

Annual report



International Federation
of Red Cross and Red Crescent Societies

Zambia

MAAZM001

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This report covers the period
01/01/2010 to 31/12/2010



ZRCS new governing board members' indication
Photo by ZRCS

In brief

Programme outcome: In line with the strategic aims of the Strategy 2020, the Zambia Red Cross Society (ZRCS) expected programme outcome is communities that are resilient to disasters and public health emergencies, with protected livelihood and strengthened capacity to recover from disasters and crises, with health and safe living, social inclusion and a culture of non-violence and peace.

Programme(s) summary: ZRCS continued the implementation of disaster management, health and care and strengthening its capacity with the technical and financial support of the International Federation of the Red Cross and Red Crescent (IFRC) through the Southern Africa Regional Representation Office (SARRO) and other partners. Programme support was directed mainly through two regional programmes, the Zambezi River Basin Initiative (ZRBI) and the HIV and AIDS programme, which forms part of the Global Alliance on HIV. Due to funding challenges, some of the HIV and AIDS activities have been integrated with the ZRBI in targeted project areas.

The National Society (NS) also made strides in scaling up the blood donation project implemented under the health and care programme. In partnership with the Zambia National Blood Transfusion Service (ZNBS), the blood donation project was launched on Red Cross Day the 8th of May 2010. ZRCS also launched Club 25 with an objective to save lives through giving blood, targeting youth in-school and out-of-school. Emergency activities continued in response to the floods and cholera outbreak and constituted a component of the ZRBI. Jointly with the Ministry of Health, ZRCS carried out the mass measles immunisation campaign with the help of Red Cross volunteers. Focus was also placed on youth and branch development and the dissemination of principles and values. The Water and Sanitation programme was closed in

February.

Financial situation: The total 2010 budget is CHF 752,888, of which CHF 129,785 (17 per cent) was covered during the reporting period (including the opening balance).

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

See also:

[MDRZM007](#): The DREF operation was launched on 26 February 2010 for CHF 91,610, to support ZRCS in delivering immediate assistance to 1,200 people affected by flooding in Lusaka.

An additional CHF 63,701 was allocated on 19 April 2010 to enhance the capacity of ZRCS to provide immediate assistance to 3,000 households affected by an outbreak of cholera in Lusaka.

The NS also received an amount of CHF 23,305 for measles campaign activities, CHF 10,640 for the launch of the ZRBI programmes and CHF 23,510 for National Society development activities under the ZRBI. ZRCS also received CHF 10,057 for the peer education workshop under the HIV and AIDS activities.

Number of people we have reached:

- 4,635 people were reached with voluntary non-remunerated blood donation (VNRBD) messages, of which 385 were enrolled at the blood bank as blood donors.
- Club 25 was introduced in 20 schools in Lusaka, Copperbelt and Northern Provinces.
- 40 volunteers were trained on cholera prevention. They targeted three cholera-prone communities in Lusaka in April 2010.
- About 12,230 were reached through health education messages during the cholera outbreak experienced in early 2010.
- 31,100 people in and around Lusaka were provided with information, education and communication (IEC) materials, hygiene supplies, and detergents during the cholera outbreak experienced in April 2010.
- 2,600 people from various organizations in Zambia were trained in basic First Aid through the commercial First Aid programme.
- 180 flood-affected families were provided with relief assistance at a camp established for internally displaced persons (IDPs) at Lusaka's Independence Stadium.
- 100 volunteers were trained in basic disaster management to assist with the floods operations at the IDP camp in Lusaka.
- 300 volunteers in Mambwe, Siavonga and Mpongwe districts were trained in social mobilization strategies and basic knowledge on measles prior to the 2010 measles campaign.
- 100 volunteers were trained in Malaria prevention and control techniques.
- 128,665 under five children were mobilized for measles and other supplementary immunization activities during the 2010 measles campaign in the three districts targeted by the NS.
- 20 Lusaka Branch volunteers were trained as peer educators.
- 20 new branch executive committee (BEC) members from Kazungula and Sesheke districts (ZRBI project sites) were trained through a branch development workshop.
- 20 volunteers in Lusaka district were trained in CBHFA.

