

ANNUAL REPORT



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

SOUTH AFRICA

30 April 2005

In Brief

Appeal No.: 01.17/2004 – http://www.ifrc.org/cgi/pdf_appeals.pl?annual04/011704.pdf

Appeal target: CHF 3,326,436 (USD 2,498,262 or EUR 2,141,253)

Appeal coverage: 18.2% ([Click here to access the final financial report](#))

Appeal 2005: South Africa no. 05AA014 – http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/05AA014.pdf

This Annual Report reflects activities implemented over a one-year period; they form part of, and are based on, longer-term, multi-year planning. 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 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's website at <http://www.ifrc.org>

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Overall analysis of the programme

The South African Red Cross Society¹ progressed in 2004 towards becoming a well-functioning national society, although, there is an urgent need to emphasise and critically look at strengthening the capacity at provincial and branch levels. This is important for ensuring effective expansion and implementation of planned activities, especially for HIV and AIDS and disaster management interventions.

The organizational development programme has been implemented through six clearly developed projects based on intensive assessment undertaken by the national society in 2002 -2003. The projects addressed the key priority areas namely; governance and management, human resource development, administration and financial management, external relations and resource mobilisation, branch development and volunteer management as well as empowerment of youth. Some of the highlights include the completion of the key performance objectives (KPOs) for the governing board and the secretary general as part of the performance management system. A joint governance workshop with Zambia Red Cross and Zimbabwe Red Cross Societies was held in Zambia in December 2004. National branch development and volunteer management workshop was also conducted in Johannesburg end of November. The Annual General Assembly (AGM) was held in September where the revised statutes were adopted and two new board members elected. The external relations, resource mobilization and

¹ South African Red Cross Society - <http://www.ifrc.org/where/country/check.asp?countryid=158>

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fundraising project commenced in July after a long preparatory period. Initial activities included image and public opinion surveys, direct mail appeal, upgrading the national society web site as well as a joint launch of the World Disasters Report 2004 in collaboration with the Federation.

The national society mobilizing resources capacity was thoroughly tested during the Tsunami disaster in December 2004. Based on the capacity building process related to external relations and resource mobilization since 2002, the national society successfully launched a local appeal for Tsunami victims. The national society mobilised the government, media, corporate sector and the general public for support. The national society raised more than ZAR 25 million (CHF 5 million) to assist the affected sister national societies through the Federation in Asia and East Africa.

At the 6th Pan Africa Conference (PAC) in Algiers (September 2004), the South African Red Cross won the bid to host the next PAC in 2008. This is a sign of trust and recognition on the national society based on their progress made since 2002. The national society conducted the first PAC informal preparatory meeting with the government in November and formal meetings are planned for early 2005.

HIV and AIDS interventions are being gradually expanded and local funding at the national level has been secured also in-country from the department of health to support the activities. The South African Red Cross has been contributing to the development of the orphans and other children made vulnerable by HIV and AIDS (OVC) initiatives in the region.

Disaster management programme did not attract funding through the Federation. However, the IICRC commenced their support to this core area during the year. Cooperation with the government was also strengthened and provincial level contracts were signed in several provinces for disaster response initiatives. Disaster management activities have focused on emergency response in areas affected by drought, floods and fires. From the preparedness point of view, disaster management training has taken place at the provincial and branch level.

Although the Federation appeal was not fully funded in 2004, the funding received enabled the national society to implement a number of planned activities in all core areas within their current capacity as reported below.

Health and care

Goal: There is a reduction in the transmission of HIV and incidence of disease, and the quality of life of people infected and affected by HIV and AIDS and disease is improved.

Objective: The capacity of the national society to provide health and HIV and AIDS education and care and support to the most vulnerable communities, particularly those affected by HIV and AIDS, is increased during the period 2004-2007.

HIV and AIDS

Progress/Achievements

The knowledge of the most vulnerable communities, particularly the youth, is improved on HIV and AIDS, sexually transmitted infections (STIs) and tuberculosis (TB) and method of prevention

The HIV and AIDS youth peer education project was implemented in the Western Cape, Gauteng, Northern Cape and Free State provinces despite not having received funding at national level since December 2003. By the end of 2004, approximately 500 youth received the "Together We Can" peer education training monthly through collaboration with schools. The national society will continue to seek funding for peer education activities locally and internationally in 2005. The South African Red Cross has local partnerships with both Love Life and Soul City to conduct additional peer education activities in some provinces. These two organizations focus on mass media interventions and integrate printed information in the form of booklets for peer education and life skills development at community level.

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Health education mainly focusing on HIV and AIDS prevention, reached over 11,000 community members each month. Health education activities on HIV and AIDS, sexually transmitted infections (STIs), hygiene, and nutrition depending on the needs identified in the community were conducted at clinics, schools and churches. Health education literature provided by the department of health was distributed during health education and peer sessions. The sessions also included awareness campaigns on condoms. Condoms are provided by the department of health and are made available at the South African Red Cross premises and community condom depots. About 68,000 male and 1,250 female condoms were distributed monthly during 2004.

