

Mid-Year report



International Federation
of Red Cross and Red Crescent Societies

Botswana

Appeal No. MAABW002

31 August 2010

This report covers the
period 01/01/2010 to
30/06/2010.



Botswana Red Cross volunteers trained on peer education using the new peer education manual. Photo: BRCS

In Brief

Programme outcome: Based on the strategic aims under [Strategy 2020](#)¹, the Botswana Red Cross Society (BRCS) aims to achieve the following outcomes: saving lives of vulnerable people, enabling safer and healthy living, strengthening capacities of communities to respond to disasters, reducing impact of natural and manmade disasters, enhancing the capacity of staff to deliver quality service to vulnerable communities, developing community resilience, enhancing community livelihoods and promoting social inclusion, peace and harmony.

Programme(s) summary

Due to the limited funding support to the 2010 plan [MAABW002](#), the National Society concentrated its efforts on the implementation of the integrated HIV and AIDS programme, which is funded through appeal [\(MAA63003BW\)](#) and the disaster preparedness and response through the [Zambezi River Basin Initiative \(ZRBI\)](#). Both HIV and ZRBI programmes are regional initiatives supported through by the International Federation of Red Cross and Red Crescent (IFRC) Southern Africa Regional Representation Office (SARRO).

During the reporting period BRCS continued providing assistance to vulnerable communities along the Zambezi River basin. The activities focused on enhancing disaster preparedness in the flood prone areas and strengthening community capacity on early warning systems.

¹ Strategic aim 1: Save lives, protect livelihoods, and strengthen recovery from disasters and crises;
Strategic aim 2: Enable healthy and safe living;
Strategic aim 3: Promote social inclusion and a culture of non-violence and peace.

Internally, focus was on strengthening project management, performance and accountability, thus all programme staff members were trained on programme performance tracking, measurement and reporting. Through its organisational development (OD) interventions, BRCS created nine new branches and 585 new volunteers recruited along the Zambezi River Basin. Other activities in long-term health and care and disaster management were bilaterally supported and have not been covered in this report.

Financial situation: The total 2010 budget is CHF 474,118 (USD 410,112 or EUR 323,633), of which CHF 30,976 (7 per cent) covered during the reporting period (including opening balance). Overall expenditure during the reporting period was very low based on the available funds.

[Click here to go directly to the attached financial report](#)

No. of people we help:

BRCS reached an estimated 1,546 people through the disaster management activities; 43,000 people with various HIV and AIDS programme interventions and 1,235 volunteers and community members with various capacity development initiatives.

Our partners: Red Cross Red Crescent Movement partners include the IFRC, ICRC, Belgian, Danish, Norwegian and Swedish Red Cross Societies. Movement partners support BRCS as follows: Belgian Red Cross in health and care, Danish and Norwegian Red Cross in capacity development and ICRC in promotion of Fundamental Principles and Humanitarian Values. The Swedish Red Cross channelled funding to the National Society through the IFRC for the orphans and vulnerable children (OVC) programme. The IFRC technically supports in governance and management development, institutional development and programme management. While the partnership agreements are due to end by 2010, it is envisaged that the exit strategies will take into cognisance the core programmes of the National Society particularly putting in place sustainability measures.

Context

Botswana has a population of 1.8 million people. Small scale livestock and agriculture are the most important sources of food for the majority of the population. The shortage of water and the lack of irrigation infrastructure weaken agricultural output. Most of the country is desert, which leaves little land for cultivation. Game parks are an important source of income for the country as they attract a lot of tourists.

Botswana remains heavily dependent on South Africa for its imports. Unemployment is estimated at 24.6 per cent. In most cases only a few members from extended families have a paid job. Only a few people earn very high income, whilst 30 per cent of the population is classified as being income poor (*Botswana Human Development Report 2006*). Poverty is perpetuated by the fact that more than 60 per cent of families are single parent.

Gender disparities are only now being actively addressed through creation of more employment opportunities and the strengthening of government structures to address gender issues. Although Botswana is termed a third world country, it is viewed as a relatively wealthy country. Despite this economic achievement, Botswana is plagued by persistent drought and the increased family dependency on the government. This is perpetuated by the increased number of households with chronic illnesses, disabilities as well as increased deaths resulting from HIV and AIDS related conditions.

Four decades of strong economic growth lifted Botswana into the ranks of upper middle-income countries, but Botswana is still fighting to address poverty, inequality and the world's second-most severe HIV and AIDS epidemic. Botswana's strong economic track record is shadowed by high inequality and poor human development indicators, compounded by the world's second-most severe HIV and AIDS pandemic.

