

# 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

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## **Overall analysis of the programme •**

The Lagos Regional Group, which constitutes the four National Societies (NSs) from Benin, Ghana, Nigeria and Togo was successfully inaugurated and its first meeting held in Lagos in July 2002.

During the meeting, regional issues were discussed and opportunities to exchange and share regional resources were explored. Prior to the meeting, the International Federation's Lagos regional office was set up in line with the Federation's regionalization process supporting the development of the National Societies in the region. Due to the changes, the Nigerian delegation was transformed into a regional office and took on a regional responsibility covering the four National Societies.

## ***Nigeria***

The Human Development Report rates Nigeria at 151 out of 174 countries. Although the income per capita was US\$ 350 in 1999, 70 per cent of the population live on less than US\$ 1 per day. The country continued to face ethnic and religious conflicts intensified by inter-political party rivalries, in some cases resulting in loss of lives, as the general election planned for April 2003 approached.

The states of Plateau, Kaduna, Lagos, Taraba and Nasarawa faced major ethnic and religious violence during the period. In Kaduna State, a religious conflict triggered by an article published on the 'Miss World' beauty pageant caused the loss of scores of lives in November 2002.

The Nigerian Red Cross Society (NRCS) mobilized its volunteers to help to the victims of these conflicts and provide assistance to displaced persons. The response of the society in the northern part of the country was sometimes slow due to management and coordination problems between the head office and the field operations and partly due to financial constraints to train and equip emergency teams. The NRCS needs to prioritize its relief procedures in consultation with the mission of the International Committee for the Red Cross (ICRC) in Lagos and the Lagos office.

The National Society took the lead in responding to the Lagos explosion operation on 27 January 2002 supported by the Federation. The NRCS provided food and non-food distributions to over 7,000 displaced families, actively participated in the rehabilitation of 725 homes (benefiting 10,960 families) and conducted awareness campaigns on unexploded ordinance. The Federation mobilized external resources and most delegates, including the head of delegation, were fully involved in the operation, which ran from January-April 2002. The operation had significant impact on the NRCS due to the high profile and acclaimed role of its response, the large number of volunteers who took part and strong local and international support. It helped to establish partnerships with organizations such as Nestlé and British American Tobacco and establish cooperation with the media.

The relief operation underlined the significance of improving coordination among various organizations, including the government's, national emergencies management agency (NEMA), especially in the exchange of information, training and resource management. There is also need to improve disaster awareness, implement prevention measures and preparedness to minimize losses in future disasters.

The HIV/AIDS and the sexually transmitted diseases (STDs) programme of the NRCS remained the major activity both in terms of programme coverage and funding supported by the Federation and partners during the year. The programme continued to focus on 12 branches which started in 2001 providing peer education with the objective to disseminate preventive measures targeting young persons. Stigmatization and discrimination of persons living with HIV/AIDS remained the prime concern of the programme. Recently the programme was extended to home based care (HBC) for people living with HIV/AIDS. The health department of the NRCS needs strengthening in order to address the increasing demands of the programme.

The National Society also played a key role in social mobilization activities to eradicate the polio virus in the country and was able to develop strong partnerships both with internal and international partners such as the Ministry of Health (MoH), World Health Organization (WHO) and other UN agencies and non-governmental organizations (NGOs).

The Lagos regional organizational development (OD) integrated with the disaster management (DM) and HIV/AIDS programmes of the National Society to strengthen the implementation and monitoring capacities of branches running programmes. A branch manual was compiled with the help of OD and distributed to all branches after conducting training sessions. Low funding for the OD programmes limited the implementation of planned objectives.

## **Disaster Preparedness and Response - Nigeria •**

**Objective 1: To train, resource and organize five emergency teams of 14 volunteers in six branches per year and maintain a system of readiness and management support to existing teams.**

In July 2002, six disaster preparedness (DP) coordinators and 60 team leaders from the 2001 programme branches of Bayelsa, Nasarawa, Oyo, Kano, Yobe and Imo and in August 2002, another six DP coordinators and 60 team leaders from the 2002 programme branches of Abuja, Akwa-ibom, Zamfara, Taraba, Abia and Ekiti branches were trained. The NRCS established, trained and equipped 30 emergency teams of 420 volunteers from the 2000 programme branches in Kaduna, Delta, Anambra, Kwara, Borno and Osun States. The emergency teams from the 2000 and 2001 programme branches received operational materials provided by the ICRC and the Federation.