Our partners: The Movement partners in 2010 included British, Norwegian and Swedish Red Cross and IFRC. External partners included European Union, Royal Netherlands Embassy, UNICEF, SIDA, MSF, USAID, World Fish Centre, Land O' lakes, Green Enviro Watch, Civil Society for Climate Change, CRS, and World Vision. At community level, ZRCS partnered with local government departments, Disaster Management and Mitigation Unit (DMMU), National AIDS Council (NAC), the District Aid Task Force (DATF) teams, Provincial Development Coordination Committees, District Development Coordination Committees (DDCC), District Disaster Management Committees (DDMC) and District Water and Sanitation Committees. The ZRCS and IFRC want to thank partners and contributors for their collaboration during 2010.

Context

Zambia has one of the world's most devastating HIV and AIDS epidemics. Currently, there are about 1.1 million people living with HIV (PLHIV) and a total estimate of 710,000 OVC. The National AIDS Council (NAC) continued to coordinate all HIV and AIDS response actions through the decentralized District AIDS Task Forces (DATF), which work closely with communities to identify resources and develop partnerships that respond to local needs. With the availability of anti retroviral therapy (ART), the Government has tried to ensure adequate access, and according to NAC, ART coverage increased dramatically in 2006 to 2007 from 39 to 59 per cent. However, the country recorded a reduction in the HIV prevalence rate, from 16 percent in 2007 to 14.3 per cent in 2009. This has largely been due to sensitization and reduced rate of new infections, especially among the youths. All the challenges posed by such high prevalence rates are even further compounded by high poverty levels estimated at 68 per cent.

Almost two-thirds of Zambia's population lives below the international poverty line – that is, around 7.5 million people. The epidemic has brought about unending poverty and deprivation due to inability by the affected population to meet basic needs and other livelihood requirements. Agriculture, the mainstay of the majority of Zambians, has also been affected by AIDS related illnesses. However, overall poverty levels have improved, with significant gains in urban areas, enrolment rates for primary education are rising, literacy is increasing, immunization coverage is more widespread and child death rates are falling.

The 2009/2010 rain season was characterized by heavy rainfall in most parts of the country, which led to excessive rains that culminated into flash floods in low lying areas and water logging in plateau areas. The excessive rainfall experienced resulted into varying impacts on keys sectors of the economy. The incessant rainfall led to flooding in Lusaka and other districts, causing extensive water logging which increased the risk of water-borne diseases. About 200 households were relocation to a camp established by the government and jointly managed with ZRCS.

Following reports from District Disaster Management Committees (DDMCs) on the negative effects the floods, the Zambia Vulnerability Assessment Committee (ZVAC) undertook an assessment. This assessment was conducted in 15 districts with an estimated population of 1.7 million people and 87 percent of this area being rural.

The assessment established that a total of 238,254 people (39,710 households) were affected by the 2009/2010 flood situation. Owing to the fact that the majority of households are involved in activities that rely on weather, the floods negatively impacted on agricultural production, and a 30 per cent crop loss was recorded. In the same districts affected by floods, a total of 3,065 water sources were surveyed of which a huge proportion, 43 per cent were found to be unsafe for human consumption and about 40.6 per cent of the latrines collapsed causing the sewer to permeate into the flood waters. Protected water sources were damaged whilst others were submerged in water.

Due to the resultant insanitary conditions, water borne diseases increased causing hardship for the most affected communities. Over 60 per cent of the households in the affected areas reported a member having clinical malaria. A number of school and health infrastructure were also damaged.

ZRCS being a member of the ZVAC was part of the floods relief operation team in the country. The operations were coordinated by the Disaster Management Mitigation Unit (DMMU). In Lusaka, ZRCS was appointed by government to manage all camp activities for the people displaced as a result of the floods. ZRCS staff and volunteers were trained on skills to improve disaster response and management during this operation.

Progress towards outcomes

Disaster Management

Programme Component: Zambezi River Basin Initiative (ZRBI)

Outcome 1: The risk and impact of disasters among communities living along the Zambezi River basin is reduced through community preparedness.

Achievements

ZRCS efforts in disaster management were directed at responding to the needs of 200 families displaced by the floods and housed in temporary shelters at a camp established at Lusaka Independence Stadium. ZRCS also delivered relief materials to 50 families in Chavuma whose houses had collapsed as result of the floods. Whilst the vulnerable families were still battling to cope with the consequences of flooded households, water sources and road networks, they were also faced with increasing cases of cholera. The number of reported cholera cases increased to over 3,300 cases by April 2010, with 87 deaths reported. In addition to responding to the needs of the floods affected families, ZRCS continued supporting the government efforts in preventing further spread of cholera through community sensitization activities.

