQUESTED IN APPEAL CHF ----->				15'818'226		TOTAL COVERAGE 53.7%
CASH CARRIED FORWARD				467'570		
Programme support				338'500		
AMERICAN - RC				23'000	22.04.2002	
AMERICAN - GOVT/PRM GRANT				170'000	USD	282'880 17.04.2002 ZAMBIA REFUGEE OPERATION
AMERICAN - GOVT/PRM GRANT				230'000	USD	382'720 17.04.2002 SOUTHERN AFRICA RD
AMERICAN - GOVT/PRM GRANT				64'000	USD	99'565 31.05.2002 HIV/AIDS
ANGOLAN - RC				601	USD	895 01.06.2002 PARTNERSHIP
AUSTRIAN - RC				61'000	EUR	89'444 23.04.2002 WATER/SANITATION
AUSTRIAN - RC				9'000	EUR	13'287 01.07.2002 WAT/SAN ASSESSMENT
BELGIUM - GOVT				32'973	EUR	48'338 13.11.2002 PERU FIRE
BRITISH - GOVT/DFID						182'500 19.02.2002 ORGANISATION DEV., DISASTER PREPAREDNESS, REGIONAL DELEGATION
BRITISH - RC				195'100	GBP	474'093 19.02.2002 REGIONAL WATSAN PROG
BRITISH - RC				834	GBP	2'047 31.01.2002 DELEGATE COSTS
BRITISH - RC				5'000	GBP	12'150 05.03.2002 DP/R, LOGISTICS UNIT
BRITISH - RC				117'046	GBP	284'422 27.02.2002 WATSAN PROG. SWAZILAND & MOZAMBIQUE
BRITISH - RC						12'000 24.07.2002 DELEGATE COSTS
BRITISH - GOVT/DFID						135'000 07.08.2002 ORGANISATIONAL DEV. & DISASTER PREPAREDNESS
BRITISH - RC				5'000	GBP	11'481 06.08.2002 ZIMBABWE RDRT TRAINING
CANADIAN - GOVT/RC				52'000	CAD	54'148 11.03.2002 NAMIBIA, HIV/AIDS
CANADIAN - GOVT				350'000	CAD	368'725 28.03.2002 LISN 111
CANADIAN - GOVT				88'000	CAD	83'028 12.09.2002 NAMIBIA: HIV/AIDS, WHA, CAPACITY BUILDING/VOLUNTEER MGT
DANISH - RC						245'000 08.02.2002 OD DELEGATE , 2 YEARS
DANISH - RC						35'000 15.10.2002 REGIONAL LEGAL BASE WORKSHOP
DANISH - GOVT/RC				481'250	DKK	94'951 01.11.2002 REGIONAL DELEGATION
DANISH - RC				178'500	DKK	35'218 15.10.2002 REGIONAL LEGAL BASE WORKSHOP
FINNISH - GOVT/RC				56'725	EUR	83'891 21.01.2002 OD PROGRAMME
FINNISH - GOVT/RC				58'025	EUR	85'813 21.01.2002 DISASTER PREPAREDNESS
FINNISH - GOVT/RC				57'025	EUR	84'334 21.01.2002 WATER & SANITATION
FINNISH - GOVT/RC				55'850	EUR	82'781 06.03.2002 SWAZILAND FOOD SECURITY
FINNISH - GOVT/RC				25'000	EUR	36'568 14.05.2002 CAPACITY BUILDING FUND,
FINNISH - GOVT/RC				25'000	EUR	36'908 04.06.2002 SARCS CAPACITY BUILDING FUND
FINNISH - RC				20'000	EUR	29'526 19.06.2002 ANGOLA
FINNISH - RC				24'539	EUR	35'974 22.10.2002 MOZAMBIQUE HIV/AIDS
FINNISH - RC				22'000	EUR	32'252 22.10.2002 ZIMBABWE HIV/AIDS
FINNISH - RC				12'000	EUR	17'592 16.09.2002 FEDERATION REPRESENTATIVE
FINNISH - RC				30'000	EUR	43'980 06.11.2002 CAPACITY BUILDING & ORGANISATIONAL DEVELOPMENT
GERMAN - RC				5'371	USD	8'656 13.06.2002 WATSAN TRAINING NAIROBI (4 PEOPLE
GERMAN - RC				1'220	USD	1'818 17.06.2002 HEALTH, ERU TRAINING

