

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

ZAMBIA

May 2002

This Annual Report is intended for reporting on the Federation's Annual Appeals only.

Appeal No. 01.24/2001

Appeal Target: CHF 2,808,400 (USD 1,730,400 or eur 1,920,986)

Operational Developments

By year's end, the situation in the eastern Congo was still unstable. Despite the Lusaka Peace Agreement, battles between opposing groups continued unabated, as did the influx of refugees into Zambia. The prevailing insecurity forced refugees to stream across the border, as they fled fighting between the rebels and government soldiers, harassment, looting, rape and famine. Kaputa, Chienge and Mpulungu transit centres remained active throughout the year, receiving over 1,000 refugees per month. New arrivals from Mpulungu were relocated in Mwange while those coming through Kaputa and Chienge were sent to Kala camp. By the end of 2001, Mwange camp housed approximately 24,000 beneficiaries.

After the immediate emergency phase was over, the year 2001 saw a shift in priorities, as the refugees sought to be repatriated back to their countries of origin. As this was not yet possible, UNHCR and its implementing partners began efforts to persuade the refugee community to consider settling temporarily in Zambia and to farm plots which were being sourced by the government.

The sudden influx of refugees in 1999 prompted the government and the UNHCR to request that Zambia Red Cross (ZRCS) assist in providing basic humanitarian relief. The ZRCS in turn asked the International Federation for assistance. The Federation's regional office in Harare responded by allocating the necessary technical personnel and funds to assist the ZRCS to build up and maintain the Mwange refugee camp and other transit centres.

During the reporting period, the ZRCS, with Federation support, was responsible for general camp management in Mwange including the distribution of food and non-food items, warehousing, and the registration of new arrivals (as an auxiliary to UNHCR). The ZRCS also provided health services including a camp clinic, the provision of water and sanitation, and other community and social activities when needed. In addition, ZRCS volunteers assisted UNHCR at the transit centres at Kaputa, Nsumbu, Mpulungu and Chiengi to facilitate the speedy transfer of refugees to the Mwange and Kala camps.

Disaster Response

Objective 1 To conduct food and non-food distributions and to procure and store excess stocks as needed, and to ensure that transport was made available to all sectors for efficient and effective management of the camp.

Achievements

To achieve the above objective, logistics officers ensured that all beneficiaries received adequate rations of food items on a timely basis. All materials needed were procured, stored and accounted for; transport was arranged for the pre-positioning and distribution of food, for health and water and sanitation staff, and for ambulance services. Logistics staff also ensured that all vehicles were serviced and road worthy.

Specific activities included:

- bi-weekly general distributions in Mwange
- distributions of food and non-food items to new arrivals
- food distributions to a cumulative number of 505,528 beneficiaries: 3,242.9 tonnes of maize grain, 845.92 tonnes of beans, 104.51 tonnes of cooking oil, and 39.61 tonnes of salt
- the supply of non-food items: 767 blankets, 512 mats, 68 quilts and 228,319 bars of soap
- the preparation of monthly reports and inventory updates.

Objective 2 To assist UNHCR in receiving and registering all new refugee arrivals (in line with UNHCR standards and directives) within 48 hours upon arrival at transit centres and/or camps.

Achievements

Activities to achieve the objective above included: the registration of the ICS according to gender and age, the establishment of an information data bank; maintaining updated and accurate records of births and deaths, and making funeral arrangements for the refugee community when necessary. Family reunification and tracing activities continued throughout the operation.

Specific activities included the registration of all new arrivals, with lists drawn up according to age and sex. Refugees arrived at an average rate of 1,000 per month. New born babies were registered according to gender: 438 males, and 419 females. Refugees were registered in the transit centres in Kaputa, Chiengi and Mpulungu.

Bereaved refugee families (115) were assisted with coffins, cloth and transport for burial of family members.

Constraints

Some refugees 'recycled' or forged their ration cards after benefiting from relief items, so that they could go back to transit centres and present themselves as new arrivals.

An irregular supply of food by the World Food Programme resulted in reduced or no rations at all of some food items.

Health and Care

Objective 1 To ensure that preventive and curative health services were available to the entire camp population in Mwange, with special emphasis on reproductive health (maternity, ante- and post- natal care), immunization for children under five, growth monitoring, nutrition rehabilitation and ambulance services.

Achievements

The general health situation in the camp and in transit centres remained stable. All activities were carried out as scheduled and no outbreaks of disease were reported during the period under review. Malaria remained the leading cause of morbidity followed by non-pneumonia respiratory infections. Activities to achieve the objective mentioned above included: OPD/IPD (out patient, in patient) consultations conducted by qualified medical personnel, lab tests, referrals based on existing policies, ambulance services, and nursing care provided by staff at the clinic.