Voluntary counselling and testing (VCT) and the prevention of mother-to-child transmission (PMTCT) of HIV infection are promoted

The promotion of PMTCT forms part of the health education sessions and targets young mothers and expectant mothers. A total of 260 clients were enrolled on a PMTCT programme by the end of 2004. VCT is promoted through health and peer education activities as well as to HBC clients receiving care and support. By the end of 2004, 2,716 clients were counselled on VCT and 2,008 clients received VCT. The VCT project in Limpopo province made good progress with 60 lay counsellors receiving training during 2004 and provided pre- and post HIV testing counselling at VCT sites in two districts. VCT sites are relatively accessible in the urban centres but are difficult to access in the rural areas, particularly where poverty restricts expenditure on transport.

Care and support to people infected and affected by HIV and AIDS and other diseases is improved

In total, four new integrated community home-based care (ICHBC) HIV and AIDS projects were started in Gauteng province in late 2003 and, through steady progress, were fully integrated into the referral/ care networks in the target areas by the end of 2004. In addition, two new projects in two provinces were started in November 2004. By the end of 2004, 162 ICHBC facilitators had supervised and supported over 600 volunteer caregivers. The retention of volunteers has always been a problem as the government pays community members to do similar work. The South African Red Cross was one of only four non-governmental organizations to be recognised by the Department of Health for funding at national level for HBC HIV and AIDS activities in 2004. Part of this funding will be used to pay incentives to Red Cross volunteers in order to be in line with government practice. This should reduce volunteer turnover substantially.

The volunteers and facilitators recorded about 19,000 home visits on average per month indicating a relatively high level contact with clients. Over 3,200 new clients were registered during 2004. The majority of these clients were referred through the community and by the end of 2004, the percentage of referrals from the health facility had grown to over 30% indicating that the referral network is effective. The number of clients (and their families) receiving care and support during 2004 was 6,198 (after discharges and deaths have been taken into account) and 8,908, in total, have received support. It is estimated that the total number of beneficiaries, including family members of clients is 44,000. Referrals to the Department of Social Development and assistance to clients in obtaining social grants continued to improve and more than 25% of clients received some form of social grant. By the end of 2004, there were approximately 604 clients involved in self-help projects including dressmaking, beadwork, catering and shoemaking.

Approximately 1,200 food parcels were distributed monthly and, by the end of 2004, over 1,000 food gardens had been established to supplement clients' nutritional needs. Gardens are mostly small "door step" gardens with a few larger communal gardens. The need for food is much greater than current supplies that are limited by budgetary constraints. The funding received from the Department of Health includes foods that will be provided to about 1,000 clients. In addition to food parcels non-food relief such as blankets was distributed to about 1,100 clients each month.

By end of 2004, 194 HBC clients had received anti-retroviral treatment (ART) while there were approximately 12,000 people on the government's ART programme throughout the country. The South African Red Cross started training facilitators on ART in order to educate communities and provide adherence support to people on ART.

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The psycho socio-economic conditions of OVC are improved

By the end of 2004, 2,803 OVC were registered on the project, including members of 88 child headed families. The OVC are supported through the CHBC activities and they receive the same services as HBC clients. During 2004, approximately 425 OVC received food each month and 565 OVC received non-food relief such as clothing and blankets. There are 13 support groups for OVC.

The South African Red Cross has established day nurseries (crèches) for OVC in Zululand and one in Nyanga, Cape Town. A total of 145 children attended these crèches which are run almost entirely by the community. School fees were paid for some OVC and direct interventions with schools to accept children who were previously rejected were successful. A training workshop on Memory Work (including the memory box) was held in Cape Town and attended by representatives from each project. The Western Cape projects received training on psychosocial support for children from the South African Red Cross's partner, the Regional Psychosocial Support Initiative (REPSSI). Following a joint assessment with the regional OVC delegate in KwaZulu Natal, a pilot project for OVC is being planned for the province as well as a second one for the Free State province.

Stigmatisation of HIV and AIDS and discrimination against people living with HIV and AIDS (PLHIV) is reduced

Stigma and rights issues were addressed during peer education sessions, some of the health education sessions and with PLHIV at support group meetings. During 2004, approximately 2,300 people attended the 97 training sessions on the rights of children. A total of 108 sessions on the rights of PLHIV were conducted and 4,800 people attended. Most clients have disclosed their status to family and friends and the project supports those who wish to disclose their status as well as clients who are victims of stigma and discrimination. The South African Red Cross participated in World AIDS Day activities in December 2004 throughout the country as a means to advocate for greater support for PLHIV.

