

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

25 November 2003

Focus on HIV/AIDS and Water and Sanitation

Appeal No. 01.17/2003

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

Programme Update No. 2;

Period covered: April - November 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.

For more information: www.ifrc.org

In Brief

Appeal coverage: 59.2%; [Click here to go to the attached Contributions List](#)

Outstanding needs: CHF 331,366 (USD 248,900 or EUR 213,300)

Related Emergency or Annual Appeals:

- Southern Africa: Food Aid and Humanitarian Assistance; Emergency Appeal No. 12/2002
- Southern Africa: Food Security and Integrated Community Care; Emergency Appeal No.15/2003
- Southern Africa Regional Programmes; Annual Appeal No. 01.24/2003

Programme Summary: The [Malawi Red Cross Society](#) has scaled up the health and care activities in the country impacting other activities. Major developments have been noted with regards to HIV/AIDS and water and sanitation. During this reporting period, the Malawi Red Cross was able to disburse food items to some hunger victims. Training has also been done to volunteers and a few water and sanitation staff. However, lack of funding stalled the implementation of other programmes' activities for instance disaster management and organizational development.

Operational developments

The Malawi Red Cross has continued scaling up health and care and other core related activities, with communities becoming more involved in planning and implementing the Red Cross programmes, both as volunteers and as stakeholders. The national society appreciates financial resources and other forms of support provided by respective donors and the Federation. The Malawi Red Cross was thus able to carry out its humanitarian services, especially in relation to HIV/AIDS and water sanitation.

Health and Care

The Malawi Red Cross made plans to provide food resources to some of the estimated 10% of the population still suffering from hunger in parts of the north and south of the country. The expected Federation funding did not come in until October. Nevertheless, the America Red Cross bilaterally supported Malawi Red Cross food security programme activities which continued throughout the period, and certainly helped to meet food and nutrition needs of some of the Malawi Red Cross intended beneficiaries

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

Objective: The regional delegation supports the Malawi Red Cross 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

Objective: Incidence of HIV infection has been reduced by increasing knowledge and awareness of the disease among the target population.

Progress/Achievements

- **50,000 youths in four districts trained and informed on HIV/AIDS and STD¹ prevention and transmission**
ARCHI² tool kits with HIV/AIDS information were translated for use by HIV/AIDS project volunteers for community education in all 12 programme districts.
- **Risk reduction behaviour promoted among youths**
One-day stages for drama, music, poems, debates, traditional dances, sports, distribution of brochures with HIV/AIDS prevention messages were conducted in Mwanza, Zomba, Mchinji, Ntchisi, Mwanza, Karonga, Dedza and Balaka to promote community behaviour change. This activity reached out to about 26,000 people every month.
- **300,000 condoms distributed**
1,800 condoms were distributed in Nkhatabay, Mwanza and Mchinji.
- **3,200 orphans guardians trained and 2,000 orphans identified and registered**
Planning for orphan care and youth programmes was completed in Mchinji, Lilongwe, and Zomba and Blantyre districts.
- **Orphans support groups formed**
Community gardens for support of orphans and chronically ill clients have been established in Mchinji, Karonga and Mwanza districts. About 3,000 orphans received second hand clothes.
- **2,000 PLWHA³ received HBC⁴ and new support groups formed**
Support group formation training was conducted in Mchinji district. Two support groups for PLWHA have been formed in Mchinji and 22 HBC coaches selected in nine districts. HBC project linked to water and sanitation project in Nkhotakota and Mchinji were established. On average 2,100 clients have access to HBC service monthly.
- **2,000 care providers and 1,000 care facilitators identified and trained**
Training was conducted for 61 home-based care providers in Dedza, Balaka and Karonga districts.
- **100 counsellors trained**
An HIV/AIDS campaign team for chiefs was established in Mchinji district.

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¹ STD – Sexually-transmitted diseases. See also STI – sexually-transmitted infections.

² ARCHI – African Red Cross and Red Crescent Health Initiative 2010 builds on its strength: a Red Cross and Red Crescent presence in each of 53 countries in Africa and, in all, more than 2 million volunteers. The overall goal of ARCHI 2010 is to make a major difference in the health of vulnerable people in Africa. Refer to <http://www.ifrc.org/what/health/archi/>

³ PLWHA – Persons living with HIV/AIDS

⁴ HBC – Home-based care

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- **PLWHA accepted in communities with full respect to their legal rights**

About 200,000 brochures with different HIV/AIDS messages were distributed in 12 districts. HIV/AIDS workplace policy design was completed by the HIV/AIDS coordinator with the support of the America Red Cross delegate.

Impact

It is difficult to narrate how the activities implemented have improved people's lives in the community without a proper assessment. However, over time, with more community-based prevention activities implemented in the communities, the project realized increased demand for voluntary counselling and testing, more openness about HIV/AIDS seropositivity and increase in open discussion about HIV/AIDS issues in the community.