**Constraints:** The training and equipping of emergency teams (target is 90 teams) from the NRCS programme branches of 2001 and 2002 was behind schedule because of major relief operations in the first and second quarters of 2002 and partly due to management and planning problems. Divisional level volunteers are not yet included in the training

**Objective 2: Ensure that DP and relief operations are responsive and appropriate through training and use of the vulnerability and capacity assessment (VCA) technique.**

To ensure that VCA is applied to future operational planning and development, a one-month participating rapid appraisal/participating learning and activities (PRA/PLA) and VCA training was funded by the British Red Cross. Practical field application was successfully carried out in Lagos and Benue State in May 2002. The training was given to 12 zonal health and DP officers, two principal programme officers from the head office, representatives from NEMA and the MoH and the Federation's OD delegate. The VCA training was put into practice by emergency volunteers of the NRCS during the religious conflict in Kaduna State in November 2002. The technique was used by zonal officers in the south and north-east in conducting training for branches in their zones. The head

office also used the VCA technique to brainstorm a planning process for 2003 and prepare a plan of action. A follow up training may be required to ensure continuity of the VCA.

**Objective 3: Develop a national contingency plan for the NRCS and coordinate with NEMA.**

A draft disaster contingency plan, financed by the Federation's capacity building fund (CBF), was compiled with inputs from programme officers and zonal officers of the NRCS, NEMA, MoH, the ICRC and the Lagos regional office. The document identified major vulnerabilities and their locations in the country and capacities of the society.

**Objective 4: Develop the DP capacity of the National Society through technical, management and resource assistance.**

To improve the management of the DM programme and provide better management support to zonal officers and branches, an experienced zonal officer from the north-west, a member of the West Africa field assessment and coordination team (FACT) mission was transferred to the head office. In line with the CBF objective, non-food stocks for 400 families were procured and stored in a Kano branch warehouse strategically placed in northern Nigeria. Zonal officers were employed in 2002 to provide technical support to branches. Their planning skills and supervision of disaster response activities in various branches were enhanced through the monthly meetings, VCA training and its application. The NRCS participated actively in various workshops and meetings organized by the Department for International Development (DFID) and the United Nations International Children 's Emergency Fund (UNICEF) on disaster and preparedness planning. Improvement in the DM department is required to support the activities of zonal offices.

**Health and Care - Nigeria •**

***Background***

Indicators show no improvement in the health of the general population. The WHO reports maternal mortality to be 1,100/100,000, with only 33 per cent of deliveries being attended by trained personnel. Compared to other countries of West Africa, the percentage of underweight and stunted children is close to 40 per cent. Only two per cent of the infants between 0-3 months are exclusively breast fed. The World Bank approved loans totalling US\$ 234 million for Nigeria to improve its health sector and reduce poverty in urban areas but the governmental health services continue to operate unreliably due to frequent strikes among personnel, poor quality treatment and lack of resources. The national agency for food and drug administration and control (NAFDAC) continues to destroy large consignments of fake and adulterated drugs often imported from Asian countries. Scattered epidemics of meningitis and measles due to the low immunization coverage (about 20 per cent) have occurred including 14 cases of Lassa fever in Benue state. Water-related diseases like cholera, various types of diarrhoea and malaria are still major child killers. Through intensified polio surveillance, 178 cases of wild polio virus were identified and the immunizations will continue in the year 2003. The NRCS plays an important role in social mobilization.

The federal MoH reported an increased HIV/AIDS prevalence rate from 5.4 per cent in 1999 to 5.8 per cent in 2001, indicating that the infected population is more than three million. The epidemic now affects all geographical areas of the country and the younger age groups. The transmission route is said to be mainly heterosexual. About one third of the HIV/AIDS infected population is also infected by TB.