Impact

During 2004, the South African Red Cross focussed on improving the quality of services provided to beneficiaries, rather than the number of beneficiaries reached, through improved reporting and monitoring, training and dissemination of project objectives and information. At the same time the project has been implemented in new areas allowing for scaling up within the capacity of the national society.

All projects have been well accepted by the target communities and local, provincial and national government has recognised that the South African Red Cross is playing an important role, particularly within the continuum of care through the provision of HBC. This recognition from government has resulted in it accepting to fund the project at national level. Furthermore, the government contracted a consultant to assess the impact of HBC service providers nationally and the South African Red Cross project was accepted as a benchmark for best practice, increasing the visibility of the Red Cross.

The project addressed the health needs of clients through the provision of basic nursing services in the home and through the referral system that has resulted in improving the health status of clients. Food parcels and other nutritional interventions further helped support the health of clients and played an important role in the event that the client receives anti-retroviral therapy and medication for opportunistic infections (especially tuberculosis [TB]). Psychosocial support benefited both clients and their families in dealing with HIV and AIDS and support to families continues after the death of clients. Support groups provided additional psychosocial support; economic support is provided through the establishment of self-help projects. Additionally, clients and their families are supported in gaining access to government grants, thus increasing their financial support base.

OVC receiving care and support benefited similarly to adult clients through HBC activities. Additional interventions have been put in place for OVC including a growing number of community day crèches, payment of school fees and other direct interventions with schools to ensure continued schooling, support groups and memory work with children. The psychosocial support partnership with REPSSI has significantly increased the capacity of the South African Red Cross to improve interventions focused on children affected by HIV and AIDS. The

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advocacy role played by the South African Red Cross at community level cannot be underestimated and the success in reducing stigma, particularly within the home, has been of a high level.

Whilst it cannot be shown that the prevention activities, including peer education, health education and condom distribution have resulted in behavioural change, the services continued to be in demand from the communities and schools. The pre- and post-peer education questionnaires indicated that the level of knowledge on HIV and AIDS has improved. The promotion of VCT and PMTCT has resulted in more community members receiving VCT to establish their status and a growing number of clients have been included in PMTCT programmes.

Constraints

Poverty within the targeted communities continues to play a major role on the overall impact of the project. Food insecurity, access to clean water, access to health facilities in the rural areas and lack of proper housing often detract from the benefits of the project. This has also impacted on volunteerism within the project as the volunteers themselves come from the same communities affected by poverty. Stigma remains a serious barrier to the success of certain interventions, and is more evident in urban areas where the sense of community is not present. Financial support for the peer education project is needed to ensure the survival of the project on a national level.

Due to a lack of structures and capacity at national level it is not always possible to support timely implementation of interventions, given the size of the project. The national society has therefore opened a position for a national health and care coordinator to support provinces in implementation. This new appointment will be made in 2005.

Although the issue of psychological support given to facilitators and volunteer caregivers is being addressed by the South African Red Cross, there is need to incorporate them as an integral part of the project, given further financial support for 2005 and beyond. The focus in 2004 has been very much on the client/ family with insufficient consideration given to psychological support for volunteers both in terms of reporting and financial support.

Disaster Management

Goal: The vulnerability of communities at risk to disasters is reduced.

Objective: The capacity of the South African Red Cross to be prepared for and to respond effectively to disasters is increased.

Progress/ Achievements



Red Cross volunteers are preparing a meal for fire victims

In addressing the reduction of the vulnerability of communities, the South African Red Cross provided relief mostly in the form of blankets, food and clothing to approximately 185,000 people affected by disasters caused by floods, fires and storms in all provinces. A number of branches provided ongoing relief in the form of food and kitchen sets to communities affected by poverty.

The ICRC provided some funding for training in basic disaster management and 28 people at provincial level and 143 at branch/local committee level received training. In the absence of a national disaster management coordinator, one of the internationally trained South African Red Cross staff members was nominated to facilitate the training in various provinces. The ICRC also funded vulnerability and capacity assessment (VCA) workshop in December where 22 volunteers from four provinces, who had already received the basic disaster

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management training attended. This has provided the participants with the basic skills to identify the problems faced by vulnerable communities which will enable branches to design projects that are better geared towards meeting the needs and capacities of the communities they serve. The VCA training can also be used to identify the branches' own needs and capacities. In addition to this training supported by the ICRC, two members of the South African Red Cross attended the Federation's regional disaster response training held in November 2004.

The South African Red Cross strengthened its representation at national level through participating as a member of the Interdepartmental Disaster Management Committee that meets frequently in Pretoria to discuss disaster issues. There has also been increased networking with government at provincial and district level. New agreements were concluded with the Eastern Cape local government in various districts to partner in providing disaster management services.

Impact

The South African Red Cross responded effectively to disasters and provided the required support to the affected communities timely. The needs of affected communities would have been better met and the effectiveness of the manner in which the national society responded would have improved had funding through the appeal been forthcoming.

