

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

MALAWI

27 May 2003

Appeal No. 01.17/2003

Appeal Target: CHF 811,776 (USD 556,376 or EUR 551,823)

Programme Update No. 1;

Period covered: January to March, 2003

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.

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In Brief

Appeal coverage: 0%

Outstanding needs: CHF 811,776

Related Emergency or Annual Appeals: : Southern Africa Food Aid and Humanitarian Assistance (No. 12/02); Southern Africa 2003 Annual Regional Appeal (no. 01.24/2003)

Programme Summary: The Malawi Red Cross Society (MRCS) is dedicated to carrying out its responsibilities in relation to the Food Security Emergency Programme (Appeal 12/02) which has required most of its resources, and the scaling up of the HIV/AIDS Home Based Care programme, which is progressing according to schedule.

During the reporting period, the MRCS has been active in responding to minor emergencies, carrying out rapid assessments and distributing emergency relief supplies in response to the flooding that occurred in Balaka, Ntcheu and Salima districts.

No hard pledges have been received so far, which could hamper further implementation of Disaster Management (DM) activities, such as Community Based Early Warning Systems (CBEWS); Basic DM training for staff and volunteers; and the Consolidation of all DM resources into a central data base. Health, WASH and OD activities are also on hold pending donor support to enable further development activities.

Operational Developments

During the reporting period, the Malawi Red Cross Society (MRCS) was affected by both floods and drought, and has expanded its capacity to respond to the country's needs. Malawi is one of five countries in Southern Africa identified to benefit from the Federation's food security operation. The Society has worked with the World Food Programme (WFP) to distribute food and non-food items to the most vulnerable, particularly people living with HIV/AIDS.

The MRCS is strongly committed to the scaling-up of HIV/AIDS activities to respond to the humanitarian needs in the country with emphasis on home-based care (HBC) and prevention activities.

The Society also runs a very successful community based health development programme, which focuses on primary health care. The programme has greatly contributed to the improved general health standards of some of the most vulnerable communities, by providing clean drinking water, safe hygiene and sanitation, as well as the provision of basic health care through clinics in the rural areas.

In the first quarter of the year, the MRCS has undertaken a malaria project in close cooperation with the Ministry of Health and the WHO. The pilot project will be rolled out to more districts if it is successful.

The Society is successfully attracting partners and donors, and is increasing its capacity to respond in an appropriate and timely manner.

In November 2002, the MRCS was elected to chair the co-ordination committee of the Southern Africa Partnership of Red Cross Societies (SAPRCS) for the next two years.

Disaster Management

Over the past year, Malawi has been affected by critical food shortages primarily due to the drought that affected large parts of the southern Africa region. The country is currently benefiting from the ongoing food security emergency operations supported by the Federation's appeal (12/02). The MRCS is also receiving support from several bilateral partners with distributing food and non-food items to affected populations. Furthermore, the MRCS also operates as implementing partner to the WFP. Distributions of food and agricultural inputs continue to be one of the Society's major activities.

In January, the Tropical Cyclone Delfina caused heavy rains resulting in some localised flooding, which affected the four districts of Salima, Ntcheu, Balaka and Karonga. Some 300 families were left homeless, roads and bridges were damaged, standing crops and other property were washed away and four people were left dead.

The National Society monitored the situation closely and rapid assessments were conducted in the affected districts to ascertain the situation and establish immediate needs. In the four districts, those conducting the assessment met with survivors of the floods, local leaders, district officials and Malawi Red Cross members living in the affected districts. The rapid assessment concluded that the damage to and loss of crops, and the lack of food for immediate consumption were the main problems. Additionally there was also a need for shelter, clothes and blankets.

Following the initial assessment, a Plan of Action was devised which included the carrying out of a more in-depth needs assessment using trained Regional Disaster Response Team (RDRT) members who also participated in the distributions of relief items that ensued.

Immediate relief items for 300 households in the three districts of Salima, Ntcheu and Balaka were sourced using funds provided by the Food Security Operation's Federation Office in Johannesburg. The DP/DR department of the Regional Delegation in Harare provided the shortfall needed to carry out the short-term relief operation. Having provided the needed support to the victims of the floods in the three districts, the Society returned to concentrating on its longer-term food security commitments.

The MRCS Disaster Management (DM) programme is currently involved in the following operations:

- Targeted food distributions as an implementing partner with WFP/NGO consortium in five districts for 40,000 beneficiaries;
- Food and non food distribution in seven districts with support from ECHO, the Spanish Red Cross and the Federation for 258,000 beneficiaries;
- Running a care and maintenance refugee support programme as implementing partner to the UNHCR in Dzaleka Refugee camp for 12,000 beneficiaries.