In 2007 there were an estimated 300,000 people living with HIV almost one-in-four adults. Considering Botswana's population is below two million, the epidemic has reached disturbing proportions. The country has an estimated adult HIV prevalence of 24.6 percent, the second highest in the world after Swaziland.

HIV and AIDS have had a devastating impact on Botswana. Life expectancy at birth fell from 65 years in 1990-1995 to less than 40 years in 2000-2005, a figure about 28 years lower than it would have been without AIDS. In response to the socio-economic and humanitarian needs, BRCS programmes have been strong in HIV and AIDS, organisational development and implementation of disaster risk reduction interventions through the Zambezi River Basin Initiative.

Progress towards outcomes

Disaster Management

Programme component: Disaster Preparedness	
Outcome 1	Enhanced human, financial, and material resources, effective and efficient disaster management system through the implementation of the disaster management master plan.
Outcome 2	Self-reliance of individuals and communities is improved to reduce their own vulnerability to public health emergencies and disasters.

Achievements

BRCS conducted training for National Disaster Response Teams (NDRT) and Branch Disaster Response Teams (BDRT) in order to ensure improved preparedness and response capacity at national and branch levels. The National Society was also represented by the disaster management coordinator at the regional disaster management planning meeting facilitated by SARRO in March 2010 to review progress in the implementation of the DMMP. A draft DMMP has been developed and submitted to the national governing board for approval. There are plans to translate it into local languages once approved by the board.

A total of 48 volunteers from 12 villages were trained on basic disaster management and the use vulnerability capacity assessment (VCA) tools, under the ZRBI. A total of 1,546 community members participated in the VCA exercises and generated hazard maps for their respective communities.

Programme component: Zambezi River Basin Initiative	
Outcome 1	The risk and impact of disasters among communities living along the Zambezi River basin is reduced through community preparedness.
Outcome 2	Access to adequate and nutritious food commodities is increased among communities along the Zambezi River basin.
Outcome 3	The number of deaths, illnesses and impact from diseases is reduced among communities along the Zambezi River basin.
Outcome 4	National Society capacity to implement disaster preparedness, response and recovery operations is increased.

Achievements

The ZRBI seeks to reduce the impact of disasters and other challenges on communities living along the Zambezi River basin, aiming to improve the quality of their lives and livelihoods through comprehensive, sustainable and integrated capacity enhancement in disaster management, branch development and primary health and care programmes.

The initial phase of the programme focused on strengthening the capacity of BRCS in implementing disaster preparedness, response and recovery operations along the Zambezi River. This was a preparatory phase where the capacities of the local Red Cross branches were strengthened to ensure effective implementation, programme ownership, sustainability and integration with other local community activities.

One of the key achievements of this programme during this reporting period was the training of 585 volunteers from the 14 villages of Paragarungu, Satau, Kachikau, Kavimba, Mabele, Kasane, Kazungula, Lesoma, Pandamatenga, Nata, Zoroga, Tonota, Kanye and Tsookatshaa in Community Based Disaster Management training (CBDM).

BRCS established disaster action teams in all the villages targeted by the ZRBI and between April and July 2010 the teams participated in flood surveillance along the Zambezi River and the dissemination of information on early warning systems.

Since the second half of 2009, there has been an increase in the number of training on peer education along the Zambezi River Basin. A total of 57 peer educators were supported in Kasane, Moshupa, Tonota and Kanye to conduct peer education activities mainly on HIV and AIDS education through outreach to youths in and out of school, and also targeting workplaces and clinics.

A total 510 volunteers and community members were also trained on health promotion and provided demonstrations in the use of mosquito nets in areas targeted by the Zambezi River Basin Initiative.

Health and Care

Programme component: Community-Based Health and First Aid	
Outcome 1	The number of communities which are able to cope with health risks and hazards in their environment is increased through integrated National Society community-based health and First Aid activities.
Outcome 2	Mother and Child health is improved through immunization services to children and mothers in areas of BRCS operations.
Outcome 3	The level of community health knowledge is increased through the development and distribution of health related information, education and communication (IEC) materials.
Programme component: Emergency Health	
Outcome 1	Communities have access to curative, preventive and promotional health services during emergency and/or disaster situations.