Outcome 3: The number of deaths, illnesses and impact from diseases reduced among communities along the Zambezi River Basin.

Achievements

In preparedness for volunteer disaster response actions, ZRCS procured 50 gumboots, 50 raincoats and 250 t-shirts for distribution among its volunteers for self protection against contracting communicable diseases. With these, the volunteers increased visibility of the NS in the project areas and in turn created a favourable humanitarian space for ZRCS disaster response activities. The ZRCS procured and distributed 400 mosquito nets to all the households at the IDP camp. ZRCS volunteers assisted the affected families with hanging and proper use of the mosquito nets.

ZRCS reached out to the communities affected by cholera during the time of the outbreak in Lusaka's Mandevu, Chaisa and Chipata compounds as well as in the IDP camp. A ZRCS cholera task team was established to manage the response of the outbreak in coordination with the Ministry of Health and other partners. The NS distributed 6,000 bottles of liquid domestic chlorine to the targeted communities affected by cholera. In addition, a total of 3,056 households (12,224 people) were reached through cholera prevention messages.

Outcome 2: Access to adequate and nutritious food commodities increased among communities along the Zambezi River Basin.

Achievements

ZRCS participated in initial needs assessments of the affected communities in Lusaka and collaborated with the DMMU in distributing food and non-food items to the IDPs sheltered at the camp. The ZRCS volunteers closely monitored the distribution of food and non-food items to ensure equity and compliance to the Sphere minimum standards. The relief distribution tremendously contributed to the restoration of livelihoods, averting hunger and outbreak of diseases, thus ensuring dignity amongst the affected population.

Outcome 4: ZRCS capacity to implement disaster preparedness, response and recovery operations is increased.

Achievements

The ZRBI project was launched on 23rd July 2010 at a national level followed by the launch at the district level. Communities where the project will be implemented have been identified and

sensitizations are ongoing. Volunteers have been mobilized and the BEC for the two districts (Sesheke and Kazungula) have been trained in branch development.

In order to build ZRCS capacity to respond to the disaster, the NS provided training in basic disaster management to 100 volunteers.

Constraints or Challenges

- The limited financial and human resources could not afford the accomplishment of the planned activities for 2010. The NS envisages support from IFRC to ensure the implementation of the carried forward and the current planned activities.
- ZRCS also did not have a disaster management coordinator since January 2010 and coordination of activities has been put under the responsibility of the acting programmes manager.

Health and Care

Programme Component: Community-based Health and First Aid

Outcome 3: Blood donation awareness and pool of voluntary non-remunerated blood donors (VNRBD) is increased through the Club 25 Methodology.

Achievements:

In partnership with Zambia National Blood Transfusion Services (ZNBTS) and support from local partners, ZRCS launched a nation-wide blood donation programme on 8 May 2010 with the Zambian Minister of Health in attendance. A total of 135 units of blood were collected from the newly enrolled blood donors on the day of the launch.

In preparation for the launch, ZRCS received widespread coverage and visibility on national television and radio stations. To enhance its blood donation awareness campaign and sensitize communities on the programme the NS engaged famous Zambian artists who produced a song with the theme entitled 'tandizo' meaning help. This song has been aired on different radio stations around the country calling upon people to become blood donors. Public awareness of the programme was further increased through the distribution of fliers and posters on the programme to communities in and around Lusaka.

ZRCS also launched Club 25, 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. During the reporting period, 350 pupils from 10 different schools around Lusaka joined Club 25.

ZRCS was able to mobilize the Indian community belonging to an association called Tamil towards blood donation and a total of 45 units of blood were collected. This was done in conjunction with (ZNBTS). In August, during the Zambia Agriculture show, ZRCS with ZNBTS jointly put up a stand where blood donor recruitment. Over 50 units of blood were collected at the end of the three days show.

Outcome 2: Mother and child health is improved through immunization services to children and mothers in areas of ZRCS operations.

Achievements

A national mass measles campaign was carried out from 19 to 24 July 2010. With technical support from IFRC, ZRCS participated in the measles campaign activities in partnership with the MoH through Lusaka District Health Management Team (LDHMT) and Child Health Unit and other stakeholders. The main activity was community mobilisation carried prominently through Mpongwe, Siavonga and Mambwe Branches. The three branches were only given the branch status in May 2010 and before then, they were member groups.