The NRCS community-based health programme launched in 1997 is well designed to fill gaps and complement governmental and private health services.

The goal of the community-based health programme (CBHP) was to strengthen the capacity of vulnerable people in their daily lives by enabling them to address their priority health problems.

By the end of 2002, the NRCS will have expanded and strengthened its health programme for the benefit of the vulnerable in Kebbi, Bauchi, Niger, Kogi, Ogun and Edo states.

### *Mothers' Clubs (MC)*

**Objective 1:** To continue to improve maternal and child health by establishing 60 new mothers' clubs in six states bringing the total to 280 by the end 2003. The total number of direct beneficiaries will be 33,600 people.

A total of 184 mothers' clubs was established out of 216 projected while 58 out of 78 trained new MC leaders (75 per cent) established clubs by the end of 2002. A mothers' club camp was organized in Gombe for 72 participants from 17 branches with the aim of discussing health issues and means of sustaining the clubs. The women used the occasion to show folklore and display products from the income generating projects in 11 branches which included cassava and bee farming, weaning food production for a hospital and products for skin care. The clubs dealt with topics like immunization, weaning, breast feeding and hygiene promotion, malaria and HIV/AIDS prevention but also empowerment of women and girls. They were trained on negotiating skills and oppose harmful traditions like female genital mutilation and early marriages. There is a clear awareness of the vicious circle of poverty, ill health and illiteracy and some of the clubs have therefore started literacy classes. The major educational materials were reviewed and 1,500 copies were printed.

**Constraints:** The reporting and monitoring is imperfect but improving. Sometimes, the MCs have difficulties in balancing health issues.

### *School Units*

**Objective 2:** Develop stand-alone health and road safety awareness education kits and selectively place them for use in 900 schools across six states to reach an estimated number of 81,000 pupils per year.

Many volunteers from school units are engaged in HIV/AIDS peer education activities and social mobilization. The school units are the major recruitment base in Nigeria for new active volunteers. They have a clear Red Cross identification through slogans, RC songs, uniforms and public performances. However, the school units lacked educational materials and a file for school unit leaders was compiled at the end of the year containing topics on first aid, health education and road safety. Following the budget review in September, the first edition was set for 700 copies and 600 selected schools, with a reduction in the estimated beneficiaries to 54,000.

**Constraints:** Lack of staff has made it impossible to fulfil this goal and the zonal health officers will continue in the year of 2003 with distribution of the files and on the spot training of the leaders.

### *Health Action Teams*

**Objective 3:** To improve response to public health hazards like epidemics by utilizing and further training volunteers to form 30 teams of five members in community-based first aid, epidemic prevention and control in six states.

Due to insufficient funding this objective was not reached. However, the NRCS focused on health education, sanitation exercises and distribution of leaflets in Hausa in response to outbreaks of cholera and meningitis in some of the northern states.

### *Polio social mobilization*

**Objective 4:** To increase community participation and improve acceptability and demand for polio immunization, through social mobilization of volunteers in partnership with other stakeholders to eradicate polio in Nigeria.

The national programme for immunizations (NPI) together with partners like WHO, UNICEF, USAID, Rotary Polio plus and John Hopkins University, and NRCS contributed to the eradication of polio. On average 1,200 volunteers participated in each of the two rounds of national immunization days (NIDS) and three sub-national immunization days (SNIDS). The latter were mainly in the north where 178 cases of wild polio virus were found last year. During the first two SNIDS, 7.5 million under-five children were tracked in the house-to-house campaign. During the last NIDS, the social mobilization strategy was changed and a mobilization committee was formed in each of the 774 local government areas (LGA) across the country, chaired by the LGA paramount chief and with a Red

Cross volunteer as a member to enhance community participation. The well-trained and disciplined volunteers covered their areas strategically and were supported by local chiefs. Using the sweep method and pooling all resources to cover district by district the immunization coverage improved. With the new strategy it is however no longer possible to single out the exact number of children mobilized by RC volunteers. They contributed to the immunization of 42.2 million children during the last three rounds.