The Southern Africa Regional Delegation continues to support the MRCS with its Disaster Management Programme. In March, a support visit was undertaken to assist and advise MRCS with the implementation of its DM work plan for 2003 -2004.

Overall Goal: Increased Disaster Management capacity of MRCS in reducing human suffering when disasters occur through capacity building and community involvement.

Objective: The capacity of MRCS to provide appropriate and timely support to the people affected by disasters is increased with participation of affected at risk communities.

Progress against Expected Results:

1. DM policy and plan reviewed and disseminated to stakeholders by end of 2003.

Review of the policy and plan is currently in progress with the support of stakeholders.

2. Disaster Management infrastructure is established and in place by end of 2004.

An inventory of National Society assets and volunteer base is being undertaken to determine the capacity of the Society.

3. Situation monitoring using CBEWS is established and operational by end of 2003.

Well-trained RDRT members are being used in the Society to provide situation reports of potential hazards, but an operational system is yet to be devised and communicated to all stakeholders up to the branch levels.

4. DM Capacity building for 500 programme staff and volunteers, 1000 division and volunteers by end of 2004.

Basic disaster training for programme officers and action teams members in the three most vulnerable districts is planned for June should funds become available. Three MRCS staff members attended the Vulnerability Capacity Assessment (VCA) Training of Trainers workshop in February conducted and facilitated by the Federation in Harare.

5. Emergency stocks for 500 people pre-positioned and an emergency fund for minimum of \$500 established by the end of 2004.

Some emergency items of second hand clothes are available from donors, but inventory of other emergency items is yet to be completed. The DM officer is drafting a fund raising proposal to be sent to various donors and corporate institutions.

6. Annual disaster simulations conducted in disaster prone areas.

MRCS is consulting with various stakeholders as to the exact venue, what the focus of the exercise should be, and who else should be involved. The Federation is supporting the MRCS in obtaining the necessary funding.

7. Disaster response plan developed and shared with stakeholders by the end of November 2003.

This is being done in conjunction with the policy review. First draft is expected at the end of June.

8. VCA conducted in three disaster-prone districts of Nsanje, Chikwawa and Salima by June 2004.

Due to the lack of hard pledges for DM activities for Malawi, this activity has been re-scheduled for later in the year.

9. Food security initiatives are integrated into national society priority programmes by end of 2003.

This is an area where great strides have been achieved due to the lessons learnt in the current food security operation. Various initiatives have been implemented which include starter packs for household farmers, vegetable gardens, farmers training and tools.

Impact

With the modest financial support from the Regional Delegation in Harare, and its own well-trained RDRT members ready to carry out rapid assessments, the MRCS retains its image, credibility and respect as a reliable source and responsive humanitarian organization. The planned DM developmental programme activities are realistic and will further enhance the National Society's disaster management capacity for the benefit of vulnerable

communities. Overall, the past and present activities of the Society in responding to emergencies has raised its profile/image in the country and given it visibility and credibility and the Society is recognized as an important player on the humanitarian scene.

Constraints

Lack of guaranteed funding from the beginning of the year has caused some delays in the implementation of DM developmental activities. Furthermore, attention is presently being focused on the food insecurity crisis in the region, which means, that available resources are being diverted to the food security operations. However, all concerted efforts are being made to raise funds for the programme.

Coordination.

MRCS has a good image in the country and is well respected by other agencies, such as: WFP in carrying out well prepared, coordinated and monitored distributions; and by UNDP and embassies in carrying out rapid and honest assessments. Further more, the Society is making every effort to maintain its good working relationships with other relevant/related organisations both within government and non-governmental organisations. In the refugee programme, close collaboration and good working relationships with UNHCR, government and other participating partners are being maintained.

HEALTH & CARE

Overall Goal: A sustainable improvement in the general health and reduction of HIV/AIDS transmission in the targeted vulnerable communities through the provision of community based health and care interventions.

Programme Objective: The Regional Delegation supports the MRCS capacity to implement community-based health care programmes, including HIV/AIDS and water and sanitation programming, thereby improving the general health situation in targeted communities and increasing the communities' coping capacity in disaster situations.

HIV/AIDS

The MRCS is strongly committed to the scaling-up of HIV/AIDS activities, and since 2001 has put its efforts into home-based care and prevention activities in an effort to curb the spread of HIV/AIDS.