The following list provides a breakdown of specific activities:

- 53,234 OPD consultations

- 2,673 IPD consultations
- 356 OPD referrals to MDH and 331 cases referred to MDH from IPD, 515 admissions at MDH and 33 cases referred for further treatment to the UTH
- 26,480 laboratory tests
- 60 medical kits and quarterly supplementary drugs were procured.

Ambulance services were on call at all times.

Activities to detect epidemics and communicable diseases included: health education, home visits, inspection of refuse pits, referral of patients to the clinic by the Health Information Team (HIT) if necessary, antenatal care, and family planning.

Specific activities included:

- 12,340 health education talks given by the HITs on various topics
- visits to 87,860 homes
- sanitary inspections of a total of 62,092 toilets and 39,600 refuse pits
- consultations for 1,449 adults and 1,827 children
- consultations for 1,060 antenatal cases
- family planning sessions
- home visits to 36 chronically ill patients, of whom seven were discharged and 13 died.

Activities that focused on reproductive health included; maternity, antenatal and postnatal care; growth monitoring and immunisation of children under five; family planning; supplementary feeding and the training and support of traditional birth attendants.

Specific activities included:

- 6,627 antenatal consultations
- 4,861 mothers were given TT during the 1st round NIDS (94%) coverage, 5,600 2nd round (109%) coverage
- 652 clinic deliveries, 335 TBA deliveries and 123 hospital (MDH) deliveries
- 12 stillbirths, 9 premature births, 71 abortions.
- 950 mothers attended postnatal sessions
- 2,705 clients attended family planning sessions.

Of the 37,464 patients who attended the clinic, 29,753 were recorded as above the lower line (i.e. 79%) and 7,711 weighed below the lower line (i.e. 21%). A total of 4,457 people received food supplements. Vitamin A supplements were also provided, immunisations (BCG, DPT, polio, measles) were carried out at the clinic and on national immunisation days, with almost 100 per cent coverage of all children under five.

In addition to the above, the ward for male patients was completed and operational from the first week of December.

To ensure efficient coordination and management of the department, staff held daily and weekly meetings, and consulted with heads of sectors in Lusaka and Harare. In addition, they attended monthly interagency meetings and held consultations with the Mporokoso hospital administration.

Constraints

Constraints encountered included the following:

- insufficient lighting at the clinic, which made night work difficult
- repeated ambulance breakdowns
- outdated lab equipment
- drugs, LAB reagent and nonmedical supplies were sent from Lusaka, a time-consuming process

- reluctance on the part of the refugee community to accept family planning services
- an irregular supply of vaccines, of HEPS for supplementary feeding, and of leprosy and TB drugs
- a shortage of bicycles and rain boots which would have enabled the HIT team to carry out their rounds more efficiently.

Objective 2 To ensure that sufficient potable water was available to all refugees in the Mwanze camp for drinking, cooking and personal and domestic hygiene, in accordance with SPHERE minimum standards, and to ensure community and environmental sanitation through the construction of pit latrines.

Achievements

To ensure that each beneficiary received a minimum of 15 litres of water per day, activities included water treatment; testing, distribution and maintenance of water systems; servicing of hand pumps and improvement of the drainage system in the camp.

Water was produced both through the reticulated system and through eight hand pumps. Fifteen boreholes were drilled, nine in the camp, one in Mpulungu and six in community areas. Throughout the reporting period, beneficiaries received safe, adequate supplies of water (over and above SPHERE standards). No water borne diseases were reported. The drainage system was improved and network taps were all within a walking distance of 200 to 300 metres. Twenty-six water committees were established for each section. The water committees were given advice and supervision on the management of facilities, so as to encourage responsibility and ownership of the programme.

To provide adequate sanitary facilities and to promote better hygiene, activities included: construction of slabs for family and communal latrines, supervision of the digging of refuse pits and information on the correct use of latrines, quarterly spraying against mosquitos and flies, rodent cropping and the promotion of community participation.

During the period under review, specific achievements were as follows:

- 1,780 sanitation slabs were cast and 1,580 installed (82% coverage)
- 115,317 rodents were cropped
- 1,079 refuse pits were dug (more than 100% coverage as some households opted to dig pits of their own rather than share one)
- 99% of the camp population had access to adequate sanitation
- each family (8 persons on average) had one bath room structure and one toilet.

Constraints

Some of the boreholes drilled could not be used because the hand pumps supplied from Harare had no cylinders and spare parts ordered the previous year did not arrive. Apart from these constraints, the water and sanitation segment of the programme successfully provided safe water and adequate sanitation facilities for a refugee population of approximately 25,000 people - in accordance with, and at times above the SPHERE minimum standards. Culturally acceptable family latrines were established and the Mwanze population lived in a healthy and clean environment. The risk of disease transmission and outbreaks was drastically reduced.