The disaster management and VCA training enabled the national society to form provincial and branch disaster response teams, conduct VCA's in targeted communities and to formulate disaster response plans in collaboration with local government. This will lead to improved services to vulnerable communities and strengthen co-operation with government in disaster management initiatives.

Constraints

Lack of funding for disaster management interventions has prevented the national society to significantly build capacity at national, provincial and branch levels. Insufficient structures and funding to support the implementation of the plan of action for 2004 resulted in limited disaster preparedness and response activity. Training of staff and volunteers, the formation of disaster response teams at all levels, VCA, the development of disaster response plans (in co-operation with local, provincial and national government), training and education of community members have not fully taken place. The national society still needs to finalise also their DM policy. In 2005, the national society plans to recruit a disaster management coordinator to take a lead role in disaster management programming. Another challenge in 2005 will be to mobilize more in-country resources for disaster management sector through possible partnerships with corporations, government and general public.

Organizational Development

Goal: The lives of vulnerable people in South Africa are improved.

Objective: The South African Red Cross meets the basic requirements of the characteristics of the well-functioning national society and is a recognised role player in the humanitarian sector in South Africa.

Achievements

The capacity of South African Red Cross governance and management is developed for better practice of their role and responsibilities

Governing Board: The annual general meeting (AGM) was held September 2004 and two new members were elected. The focus of the AGM was on the statutes review process and the mandate of the governing board versus that of management. The sustainability of the national society as well as its capacity for resource mobilisation was discussed at the beginning of 2004, and a formal process to improve its external relations, resource mobilization, publicity and visibility was embarked on in July. A joint governance workshop with Zambia and Zimbabwe Red Cross Societies was held in December 2004 in Lusaka. This was a first step for a knowledge and experience sharing at top level management and governance in the region.

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Role and mandate – Key Performance Objectives (KPO): KPO for the governing board and secretary general were adopted at the November meeting. This process has guided the national societies in clearly separating the governance and management roles and responsibilities. The next step is to ensure that KPO are developed to all staff members to allow effective implementation of performance and appraisals management systems.

Statutes Review Process: A four-year constitution review came to an end when the revised statutes were adopted at the AGM. The statutes will now have to be registered with the registrar of companies, a requirement of the Companies Act of South Africa. The joint Federation/ICRC commission recommended that a simple handbook be drafted for the membership on the implementation of the statutes. The constitution advisory committee (CAC) is currently in the process of drafting the rules of procedure for implementation of the statutes.

Implementation of the Strategy for the Movement: The president of the national society was invited as a member of the standing commission's (SC) ad hoc working group (WG) on the Strategy for the Movement and participated in these meetings Geneva twice in 2004. The president presented a summary and analysis of progress made in implementing the strategy in South Africa which was highly appreciated by the chairperson of the WG, and was regarded as a good practice. This tool for follow-up has been shared with most national societies globally and the southern African region is paying particular attention to it with the support of the president of the South African Red Cross. Recommendations for a revision of the strategy are expected from the WG through the standing commission for the Council of Delegates meeting to be held towards the end of 2005.

Financial Management: The focus for 2004 has been the development of the financial management situation particularly with respect to the decrease of debt. Top management and the board paid close attention to the unpaid pension fund contributions and they were cleared by the end of the year. The Federation soft loan and arrears in the statutory contributions to the Federation since 2001 are yet to be paid. Increased attention was paid to the quality of financial management, in the light of the national society having attracted significantly increased amounts of funding, particularly government funding.

Analysis of the Self Assessment Process 2003: Results of the self-assessment were received at the beginning of the year and it took some time to identify a suitable analyst from South Africa. Analysis was received at the end of 2004 for all levels (i.e. provincial, branch and local committee) and the national society will use this valuable information for planning and development purposes especially now that the society has a designated person for planning and reporting. The Federation representative presented a summary observation of achievements and challenges of the national society against the criteria of the well-functioning society at the AGM.

Cooperation Agreement Strategy (CAS) process: The Federation and the ICRC were the only external Movement components present in the country in 2004. Four partner national societies (PNS) – British Red Cross, Icelandic Red Cross, Norwegian Red Cross and Swiss Red Cross Societies - provided financial support to various programs on a bilateral basis whereas the Finnish Red Cross channels its support to the national society through the Federation. The Spanish Red Cross pledged their support as a new bi-lateral partner for 2005 in the national society's partnership meeting. The partnership co-ordination is relatively well managed by the national society themselves and there have been no major challenges from the co-ordination perspective. Presentations on the CAS process have been made at various forums within the national society since 2002 but due to more important priorities and the national society's experience on the first CAS process in 1999, a systematic, new generation of CAS has not yet taken off. The secretary general of the Ugandan Red Cross participated in the partnership meeting in October 2004. He shared the Ugandan CAS process experience encouraging the South African Red Cross to start the process that ensures more effective coordination and support to the national society five-year development plan. The national society committed to start the process in 2005 and the next step is to develop a timetable for the negotiation, drafting process and to nominate a national level person to drive and coordinate.