ZRCS volunteers and staff conducted door-to-door sensitization on the importance of having the under five children immunized against measles and other communicable diseases. The communities were also mobilized using the public address system. Some volunteers were stationed at the health posts to assist in some non-technical immunization activities e.g. finger marking of the children.



ZRCS volunteers in Siavonga District mobilizing the communities using a megaphone during the 2010 measles campaign: Photo by ZRC

Programme Component: Water and Sanitation

Outcome 1: Access to clean and safe water and sanitation services has improved in the Southern Province of Zambia.

Achievements:

ZRCS completed the implementation of the Water and Sanitation project at the end of February 2010, which was supported by the EU, British and Swedish Red Cross and some contributions from the Norwegian Red Cross and Shell. As at February 2010, a total of 2,748 sanitary platforms (Sanplats) and 204 latrines were constructed. This was a 30 per cent achievement from planned target of 9,000 Sanplats and 572 latrines respectively. Through the project, ZRCS drilled 112 new water points and rehabilitated 96 boreholes in Choma and Sinazongwe districts.

Using its technical staff and network of volunteers, ZRCS provided capacity building to communities in Choma and Sinazongwe in various aspects of Water and Sanitation as summarized in the table below:

Table 1: Summary of capacity building initiatives up to February 2010

Description of activity	Target	Achievement	% Achievement
Training of area pump minder	40	40	100%
Training of village committees	452	102	23%
Training of caretakers	109	32	8%
Training of masons	40	40	100%
Training of hygiene promoters	160	120	75%
Formation of village PHAST groups	319	209	66%
Training of the village PHAST groups	319	22	7%

The members of the village Water and Sanitation committees maintained the water points (boreholes) after the project closure. The committee also engaged in fund raising activities to generate income for use in managing and maintaining the water facilities.

At the close of the project, ZRCS had reached a total of 23,479 and 29,137 beneficiaries in Sinazongwe and Choma respectively through various Water and Sanitation interventions as shown in Table 2 below. This represented an overall achievement of 58 percent from target.

Table 2: Number of beneficiaries reached as at February 2010

Project Area	Water	Sanitation	Hygiene Promotion	Capacity Building	Total
Choma	24, 682	4,183	18, 050	272	29, 137
Sinazongwe	14, 675	4, 998	16, 700	472	23, 497
Total	39, 357	9, 181	34, 750	744	52, 634

Programme Component: Emergency Health

Outcome 1: ZRCS targeted communities with increased capacity to cope with health emergencies

Achievements:

ZRCS also enhanced Water and Sanitation and emergency health components under the floods and cholera operations in 2010. The Water and Sanitation component focused on the provision of safe water by chlorinating shallow wells and other water sources, providing sanitation facilities and enhancing hygiene promotion activities. ZRCS distributed two jerry cans per family (for 200 families) for water storage and 36,000 water purification sachets for treatment.

The Red Cross volunteers and programme staff members conducted door-to-door sensitization on the proper use of water purification sachets. Whilst promoting hygiene, the volunteers supervised the camp and encouraged safe disposal of garbage and the use of washing basins. With support from the IFRC, ZRCS also deployed cholera kits to the affected areas.

Programme Component: HIV and AIDS

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).

Achievements:

ZRCS scaled-down the HIV and AIDS programme to focus more on prevention activities as seen relevant to the needs and the available funding support. At implementation level, the activities were integrated with the ZRBI activities, in the same operating areas.

The volunteers underwent and training of trainers on peer education towards the end of 2009 continued providing the services in 2010. The training was technical and financial supported by the IFRC SARRO. The purpose of the training was to capacitate the trainers with skills to train peer educators on the new "Youth Peer Education Life Skills Activity Kit". An additional 20 peer educators for Lusaka branch were trained as Peer Educators in October 2010.

During the reporting period, ZRCS started rolling out the peer education package and has supported 43 peer educators from Lusaka branch who managed to reach 734 out-of-school and 646 school going youth through peer education activities including games, group discussions on HIV and AIDS, STIs, VCT, condom use and sexual health. As a result of this intervention ZRCS managed to reach 587 people through sexual and reproductive health promotion sessions and distributed 14, 753 condoms.

Constraints or Challenges

- The rolling out of the VNRBD programme has been slow due to lack of funding; little has been achieved since its launch on 8 May 2010.
- Delay in the disbursement of the cholera/measles funding support led to the NS' late response to cholera/measles outbreaks.
- The non implementation of the Water and Sanitation activities and slow implementation of the HIV and AIDS activities in the period under review was due to lack of funding.