Conclusion

Although the programme continued with the activities of the previous year, the strategy adopted for 2001 was different. Only a small Federation delegation remained in Lusaka and Mporokoso as technical resources and guidance were provided from the regional office in Harare. One programme coordinator and a single finance and administration delegate were based there throughout the year. At mid-year, the head of delegation was able to leave his post, since the national society was now sufficiently capable of handling the operation on its own. ZRCS branches and their refugee tracing

services were also active in other parts of the country, particularly in the western border areas where waves of Angolan refugees arrived periodically.

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INTERNATIONAL FEDERATION OF RED CROSS AND RED CRESCENT SOCIETIES

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Appeal No & title: 01.24/2001 Zambia

Period: year 2001

Project(s): ZM510

Currency: CHF

I - CONSOLIDATED INCOME 2001. CASH. KIND. SERVICES

FUNDING	CASH		KIND & SERVICES		TOTAL INCOME
	Contributions	Reallocations	Goods/Services	Personnel	
Appeal budget	2,808,400				
less					
Cash brought forward	-335,726				
TOTAL ASSISTANCE SOUGHT	3,144,126				
<u>Contributions from Donors</u>					
American Government (DGUS)	606,025				606,025
British Red Cross (DNGB)	3,977				3,977
British Red Cross (DNGB)	492				492
British Red Cross (DNGB)	17,661				17,661
Netherlands Red Cross (DNNL)	70,973				70,973
Netherlands Red Cross (DNNL)	50,100				50,100
Swedish Govt.via Swedish Red Cro	170,000				170,000
Swedish Govt.via Swedish Red Cro	27,624				27,624
Swedish Govt.via Swedish Red Cro	58,438				58,438
Swedish Red Cross (DNSE)	7,363				7,363
UNHCR Contract No.2 (DH0202)	54,897				54,897
UNHCR Contract No.2 (DH0202)	225				225
UNHCR Contract No.2 (DH0202)	2,880				2,880
UNHCR Contract No.2 (DH0202)	22,118				22,118
UNHCR Contract No.3 (DH0203)	146,709				146,709
UNHCR Contract No.3 (DH0203)	276,317				276,317
UNHCR Contract No.3 (DH0203)	315,000				315,000
UNHCR (DH02)	3,386				3,386
Sweden				59,959	59,959
TOTAL	1,834,184			59,959	1,894,143

II - Balance of funds

Opening balance	-335,726
CASH INCOME Rcv'd	1,834,184
CASH EXPENDITURE	-1,476,873

CASH BALANCE	21,585

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III - Budget analysis / Breakdown of expenditures

Description	Appeal Budget	CASH Expenditures	KIND & SERVICES		TOTAL Expenditures	Variance
			Goods/services	Personnel		
<u>SUPPLIES</u>						
Shelter & Construction	65,440	99,267			99,267	-33,827
Clothing & Textiles						
Food/Seeds	500	1,866			1,866	-1,366
Water	10,200	5,150			5,150	5,050
Medical & First Aid	223,680	61,170			61,170	162,510
Teaching materials		252			252	-252
Utensils & Tools	3,000					3,000
Other relief supplies	59,280	14,459			14,459	44,821
Sub-Total	362,100	182,164			182,164	179,936
<u>CAPITAL EXPENSES</u>						
Land & Buildings						
Vehicles						
Computers & Telecom equip.	78,200					78,200
Medical equipment	2,000					2,000
Other capital expenditures	1,600	2,088			2,088	-488
Sub-Total	81,800	2,088			2,088	79,712
<u>TRANSPORT & STORAGE</u>	724,760	228,888			228,888	495,872
Sub-Total	724,760	228,888			228,888	495,872
<u>PERSONNEL</u>						
Personnel (delegates)	458,170	306,923		59,959	366,882	91,288
Personnel (local staff)	574,712	433,739			433,739	140,973
Training						
Sub-Total	1,032,882	740,662		59,959	800,621	232,261
<u>GENERAL & ADMINISTRATION</u>						
Assessment/Monitoring/experts	19,980	27,146			27,146	-7,166
Travel & related expenses	41,582	45,975			45,975	-4,393
Information expenses	20,532	363			363	20,169
Administrative expenses	205,840	208,885			208,885	-3,045
External workshops & Seminars	10,000					10,000
Sub-Total	297,934	282,368			282,368	15,566
<u>PROGRAMME SUPPORT</u>						
Programme management	189,370	74,008			74,008	115,363
Technical services	56,688	22,158			22,158	34,529
Professional services	62,866	24,580			24,580	38,286
Sub-Total	308,924	120,746			120,746	188,178
Operational provisions		-80,043			-80,043	80,043
Transfers to National Societies						
TOTAL BUDGET	2,808,400	1,476,873		59,959	1,536,832	1,271,568

Consumption rate: Expenditures versus income 81%
Expenditures versus budget 55%