The ability of South African Red Cross to manage their administration and finances is developed

A new finance and administration manager was appointed at the beginning of April 2004. As a result, a review of the existing financial management systems, structures and procedures took place. The capacity of the existing staff was analysed and two people were recruited to further strengthen the finance department. It is envisaged that this will enable more effective control systems and procedures to be put in place, and provide guidance and

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support of finance personnel at provincial and branch level. This is very necessary due to the fact that the national society was not able to finish the external consolidated audit on time and as a result, the AGM 2004 was not concluded. In February 2005, a separate meeting will be held inviting all delegates from branches with voting rights to approve the books so that the AGM can be concluded.

The ability of South African Red Cross to manage, develop and retain their human resources is improved



Income generation activities are an important part of resource mobilization

One of the priority areas for development since the appointment of the new secretary general at the beginning of 2003 has been human resources development. The national society secured funding from a new bilateral partner -Swiss Red Cross for 2004 for the human resource development project, which was implemented accordingly. The performance management system developed in 2003 was adopted and partially implemented. This included updating and disseminating the human resources manual, defining a new organogram and key positions, development of job-descriptions and key performance objectives for key positions. This process is ongoing and supported by a local human resource consultant who has been working with the national society for a long time. Employment contracts have also been revised and workshops were held in all regions to discuss human resource development. With the support of the regional planning and reporting officer, a project planning process (PPP) training was

held in December 2004 for senior staff, which included again a session on reporting to give the provincial and branch level staff the required competency standards in terms of minimum planning and reporting requirements. The national society staff member who received PPP training earlier in the year in UK fully participated in the process of preparing the appeal for 2005 and was the main facilitator of the PPP training for senior staff.

The ability of South African Red Cross to advocate and market their programming and to mobilize their own resources is developed

The external relations, resource mobilisation and fundraising project started in July after a long preparatory phase. A local consultant, who participated in the assessment process in 2003, was engaged to coordinate the implementation of the project. The challenge is to ensure that the national society has a counterpart working with the consultant in order to retain the skill after the expiry of her contract. The Federation Capacity Building Fund (CBF) is funding this project for two years to the end of 2005.

The governing board and management of the South African Red Cross have been actively involved in partnership development, publicity, image and confidence building during 2004. Mass media coverage of the work of the Red Cross through newspapers and TV has significantly improved. The restoring family links (RFL) project has attracted media attention due to successful family reunion cases and other related matters. The high profile visit of Her Royal Highness Princess Astrid, President of the Belgian Red Cross also increased visibility of the Red Cross.

Various high-profile events were undertaken during 2004. Some examples include: the President of the South African Red Cross addressed the diplomatic corps, international organizations and government representatives at a lunch hosted by the ICRC in Pretoria to mark the World Red Cross Day celebrations; the Rotary Club hosted a dinner to the business community where the national society leadership was able to address the business community encouraging partnership development; the popular African musician Yvonne Chaka-Chaka was the patron for South African Red Cross during the World Red Cross Day celebrations “Walk for Humanity” and gave a live performance; The South African Red Cross main event for 8 May was the start of the “Walk for Humanity” by four dedicated Red Cross supporters from Johannesburg to Stellenbosch (a distance of approximately 1500 km) raising awareness, publicity, and funds for the national society.

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South African Red Cross branch structure and its management capacity is developed ensuring improved service delivery, and the ability of South African Red Cross to recruit, develop, manage and retain volunteers is improved

With the facilitation support from the senior regional organizational development officer, the national society conducted a national branch and volunteer management workshop in December involving all structures of the society. As a result, a task team was formed to oversee the implementation of the recommendations of the workshop. This team is formed by representatives of all five Red Cross regions and the national office. The national society branch and volunteer management development project did not receive full funding in 2004 and lack of funding support prevented the national society to fully concentrate on capacity building at the branch level. It is recommended that the national society and their partners take this project very seriously if the service delivery at the grassroots level is considered as a priority. The focus has to be in capacitating the national society's branch and local committee structures in a systematic way if volume and impact through the programme implementation is the desire.

The ICRC expressed their interest in supporting the capacity building of the Soweto Branch and as a result, a joint South African Red Cross/Federation/ICRC branch development and volunteer management assessment took place in November with the support of the senior regional organizational development officer. This assessment process built on the branch's own self-assessment which they conducted in later 2003. A detailed project proposal was then formulated based on the recommendations. The process will further lead to a comprehensive plan of action for Soweto branch. The assessment process in Soweto will be used as a model for other branches so that clear project proposals for integrated branch development project can be developed. The Spanish Red Cross has expressed their willingness to channel their bi-lateral support to Soweto branch.