Achievements

The focus on the health and care programme has over the years been on HIV and AIDS, which has pushed the country beyond limitations. Apart from HIV and AIDS programming, BRCS conducted training for volunteers on voluntary non-remunerated blood donor recruitment (VNBDR) under the Club 25 project, a concept developed to encourage youth in and out of school to donate blood and learn about healthy lifestyles. Through the club, youth in school commit to make 25 blood donations after leaving schools.

The programme was expanded to Kang and Dukwi where 35 peer educators were trained on VNBDR in June 2010. Most of the trained volunteers were however not provided with support to implement the programme.

BRCS is also coming to the end of the three year phase of the Belgian Red Cross supported First Aid programme, whose activities have focussed on training for both staff and volunteers on traditional and commercial First Aid. The National Society has gone into partnership with mining companies to run Commercial First Aid. Plans are underway to train about 40 First Aid instructors towards the end of the year.

The HIV and AIDS programme is reported under a separate appeal covering the following programme component areas: [MAA6300310myr](#)

Programme component: HIV and AIDS (Refer to Link http://www.ifrc.org/appeals/annual06/logframes/Africa/MAA63003BW.pdf)	
Outcome 1	Prevent further infections through targeted community-based peer education and information, education, and communication (IEC) activities, and promote uptake of services including voluntary counselling and testing (VCT) and parent to child transmission prevention services (PPTCT).
Outcome 2	Scale-up community home-based care and support for vulnerable children with holistic support to address education, food and nutrition, psychosocial support, social inclusion, and economic support.
Outcome 3	Address stigma and discrimination with targeted communication and advocacy activities.
Outcome 4	Build the NS capacity to plan, implement, and manage the programme.

Organizational Development

Programme component: Leadership and Management Development	
Outcome 1	BRCS leadership (governance and management) capacity has increased in developing and implementing policies and strategies for optimal organisational performance and accountability.

Achievements

During the reporting period, BRCS conducted elections of committees for the newly formed nine branches along the Zambezi River basin. Relationships were also established with local authorities namely kgosi, district councils and village development committees.

Programme component: Well-functioning Organisation	
Outcome 1	BRCS has well defined policies, systems and procedures in place for the effective management of the NS.
Outcome 2	Effective financial management systems, procedures and tools are in place and systematically used.
	BRCS has capacity in planning, tracking performance, and reporting as stipulated in the IFRC's "Performance and Accountability Framework".

Achievements

In an effort to strengthen National Society capacity in programme planning, performance tracking and measurement, BRCS conducted training in January 2010 for all programme staff on planning, monitoring, evaluation and reporting (PMER) after a decision was made not to replace the PMER Officer who had resigned from the National Society. The training was conducted with all technical staff from Health and Care, HIV and AIDS, Disaster Management, First Aid, Refugee Health and Psycho-Social Support programme staff. The purpose of the training was to introduce PMER concepts to programme staff and to enhance their skills in PMER. PMER capacity building is slowly being mainstreamed into all programmes implemented by BRCS.

Through funding support from IFRC, BRCS has conducted training at provincial and branch level on financial management, and has already indicated progress in the implementation of the training. The National Society is also focusing on internal controls, which include education on the financial manual and audit preparation.

Programme component: Branch Development and Volunteer Management	
Outcome 1	BRCS has vibrant branches delivering quality services through their local volunteer and youth networks.
Outcome 2	BRCS has well established systems and procedures for the systematic provision of technical support to its branches.

Achievements

BRCS conducted leadership training for nine newly formed branches and 585 newly recruited volunteers. Three branches along the Zambezi namely, Kasane, Nata and Gweta were strengthened and capacitated to carry out preparedness and response activities with targeted communities along the Zambezi River basin.

In line with the SAYNET recommendations of 2009 that all NS must have democratically constituted youth structures, BRCS appointed new youth coordinators. Through technical assistance from the IFRC, BRCS also conducted training for its branches using the branch development tools. Skills development training on branch development and volunteer management was also provided to the new committees in the nine newly formed branches along the Zambezi River.

Programme component: Resource Development

Outcome 1

Capacity to mobilise resources and its own sustainability is enhanced through the implementation of well designed income generating programmes.

Achievements

Through an MoU signed between the government of Botswana and BRCS for supporting the NS programmes, the National Society managed receive 8 million Pula (CHF 1.2 million) for programme implementation in various communities.

Constraint or Challenges

The main challenges to BRCS programme development is the limited funding support to its plan. Save for the support through the ZRBI and HIV and AIDS programme, many activities remain pending due to lack of funding support.