Based upon a baseline survey, the Federation Regional Delegation assisted the National Society to develop a five-year strategic plan for HIV/AIDS, to employ an HIV/AIDS coordinator and to initiate home-based care activities. The Southern Africa Regional Delegation facilitated the sharing of experiences and lessons learned from the Zimbabwe Red Cross on how to establish HIV/AIDS projects in Malawi.

The MRCS currently has 12 home-based care projects in 12 districts. The projects are supported by the Federation, the American, Danish and Icelandic Red Cross Societies.

During the reporting period, the Society held a home based care training course for 25 participants and two refresher courses for 50 care facilitators. A workshop was also held for Project Officers to review progress against the planned activities.

The Society has two OVC projects (Orphans and other Vulnerable Children projects), which are in the process of being restructured. The projects will be operating as community day care centers where some attendants will keep children during the day. The children will receive food, clothes and recreational activities.

Prevention activities are ongoing. Peer educators were trained and are conducting educational campaigns. The same educators are being used during distributions of food under the food security programme.

In connection with the food security operation, distribution of food and non-food items has been targeted at the most vulnerable groups such as orphans, elderly, widowers and people living with HIV/AIDS through the Society's home based care programmes.

Progress against Expected Results:

1. 3,200 orphan guardians trained and 2,000 orphans identified and registered.

The number of orphans is currently being compiled. The Society is yet to establish an Orphan Care Project through Community Day Care Centres. The project will take off, as soon as it has been restructured.

2. Orphan support groups formed.

Support groups for orphans will be established as soon as the project takes off.

3. 2,000 People Living With HIV/AIDS (PLWHA) received Home Based Care and new support groups formed.

The Society has 12 Home Based Care projects in 12 districts. Project Officers were instructed on the use of monitoring forms. So far, 200 care facilitators have been trained who are taking care of 700 clients.

4. 100 counselors trained.

Project Officers have been trained in counseling skills and are now coaching the care facilitators. The National Society also collaborates with the local health facilities to offer counseling services to the clients.

5. PLWHA accepted in communities with full respect to their legal rights.

Advocacy for PLWHA is ongoing within the Home Based Care programme. The Care Facilitators educate the family members and the communities on the effects of stigma and discrimination

6. The MRCS is recognised both nationally and internationally as a key actor in the fight against HIV/AIDS, through advocacy and communications strategies directed at media and authorities.

The National Society continues to be recognised internationally and locally through its activities. HIV/AIDS programming is one of the Society's many activities that are currently attracting a lot of attention.

Impact

In the process of scaling-up HIV/AIDS activities, the branches with home based care projects have been strengthened, and their capacity has increased as volunteers now have skills in prevention and care. As a result, many people living with HIV/AIDS have had their lives prolonged through the care and psychological support they have received from the care facilitators and from the food and non-food items distributed to them through the food security programme. There is also evidence of improved personal and environmental hygiene among the clients.

Constraints

Lack of computers for Project Officers to assist in the compilation of data and reports is exerting a lot pressure on the HIV/AIDS Coordinator and monitoring of impact is hence limited.

Coordination

Co-ordination of various donor activities and programmes is important to ensure optimal impact of resources and to avoid overlap. The National Society networks with UNAIDS, Ministry of Health, Association for PLWHA, National AIDS Council, UNICEF, Churches and chiefs.

Health

During the reporting period, the Regional Health Department has monitored the drought situation in Malawi closely, which caused food insecurity in parts of the country. In March, the Cyclone Japhet caused localized flooding and some damage to crops and infrastructure. The floods also caused an increased breeding of mosquitoes, which has led to increased malaria morbidity and mortality in some districts. The Ministry of Health and the WHO called for partners to support them to address the malaria situation. The MRCS was approached, and with support from the Federation and the Swedish Red Cross, the Society now has a pilot project established in community based malaria control in Nkhotakota.

The MRCS has long experience in the implementation of community-based health projects aimed at supporting the most vulnerable communities, in the reduction of morbidity and mortality caused by common health problems. Through these activities, the National Society has gained respect and visibility throughout the country as a strong

player on the humanitarian scene, complementing the effort of the MoH in the provision of primary community based health care.

The Community Based Health Development Programme is supported by the Danish Red Cross and is geared towards supporting under-five growth monitoring, promotion of nutrition, first aid and IEC on common diseases. The 2001 evaluation of the project showed a significant impact to the targeted population and recommended the extension of the programme to other areas.

The Society's health activities are in line with ARCHI 2001 and the Ouagadougou Declaration.