In addition to the project related community-based volunteers, the national society has a special structure of uniformed volunteers named Volunteer Aid Corps (VAC) active throughout the country. The VAC has a national commissioner supported by five regional commissioners and the South African Red Cross is currently negotiating the official status of the VAC with the South African government. VAC held their first national workshop in years with 30 participants during 2004. There is a clear need to finalise the volunteering policy and further look at an integrated approach to volunteering at the national society.

South African Red Cross youth programming is developed; focus on leadership, life skills, self-development and gender issues

The national youth coordinating committee is a volunteer body which tries to coordinate youth activities throughout the country in all nine provinces. The youth representative attends governing board meetings at the national level as an invited guest based on the decision taken by the general assembly in 2003. The youth have a structure in each of the five regions and their current challenge is that there is no appointed national youth administrator in place at the national office. The youth meet once a year through the national youth camp, which was held in December 2004 in Kimberley. The committee also conducts teleconferences in between to discuss issues at hand.

The Young Women in Development initiative has not yet been able to establish very strong structures throughout the country. A junior youth development initiative has taken off well in the Gauteng and Western Cape provinces and they have formed a task force to find ways to make the initiative more attractive. Red Cross youth internationally are part of the UN "Big 7" initiative. The youth intend to visit the "Big 7" partners in South Africa for networking, knowledge and information sharing and to get connected more widely.

The South African Red Cross submitted an application at the end of 2003 to the Empress Shoken Fund to support youth development, but the application was unfortunately not successful. The youth project also did not attract any funding through the 2004 Federation appeal. It is recommended that the national society seeks funding from government structures and corporate sector for their youth development and empowerment. Youth are an energetic asset for HIV/AIDS, health and disaster management education throughout the country and should be systematically integrated for programming support.

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Impact

The South African Red Cross society is slowly progressing towards the characteristics of a well-functioning national society. As a result of this systematic approach, all programmes are being revisited and there is evidence of positive development although the capacity at the grassroots level for service delivery in terms of volume and impact needs to be further strengthened. Critical attention needs to be given to a continuous, systematic development where the national society makes sure that agreed plans are being implemented and seen through.

Due to full time management in place at the national level, the headquarters now has the opportunity to set the direction for the national society. Through the increased capacity in the administration and finance unit, the national level financial management system and controls are improving step-by-step although the process is very slow. This will improve the national society accountability and transparency and other stakeholders will be able to receive adequate feedback timely in future through reports and statements. The national society will build on trust from all stakeholders once there is a demonstrated ability by the finance department to function effectively and transparently.

Through improved image and publicity the national society has been able to raise its profile and is becoming a more prominent partner of the government, NGOs, international organizations and private sector. Through harmonization and active implementation of the Strategy of the Movement in South Africa, the national society has a stronger voice for the Movement, especially in terms of advocacy for anti-stigma and discrimination. Both the governance and management keep the sustainability of the national society high on agenda and therefore the resource mobilization capacity has got a lot of attention among the leadership. The national society has demonstrated in 2004 their ability to develop substantial local partnerships, especially with the government. The strength of the national society lies on strong volunteer structures at grassroots level. Even during the time when the national society was struggling, the grassroots levels volunteers continued their services to the vulnerable communities. Further capacity building of volunteers and branches will ensure the sustainability of the national society in future, make it a well-functioning organization.

Youth have the energy and enthusiasm, which is mobilised and utilised in many branches but not yet optimised from the national perspective. By inviting them to participate in the governing board meetings, the national society builds on future leaders. This forum offers the youth a channel to address the issues important to them at the highest level of the organization and their voice is better heard. Through this opportunity they may also influence decisions taken by offering their viewpoint during discussion on issues earmarked on youth development and empowerment.

Constraints

It was clear at the AGM that the national society management still needs further strengthening at all levels and that the grassroots capacity building was still lacking. Management and implementation capacity of the national society still remains a real challenge for 2005. The general concern has been the human resources capacity at every level to cope with the new way of working of the national society. This concerns the national office capacity to coordinate and provide technical advice in each core area. There is also a concern for the planning and implementation capacity of provinces, branches and local committees now that the national structures have improved to certain extent. A precondition to effective management service delivery at the grassroots level is that adequate skills, capacities and resources exist among those responsible for execution. This fact requires continuous attention during 2005 by the top leadership to ensure that unrealistic expectations are not put on lower levels unless sufficient capacity is ensured through skilled human resources. It is also very clear that the national office structures have to be made clearer and their capacity to coordinate, advice, train and coach needs strengthening if the national society is to build capacities at lower levels. Related to this, systematic follow-up, monitoring and evaluation – seeing things through – still remains a challenge at all levels. Due to the lack of funding to support the volunteer and youth development adequately, their potential was not optimised during 2004.