Constraints

- As the approved budget from the Federation for Mchinji, Zomba, Blantyre and Lilongwe districts does not have a budget line for youth peer education programme, implementation of related activities has to be put on hold.
- Lack of flexibility of the Federation budget to allow for, for example, orphan care and support activities.

Water and Sanitation

Objective: Provision of sustainable water and sanitation services at national society and beneficiary community levels with extra capacity to respond to emergencies

Progress/Achievements

- **Beneficiaries empowered to plan and implement water and sanitation activities with linkages to health and HIV/AIDS programmes.**
Community sensitization and mobilization meetings were conducted with the beneficiary communities of the 15 villages in Nkhotakota district. Programme activities and roles and responsibilities of each stakeholder were clearly outlined. Plans and modalities of implementation of the activities were discussed and agreed upon, so beneficiaries know clearly what their role in the programme will be and also any form of contribution they are supposed to do.
- **Red Cross branches are catalysts of water and sanitation activities in the national society.**
Red Cross branches assisted in the selection of intervention areas in Nkhotakota district, which also included the selection of villages and sites for drilling of boreholes and family latrine construction. Branches also assisted in the sensitization and mobilization process of the programme activities to the intended beneficiaries in the selected intervention areas.
- **Increased water and sanitation technical and managerial capacity in the national society.**
The Malawi Red Cross water and sanitation programme officer underwent training in management development for three weeks in Manzini, Swaziland to enhance the managerial capacity, which will result in effective and efficient implementation of programme activities. The recruitment of the water and sanitation software officer in August 2003, greatly improved on the efficiency and effectiveness of the software aspects of the programme since the officer has adequate experience and skills in participatory methodologies such as participatory hygiene and sanitation (PHAST) and participatory rural appraisal (PRA)
- **Sustainable and appropriate water and sanitation infrastructures in accordance with SPHERE and country standards.**
A total of 10 boreholes have been drilled, 30 volunteers and five extension workers from 15 villages trained in the trainers course in hygiene promotion, latrine construction and SanPlat⁵ casting (82 SanPlats cast and 38 installed on pit latrines), and formation of 15 water points all in Nkhotakota district.

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⁵ SanPlat (sanitation platform) is a concrete latrine slab that can be integrated into any existing traditional latrine system.

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- **Increased national society ability to implement emergency water and sanitation interventions.**

A Malawi Red Cross water and sanitation technician attended the regional disaster response training (RDRT) that was conducted in Salima district in September-October, increasing the number of RDRT trained water and sanitation staff to three.

Impact

Beneficiaries are fully participating in the implementation of programme activities because they have assumed ownership and responsibility of the activities since they were fully involved in the planning process. The Malawi Red Cross and its activities are becoming well known in the communities. There was a marked reduction in diarrhoea cases in the intervention areas. Distances to safe water points have been reduced resulting in women doing other household chores and economic activities. Congestion and queuing on water points was greatly reduced and women and girls do not spend a lot of time fetching water but now spend time doing other things. Hygiene knowledge of the beneficiaries is improved which has resulted in good hygiene practices. There are now well-trained and available water and sanitation officers in the national society who may be deployed at a short notice in case of a disaster.

Constraints

Inadequate funds earmarked for training resulted in having most of the water and sanitation staff not given any form of training during the reporting period. Late disbursement of funds significantly delayed progress of activities such as the drilling, trainings and casting of SanPlats. Only a few water and sanitation staff are trained so far in Malawi.

Coordination

The regional HIV/AIDS coordinator, regional HBC programme officer, and the regional HIV/AIDS officer visited the Malawi HIV/AIDS projects during the reporting period. The regional delegation facilitated hiring of a trainer from Zambia to orientate project staff and volunteers on support group formation. The regional HIV/AIDS scaling-up committee visited the project through coordination from Harare. The visit was very helpful. Gaps and areas of improvement were identified and discussed with the project team. Regular consultations with the head of Zambia delegation have been useful for Malawi Red Cross. There has been close coordination between water and sanitation programme and the HIV/AIDS and health programmes in planning and implementing activities.

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All International Federation assistance seeks to adhere to the Code of Conduct and is committed to the Humanitarian Charter and Minimum Standards in Disaster Response (SPHERE Project) in delivering assistance to the most vulnerable.

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

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DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
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CASH

				TOTAL COVERAGE		
REQUESTED IN APPEAL CHF ----->				811,777		59.2%
CASH CARRIED FORWARD						
REALLOCATIONS FROM AP.01.24/2003				299,410		HIV/AIDS
BRITISH RC				150,000	18.11.03	REALLOCATIONS
BRITISH RC				31,000	18.11.03	REALLOCATIONS
SUB/TOTAL RECEIVED IN CASH				480,410	CHF	59.2%

KIND AND SERVICES (INCLUDING PERSONNEL)

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
SUB/TOTAL RECEIVED IN KIND/SERVICES						
				0	CHF	0.0%

ADDITIONAL TO APPEAL BUDGET

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
SUB/TOTAL RECEIVED						
				0	CHF	