Progress against Expected Result

1. The capacity of MRCS to design and implement community-based health care projects is strengthened.

With support from the Regional Delegation MRCS has managed to establish and implement a community malaria prevention pilot project in Nkhotakota District. A total of 150 volunteers have been trained for community malaria interventions by 13th March this year, and another 150 will be trained before the end of May. Volunteers trained are mobilising communities for malaria interventions, including IEC. Steps have been taken to involve UNICEF for possible collaboration. Other planned activities, such as first aid training and immunization coverage, have yet to be implemented, but will be when funding is available.

Impact

The malaria project in Nkhotakota District has increased knowledge of malaria and has enabled the MRCS volunteers to provide accurate information to their communities on how to prevent and respond to malaria infection at community level. The communities in Nkhotakota have received information on how to prevent malaria within their community and what to do when they suspect they have caught malaria. The use of insecticide treated mosquito nets is being promoted by volunteers as well as advice on where to get them. The impact of this information is yet to be measured, but a decrease in the number of malaria cases is expected shortly. The malaria pilot project is a good opportunity for the national society to work with the WHO and will increase its capacity and knowledge of how other organizations work.

Constraint

Implementation of most of the planned activities could not take place due to lack of funding from the beginning of the year until now. Likewise, technical support from the Regional Health Department was not provided, although critically needed, due to lack of funds. This is very unfortunate, as the need for primary health care activities is as big as ever.

Coordination

With support from the Regional delegation, the MRCS was able to work closely with the MoH and the WHO country office to conduct needs assessment for malaria interventions. The process has enabled MRCS to implement the Nkhotakota malaria project. Communication has been made with the UNICEF country office in Malawi for possible collaboration in malaria and other key areas.

Water and Sanitation

Malawi Red Cross remains strongly committed to its Water and Sanitation (Wat-San) programme, which is regarded as a core programme within the Health and Care sector. The programme is implemented in the districts of Chikwawa (south) and in Nkhotakota (central). The programme targets approximately 40,000 beneficiaries.

Emphasis this quarter has been on intense community based training with focus on 'software' issues in order to scale up activities within the framework of the food security operation. During the reporting period, training of 11 out of 19 water point committees, which were formed in Nkhotakota last year, was done.

Links with health and HIV/AIDS departments have been further strengthened through an initiative taken by the National Society's Wat-San team to integrate activities more closely. Efforts have also been made to scale-up Wat-San activities within the food security operation that is targeting the same district. Unfortunately, no substantial funding came through. However, existing plans will be implemented as soon as coordination and cooperation between the food security operation and the regionally financed Wat-San programme is working well.

Progress against Expected Results:

1. Provision of sustainable water and sanitation services at National Society and beneficiary community level with extra capacity to respond to emergencies.

2. Beneficiaries empowered to plan and implement water and sanitation activities with linkages to health and HIV/AIDS programmes.

3,170 beneficiaries have benefited from an intense training and promotion programme in their communities. Eleven water point committees which consist of ten members each (chairman, treasurer, pump care takers, hygiene promoters), and are in charge of an approximate number of 48 households each, have been trained in Community Based Management (CBM) and promotion. The CBM trainings aim at building capacity and increasing knowledge about how technically and managerially to maintain a community owned water point by discussing issues such as:

- How to raise awareness for the capital investment needed for the Wat-San programme;
- How to build a pump maintenance fund;
- Leadership skills to help the community organize themselves;
- Hygiene education and sanitation promotion system; and,
- Capacity building for proper operation and maintenance of boreholes and hand pumps.

2. Red Cross branches are catalysts of Wat-San activities in the National Society.

The MRCS branch in Nkhotakota is actively involved in the Wat-San programme the number of volunteers active in Wat-San activities is constantly increasing. There are now 60 (formerly 24) volunteers who have done the Training of Trainers course, but more than 2,000 people see themselves as Red Cross volunteers as they provide free labour for Wat-San work and are active in hygiene promotion. The Society's Wat-San team and the Nkhotakota branch took the initiative to strengthen the inter-action with health and HIV/AIDS programmes to maximize the impact on the vulnerable population resulting in increased appreciation of Red Cross activities on beneficiary and district side.

3. Increased Wat-San technical and managerial capacity in the National Society.

Two support visits from the Regional Wat-San team to the society aimed at rendering technical advice on difficulties encountered with water quality at four boreholes and on supporting the financial management of the Wat-San programme. It is understood that, once finances are clarified, the technical installation of the remaining boreholes can be carried out by the Society. A good initiative was taken by the MRCS Wat-San Coordinator to divide tasks within the team and in the district to distinguish between 'hardware' (technical aspects) and 'software' (see point 1.) issues.