Coordination, Cooperation and Strategic Partnership

South African Red Cross partners in 2004 were the Federation, ICRC, British Red Cross, Finnish Red Cross, Icelandic Red Cross, Norwegian Red Cross, Swiss Red Cross, the Belgian embassy in Pretoria, the National Lotto, the government of the Republic of South Africa, corporate sector and the general public. The Federation representative supported the co-ordination within the country, regionally and internationally as follows:

Government: The Federation representative visited the Ministry of Foreign Affairs regularly to discuss especially the upgrading of the status agreement between the government and the Federation. The Ministry of Foreign Affairs revised the status agreements with all international organizations based on new legislation and it is expected that a new agreement will be signed early in 2005 with the Federation.

Active communication took place between the national society and the departments of provincial and local government during the first quarter in relation to food insecurity and drought in South Africa when the President of the country declared six out of nine provinces as disaster areas due to drought. The national society and the Federation met with the representatives of the provincial and local government in this regard and the national society followed up the issue with the social welfare department. The regional food security operation coordinator from Harare also visited South Africa for drought assessment at the invitation of the South African Red Cross and met various government officers. These negotiations however did not result in any special partnership for assisting the disaster victims but set a platform for future negotiations. Several provincial level contracts were signed for other disasters in the country and the partnership. Negotiations with the health department were concluded resulting in funding for the HIV and AIDS programme of ZAR 5.8 million (CHF 1.2 million).

Partner National Societies (PNS): The PNS which supported the national society include British Red Cross, Finnish Red Cross, Icelandic Red Cross, Norwegian Red Cross, and Swiss Red Cross Societies. Representatives from the American Red Cross, British Red Cross, German Red Cross, Netherlands Red Cross and Spanish Red Cross visited the South African Red Cross during 2004 to get an update on programming.

South African Red Cross Air Mercy Service (AMS) and the War Memorial Red Cross Children's Hospital (WMRCCH): The secretary general and the Federation representative visited the AMS and the WMRCCH in March for information sharing purposes, and discussing possible co-operation in future, especially in relation to community work at grassroots level. The AMS gave a presentation of their services at the AGM and the national society leadership participated in the board of trustees meetings in both organizations. The cooperation between the national office and the AMS has generally improved during the year.

Regional and global coordination and networking: During 2004, various meetings were held, including the African Heads of Delegation meeting, three Southern Africa Management Team (SAMT) meetings and two Southern Africa Partnerships of Red Cross Societies (SAPRCS) meetings. All of them were held in Johannesburg which is a central location for logistical purposes in Africa. The president of the South African Red Cross gives always an encouraging welcome speech as a host country in the opening of all meetings held in South Africa.

The secretary general of the Kenyan Red Cross facilitated an exchange visit for five Kenyan government officers to South Africa to study the national disaster management sector, including South African Red Cross involvement in disaster management. The head of regional delegation visited the national society twice and the regional information delegate from Harare made a short two-day advisory visit to South African Red Cross in March to prepare for the Royal visit of Princess Astrid, the President of the Belgian Red Cross. The regional planning and reporting officer participated in the national society organised PPP training to empower future co-facilitation capacity for PPP training in the region. The senior regional organizational development officer visited the national society twice, facilitating a branch development and volunteer management workshop and acting as a team leader for a joint national society/Federation/ICRC assessment process in Soweto.

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The president of the South African Red Cross participated in the New Partnership of African Red Cross Societies (NEPARC) meeting “Taking Charge”, held in August 2004; 15 of the 53 African National Red Cross and Red Crescent Societies attended the meeting. The president also participated in the standing commission’s ad hoc working group meetings in Geneva. The secretary general and the president attended the 6th PAC.

International Representation

The World Disasters Report 2004 was successfully launched in Johannesburg on 28 October 2004 jointly by the national society and the Federation.

The Federation representative continued to participate in the International Masters for Practicing Management (IMPM) programme as one of the two Federation representatives for Cycle 8 from April 2003 to September 2004. The forum continued to offer an excellent opportunity for partnership development and Red Cross Red Crescent information and dissemination. As a follow-up on some initiatives during previous modules, the partnership development in relation to cooperate social responsibility (CSR) between the Federation and Coca-Cola has been strengthened and communication at the Federation secretary general level with the president of Coca Cola in Atlanta commenced. As a result, the Indian Red Cross has signed project contracts with Coca Cola India in several provinces for financial and other support for programming. In relation to CSR, the general manager of Alcan Inc. Switzerland made also an exchange visit to the Federation and South African Red Cross in Cape Town in 2004. In addition, meetings were also held at the Secretariat in Geneva. As a result of these contacts, Alcan invited the Federation Secretariat CSR officer to join in their workshop on CSR initiative together with TATA Group from India on 8 June and the TATA Group was further invited to the Secretariat for an introductory visit. TATA Steel was one of the companies the IMPM Cycle 8 visited during the Indian module and initial contact for possible exchange was made during the company visit.