Working in partnership

BRCS is partnering with government departments namely Ministries of Health, Education, Department of Social and Community Development; sector agencies namely National Youth Council, Community-based organisations , Faith-based organisations; United Nations agencies namely UNHCR, UNICEF and WHO. In 2010, BRCS received a grant from the government of over 8 million Pula (CHF 1.2 million) for its core costs.

BRCS is widely recognised by the government, civil society and developmental partners as a key partner in development and implementation of national policies. At the same time, BRCS is increasing local partnerships and tapping into opportunities to generate revenue such as developing commercial First Aid training services and increasing membership.

Strategic partnerships have been established with government, networks of PLHIV, local non-governmental organisations (NGOs), corporate, faith-based and community-based organisations. The greatest motive for BRCS is on developing effective and efficient means of delivering the greatest impact for vulnerable people through the formation of country-based operational alliances. The purpose of the operational alliances is to most effectively utilise the collective resources of the IFRC members and where appropriate, other partners, to enhance the capacity of the National Society in order to achieve greater impact for vulnerable communities through the delivery of a quality programmes. This approach is aimed at strengthening the resource base of the National Society and widening the pool of human resources.

Contributing to longer-term impact

In performance and accountability, focus is on strengthening the planning, monitoring and evaluation skills of programme managers to ensure proper routine tracking of the key elements of programme performance. National programme managers will assist with systematic monitoring visits to all projects, and ensuring that the reporting system is efficient and effective. Like all National Societies in southern Africa, BRCS requires baseline surveys to provide basic data upon which programmes will be developed. The IFRC Southern Africa Regional office, through its Performance and Accountability department will continue to provide support in enhancing tracking and measurement of programmes to determine their impact.

Looking ahead

The technical support to BRCS has greatly helped put in place sound financial and programme planning, monitoring, evaluation and reporting systems, which has further strengthened the capacity of the National Society. There is still a gap in terms of harnessing the full potential of the systems, and it is believed with the continued support from the IFRC, partners and the government, BRCS will reach its full potential and excel in its implementation.

How we work	
All Federation assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and is committed to the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.	
The IFRC's vision is to: Inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.	The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims: 1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises. 2. Enable healthy and safe living. 3. Promote social inclusion and a culture of non-violence and peace.
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MAABW002 - Botswana

Mid-year Report 2010

Selected Parameters	
Reporting Timeframe	2010/1-2010/6
Budget Timeframe	2010/1-2010/12
Appeal	MAABW002
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
A. Budget	474,118	0	0	0		474,118
B. Opening Balance	0	0	0	0		0
Income						
<u>Cash contributions</u>						
<i>Norwegian Red Cross (from Norwegian Government)</i>	30,976					30,976
C1. Cash contributions	30,976					30,976
C. Total Income = SUM(C1..C6)	30,976	0	0	0		30,976
D. Total Funding = B + C	30,976	0	0	0		30,976
Appeal Coverage	7%	#DIV/0	#DIV/0	#DIV/0		7%

II. Balance of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
B. Opening Balance	0	0	0	0		0
C. Income	30,976	0	0	0		30,976
E. Expenditure						
F. Closing Balance = (B + C + E)	30,976	0	0	0		30,976

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Selected Parameters	
Reporting Timeframe	2010/1-2010/6
Budget Timeframe	2010/1-2010/12
Appeal	MAABW002
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A		B					A - B	
BUDGET (C)		474,118	0	0	0	0	474,118	
Supplies								
Seeds,Plants	47,000							47,000
Water & Sanitation	41,000							41,000
Medical & First Aid	19,500							19,500
Teaching Materials	39,500							39,500
Total Supplies	147,000							147,000
Transport & Storage								
Distribution & Monitoring	8,000							8,000
Transport & Vehicle Costs	41,500							41,500
Total Transport & Storage	49,500							49,500
Personnel								
National Society Staff	85,000							85,000
Consultants	20,000							20,000
Total Personnel	105,000							105,000
Workshops & Training								
Workshops & Training	70,500							70,500
Total Workshops & Training	70,500							70,500
General Expenditure								
Travel	12,500							12,500
Information & Public Relation	9,000							9,000
Office Costs	2,000							2,000
Communications	4,000							4,000
Professional Fees	2,500							2,500
Financial Charges	1,000							1,000
Other General Expenses	40,300							40,300
Total General Expenditure	71,300							71,300
Programme Support								
Program Support	30,818							30,818
Total Programme Support	30,818							30,818
TOTAL EXPENDITURE (D)	474,118							474,118
VARIANCE (C - D)		474,118						474,118