National Society Development (NSD)

Programme Component: Branch Development and Volunteer Management

Outcome 1: ZRCS branches are viable, and vibrant with sound volunteer and local youth network management systems.

Achievements:

The NSD unit trained staff disseminated the newly developed Volunteering Policy and the new ZRCS Constitution taking advantage of every opportunity such as field trips, branch executive committee inductions, national council meetings and volunteer training sessions.

The National Executive Council (NEC) meeting was held 29 May 2010 and a new governing board was elected. The new governing board was inducted soon after they were elected. Later in the year, the provincial presidents' structure was established and the identified presidents were invited to the first meeting in October 2010. At the same meeting, Mambwe, Siavonga and Mpongwe member groups were upgraded and each accorded branch status after achieving 200 members each, bringing the number of ZRCS branches to 70.

The provincial youth camp was held in the Copperbelt Province under the theme, "Youths on the move, building on the youths for the future". A total of 350 youths from various schools and those out of school benefitted from the youth camp. The national youth camp was also held and attracted 52 members comprising of representatives from all the nine provinces of Zambia and organizers from NS Headquarters.

Another achievement was that ZRCS successfully hosted the Southern Africa Youth Network (SAYNET) from 3 to 5 November 2010. The SAYNET meeting attracted members from Angola, Botswana, Malawi, Mozambique, Namibia, South Africa, Swaziland, Zambia and Zimbabwe.

Outcome 3: ZRCS has established systems and procedures for the systematic provision of technical support for branch development and volunteer management by the headquarters.

Achievements

The NS leadership visited a few more branch visitations with the view to go and build branch capacities in good governance and general branch management. The branch support visits also ensured increasing information dissemination and visibility in the districts through effective community mobilization and participation. Among the branches visited was the Lusaka Branch, Kabwe Branch, Mpulungu, in addition to Mambwe, Mpongwe and Siavonga, Kazungula and Sesheke.

In an effort to motivate the Kabwe Red Cross Branch, volunteers and community, the ZRCS Secretary General visited the Chibwe Voluntary Aid Unit during the distribution of relief items were distributed to families affected by floods. Many villagers were motivated to join the Red Cross as volunteers as a result of the visit.

Outcome 2: ZRCS has established systems and procedures for the systematic provision of technical support for branch development and volunteer management by the headquarters Lusaka.

Achievements

The ZRBI has a component directed at enhancing the capacity of the NS branches that are responding to any disaster, particularly those branches along the Zambezi River basin. ZRCS locally launched the ZRBI in July 2010 at national level followed by district level after the induction of 20 BEC members in Kazungula and Sesheke.

Outcome 4: ZRCS resource base is improved and ensures sustainability of programmes

Achievements

ZRCS intensified resource mobilization efforts through commercial First Aid training and letting out of the newly renovated lodge in Livingstone. As a result, the NS managed to meet some of its administrative costs.

The ZRCS secretary general was appointed to the Diplomacy and Humanitarian Advisory Board at global level by the IFRC in Geneva. This is a huge step in increasing the visibility of the NS and its contribution to the Movement.

Constraints or Challenges

The most significant challenge for ZRCS is financial sustainability, thus in the first half of the year, the NS was beset with funding insecurity, which hampered implementation of development activities. The activities reported on were implemented using local resource mobilization initiatives. This situation was duly acknowledged during the staff retreat, as well as the governance and management meetings, and has become a priority to be addressed in the next three years.

Despite training being conducted by the SARRO on Navision accounting software in 2009, the NS has not been fully institutionalized system. The use of local service providers that would offer easily accessible technical support in line with financial reporting requirements of the IFRC is recommended but the NS has no capacity or resources to pay the local technical support.

Principles and Values

Programme Component: Promotion of Fundamental Principles and Humanitarian Values

Outcome 1: Knowledge, understanding and application of the Fundamental Principles and Humanitarian Values are enhanced (including non-discrimination, non-violence, tolerance and respect for diversity) at all levels of the NS.

Achievements:

In order to enhance skills of youth and new governing board members in portraying a positive image of the Red Cross at local level, ZRCS took advantage of the youth camp and branch induction sessions to train the youth and board members on various aspects of the Red Cross including volunteerism, legal framework, volunteer management and action planning, as well as Red Cross history, Fundamental Principles and Humanitarian Values.