Country Office Management

The Federation country office remained small with only two local part time assistants supporting the efforts of the Federation representative to support the South African Red Cross through the transformation process. The former personal assistant resigned from her post due to family reasons and arrangements were made to utilize her administration and financial management skills part time in the Federation country office. As a result, she worked with flexible working hours on a consultancy basis, mainly two to three mornings per week. The Federation driver/office assistant continued under the contract of the national society and seconded to the Federation for part time use. Technical assistance and management support was provided by the regional delegation as needed and the head of regional delegation visited the country twice for special occasions.

The Federation renovated and moved to an unused storeroom at the South African Red Cross premises at the beginning of 2004. This arrangement has proven to be practical and has allowed the required independence for both organizations working from the same premises.

[Final financial report below; click here to return to title page and contact information.](#)

Selected Parameters	
Year/Period	2004/1-2004/12
Appeal	M04AA017
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
Budget (A)	1'566'004	608'829		1'151'604		3'326'436
Opening Balance (B)	196'188	0		41'481		237'669
Income						
Cash contributions						
Capacity Building Fund				100'000		100'000
Finnish Red Cross				169'370		169'370
Norwegian Red Cross				35'500		35'500
Other	0	0				0
Cash contributions (C1)	0	0		304'870		304'870
Reallocations (within appeal or from/to another appeal)						
Irish Government	151'835					151'835
Netherlands Government	10'212					10'212
Unilever	40'000					40'000
Reallocations (C2)	202'047					202'047
Inkind Personnel						
Finnish Red Cross				102'000		102'000
Inkind Personnel (C4)				102'000		102'000
Total Income (C) = SUM(C1..C5)	202'047	0		406'870		608'917
Total Funding (B + C)	398'235	0		448'350		846'586

II. Balance of Funds

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
Opening Balance (B)	196'188	0		41'481		237'669
Income (C)	202'047	0		406'870		608'917
Expenditure (D)	-395'712			-436'386		-832'098
Closing Balance (B + C + D)	2'523	0		11'965		14'488

International Federation of Red Cross and Red Crescent Societies

01.17/2004 SOUTH AFRICA

Selected Parameters	
Year/Period	2004/1-2004/12
Appeal	M04AA017
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation		
A		B					A - B	
BUDGET (C)		1'566'004	608'829		1'151'604		3'326'436	
Supplies								
Clothing & textiles	23'530	34'690					34'690	-11'160
Food	70'589	33'371					33'371	37'218
Medical & First Aid	47'932	29'884					29'884	18'048
Teaching Materials	40'334	39'342					39'342	992
Other Supplies & Services	36'853	26'952					26'952	9'901
Total Supplies	219'238	164'239					164'239	54'999
Capital Expenditure								
Vehicles	137'255	28'680					28'680	108'575
Computers & Telecom	16'828	2'553		5'319			7'871	8'957
Total Capital Expenditure	154'083	31'233		5'319			36'551	117'532
Transport & Storage								
Storage	42'039							42'039
Transport & Vehicle Costs	87'444	3'309		15'688			18'997	68'447
Total Transport & Storage	129'483	3'309		15'688			18'997	110'486
Personnel Expenditures								
Delegates Payroll	155'538			87			87	155'451
Delegate Benefits				161'822			161'822	-161'822
Regionally Deployed Staff	704'393							704'393
National & National Society Staff		105'109		38'242			143'351	-143'351
Consultants	173'643			18'827			18'827	154'816
Total Personnel Expenditures	1'033'573	105'109		218'978			324'087	709'486
Workshops & Training								
Workshops & Training	1'080'360	15'029		59'839			74'869	1'005'492
Total Workshops & Training	1'080'360	15'029		59'839			74'869	1'005'492
General Expenditure								
Travel	195'222	3'196		26'600			29'795	165'427
Information & Public Relation	168'380	1'307		33'002			34'309	134'071
Office Costs	108'196	10'700		9'524			20'224	87'973
Communications	18'824	1'776		7'449			9'225	9'599
Professional Fees	2'858			27'636			27'636	-24'778
Financial Charges		12'656		1'137			13'793	-13'793
Other General Expenses				3'280			3'280	-3'280
Total General Expenditure	493'480	29'635		108'628			138'262	355'218
Program Support								
Program Support	216'218	25'721		27'934			53'655	162'563
Total Program Support	216'218	25'721		27'934			53'655	162'563
Operational Provisions								
Operational Provisions		21'436					21'436	-21'436
Total Operational Provisions		21'436					21'436	-21'436
TOTAL EXPENDITURE (D)	3'326'436	395'712		436'386			832'098	2'494'338
VARIANCE (C - D)		1'170'291	608'829		715'218		2'494'338	