4. Sustainable and appropriate Wat-San infrastructure and systems in accordance with SPHERE and country standards.

Experience from last years installations shows that the MRCS has chosen the right infrastructure, which is the accepted type of water supply recommended by government and communities. The distance and improved water quality is highly appreciated. The same type will be applied in this year's work.

5. Increased national society ability to implement emergency Wat-San interventions.

During the reporting period, Malawi was affected by localised flooding in the Southern provinces (Balaka, Deza and Ntcheo) due to the effects from cyclone 'Delfine'. However, the assessment, which was carried out by the MRCS requested some relief but no Wat-San interventions.

Impact

Last year's activities were nearly completed in the first quarter of the year, despite the overall food security related activities for Wat-San. Reinforced links between Wat-San, health and HIV/AIDS activities contributed to the improved programme outcome. The impact of the Wat-San activities through out the country is visible and is frequently reported, such as:

"Safe water has greatly improved the health status of this village, since Red Cross provided us with this water facility. There has been no cholera, dysentery or severe diarrhoea as was the case before"

-Njoka water committee member.

“Women no longer walk long distances to fetch water, the laundry slab has eased the difficulty of always looking for better places for washing clothes, clothes are washed very well and also close to where water is available,”

-Chimundi water committee member.

The water and sanitation activities not only contribute to the improvement of the general health of the targeted communities but also to the raising of the image of the Malawi Red Cross.

Constraints

Delays in implementing this year's activities might be expected due to the impact of the overall food security programme. Despite its own structure, the magnitude of this intervention stretched the finance/admin. capacity of the National Society beyond its limits. This consequently contributed, to some delays in the implementation of Wat-San activities. However, this has been acknowledged by the concerned and will be taken care of in the coming integration process of the Food Security operation with the Regional Delegation.

Coordination/Collaboration

MRCS has established very good collaboration with all government departments on district level and actively include them in their assessments, community training activities and monitoring of activities. A coordination meeting with UNICEF will take place soon to complement activities. Coordination with the food security operation is going well.

Organisational Development (OD)

The Regional Organisational Development programme has been supporting the Malawi Red Cross Society in its various OD related areas such as the improvement of governance and management relationship, branch development, volunteer management and financial management.

At the SAPRCS meeting held in Namibia in November 2002, the Malawi Red Cross Society was given the chairmanship for the forum for the next two years. This testifies to the increased capacity the Society has built up over the past years with the support of the Regional OD programme.

During the reporting period, discussions have been on-going on how to get support for the planned OD activities for the year 2003, as the Society has not yet received any funding towards the appeal. Consequently, during this quarter, it has not been able to implement many of the planned activities, but consultations with bilateral donors (American, Icelandic, Danish, Spanish and Irish Red Cross) are ongoing.

Overall Goal: Implementation of characteristics of a well-functioning national society has improved the MRCS in the three key areas: foundation, capacity and performance.

Programme Objective: The Federation Secretariat supports the National Society's efforts to accomplish the optimal capacity to respond to the large humanitarian challenges and needs in the country.

Progress against Expected Results:

1. The capacity of MRCS to design and implement their strategic directions is improved.
2. MRCS has a legal foundation that supports the effective implementation of programmes.
3. MRCS has an effective volunteer management system in place.
4. MRCS has increased its financial resource base in both value and diversity.
5. MRCS has functional branches in place that are actively participating in project implementation.
6. MRCS has in place effective financial management systems.

Unfortunately, there was no major achievement with regards to the organisational development plan of activities for 2003/2003. Activities mentioned above, are planned to cover the two-year period of the appeal. The reporting period was also a busy time for the National Society with many other commitments to attend to and OD activities planned for the first quarter could not be implemented. These will be carried forward to the second quarter.

Impact

It is hoped that during the second quarter of 2003 there will be some major change in terms of the National Society's capacity building by implementing some of the activities mentioned above. Malawi is invited to attend and share its resource development plan during the upcoming first Resource Development workshop in JNB. The CAS process needs to be updated to bring donors to respect and appreciate the National Society's Strategic Plan.

Constraints

There is no clear picture about the Federation's Appeal 2003/2004 concerning donors' pledges. The majority of the donors in the country are operating bi-laterally with MRCS and do not include capacity building such as branch development, volunteers management and resource mobilisation in their projects.

Coordination

The Regional OD department had some discussions with the Federation Country programme manager (SA food security operation) on capacity building link to branch development, volunteers' management and Fundraising plan.

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