ZRCS also conducted a training workshop for the media focused on effective Media Reporting on Management. The workshop covered various topics including promotion of diversity and human dignity, Fundamental Principles and Humanitarian Values of the Red Cross during disasters.

Programme Component: Operationalization of Fundamental Principles and Humanitarian Values

Outcome 1: The dissemination of the Fundamental Principles and Humanitarian Values is an integral part of all NS programmes and activities.

Achievements

At the launch of the VNBD programme, which coincided with the World Red Cross day, ZRCS disseminated the Fundamental Principles and Humanitarian Values. For the World Red Cross day commemoration, ZRCS produced a 2010 full colour wall calendar, banners, flags, Club 25 brochures, t-shirts, voluntary blood donation brochures, television advertisements, radio advertisements and Red Cross jingles on blood donations. ZRCS received 75 spots of media coverage on television, radio and in the print media both at national level and international level.

Constraints or Challenges

ZRCS implemented 2010 programmes amidst serious internal and external challenges. Internal challenges include financial instability caused by lack of programme funding. Challenges from the external environment include increases in prices of fuel and the loss of value of the local currency against the US dollar that meant the NS had to deliver less against set targets though using its locally mobilized resources.

Working in partnership

ZRCS has been partnering with the local NGOs and FBOs at the national and district levels. The partnership has mainly been centred on capacity building. The Ministry of Health remains the primary partner in the implementation of the integrated HIV and AIDS programme through the provision of technical support in HIV prevention and VCT referrals. The National Aids Council (NAC) coordinates and monitors all HIV and AIDS related programmes in the country. ZRCS is a member of the National Epidemic Preparedness and Prevention Committee coordinated by the Ministry of Health. ZRCS has also partnered with the ZNBTS in activities related to blood donor mobilization in the country since May 2010. Other partners include Care Zambia, World Vision, Rapids, CRS, MSF, USAID and UNICEF.

ZRCS is also a member of the ZVAC. The flood relief operations were done in close collaboration with DMMU, which took a coordination role during the operations. The ZRCS volunteers work in close collaboration with the environmental health technicians in rural health centres on community sensitization and hygiene promotion.

Support from the IFRC is still required to enhance collaboration and co-ordination, utilizing the Cooperation Agreement Strategy (CAS) approach that aligns needs, strategic directions, capacities and priorities as well as support received from partners.

Contributing to longer-term impact

The introduction of Club 25 in schools, which comprise of young people between the ages of 16 – 25 years on VNRBD, will significantly contribute to the increase of safe blood in the blood banks around the country therefore reducing on the number of deaths in hospitals that occur due to blood shortages. Club 25 members commit to donating blood regularly, at least three to four times per year. The members also commit to maintain healthy lifestyles by not engaging in risky behaviours such as unsafe sex, drug abuse and alcohol abuse that can potentially will compromise the quality of blood they donate to the programme. Ensuring the quality of blood means that the individual Club 25 member will live a healthy lifestyle and maintain good physical and mental health including proper nutrition, adequate sleep and proper hygiene, which is expected to continue unto their adulthood. The longer-term impact is a zero per cent incidence of HIV infection among “Club 25” members.

The increase in numbers of people accessing safe drinking water and good sanitation facilities is expected to contribute to the reduction in disease incidence thus reducing general morbidity and mortality.

Looking ahead

The 2008 revised Constitution and the Strategic Development Plan (SDP) 2009-2011 are the primary guiding documents for programming and policy direction. There are plans to revise the SDP to align it with the IFRC Strategy 2020. Future programming will ensure long-term and sustainable impact while not neglecting the immediate needs of people affected by disasters.

ZRCS will also take an integrated approach to programming at all levels, whilst seeking to replicate the cooperation of branch and programme staff at implementation level as demonstrated in the recently-ended Water and Sanitation programme in the Southern Province.

It is the aspiration of the ZRCS to formalize partnerships with all partners with the support of the IFRC resource mobilization framework. Despite the scaling-down of the IFRC presence in-country, ZRCS will continue to actively engage with the IFRC SARRO.

Essential to the NS contribution to humanitarian services will be international instruments such as the MDGs, the Hyogo Framework, Strategy 2020 and other international declarations. ZRCS will continue aligning its programmes to the IFRC strategic direction, Johannesburg Declaration and Strategy 2020.

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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