### ***Capacity building of the NRCS***

**Objective 5: To develop and strengthen the NS technical and managerial capacity at the national headquarters, zonal, branch and community levels. Promote networking with relevant government agencies, departments and other partners.**

A new principal health officer succeeded the former officer who was appointed assistant secretary general for programmes mid-2002. The HIV/AIDS coordinator, who resigned, was not replaced. Staffing shortages combined with a heavy work load meant organizational capacity building received less attention. Implementation of a clear programme and management structure within the health department was not further developed and regular programme meetings, important for monitoring and inter-departmental collaboration and staff meetings did not take place as planned.

The capacity of the zonal offices, in place for one and a half years, was strengthened through quarterly staff seminars with joint planning and evaluation. The officers underwent a three-week vulnerability and capacity assessment course, including first aid and CBHP. However, the zonal structure still does not work without friction concerning traveling, collaboration with branches, reporting and management. It is still a problem for the zonal officers to get timely and adequate reports from the branches as the branches tend to see them as controllers rather than as technical advisers.

The Federation has contributed a new vehicle for the HIV/AIDS programme, a desktop computer and technical equipment for translation to manage as a sub-regional office.

Partnership with NPI and allies in the polio eradication initiative is well established and there are expectations that the NRCS will play a major role in routine immunizations and mass vaccinations in the future. The NRCS is a member of the national action committee on AIDS (NACA) and has good relations with the national AIDS and STDs control programme (NASCP). More recently partnerships with organizations assisting people living with HIV/AIDS (PLWHA) are developing.

### ***HIV/AIDS/STDs***

#### ***Background***

The latest sentinel study from 2001 found an increase of the HIV/AIDS prevalence rate from 5.4 per cent to 5.8 per cent, which the MoH consider to be an underestimation of the true situation. The trend at present is a generalized epidemic with a rapid spread in rural areas and among the youth. The male to female rate is 1:1 and the major transmission route is heterosexual. TB is increasing due to the HIV/AIDS epidemic. The infected population is estimated to be more than three million people, with a highest prevalence rate of 13.6 per cent found in Enugu within the belt from the south and southeast reaching diagonally upwards towards the north and northwest. Governmental schemes for voluntary counselling and testing, antiretroviral therapy and blood safety programmes are developing at a slow pace and are not available for the majority. The predominant type is HIV 1 (97.5 per cent).

The NRCS is focusing on peer education and recently also on home based care for people living with or affected by HIV/AIDS, well in line with the recommendations of the MoH.

**Objective 1: To improve knowledge and understanding of HIV/AIDS and sexually transmitted diseases among 1.4 million in-school youth in 12 states within the age ranges of 9-30 years, by the end of 2005 and with the aim of encouraging safer sexual behaviour.**

**Objective 2: To improve the conditions of life for PLWHAs, volunteers are trained to give psychological and physical support in the homes of PLWHAs.**

The NRCS liaised with relevant governmental structures such as the policy making NACA and the implementing NASCP, relevant UN bodies and NGOs like Society for Women and HIV/AIDS in Nigeria (SWAAN) and organizations assisting PLWHAs.

The project was launched in late 2001 with the training of 24 branch trainers and 12 branch HIV/AIDS coordinators from those twelve branches with the highest HIV/AIDS prevalence rate in 1999 (two branches in each of the six geopolitical zones). Materials for education like flip charts, posters and visibility materials were produced. The HIV/AIDS/STD coordinator assessed the capacity of the selected project branches. Some 110 peer educators, most of them from secondary schools and with a fairly accurate gender balance were trained in each of the twelve branches in early 2002. For effective monitoring and impact, the branches were recommended to select three LGA for their interventions. At the end of the year 2002, the twelve states reported that the peer educators reached 352,000 students. Some 970 volunteer peer educators out of 1,320 trained were active. Branch reports suggest that the peer educators are creative in finding ways of delivering the messages; drama, quizzes, rallies and lectures are frequently used methods. All branches reported that they organized support meetings for their peer educators. As some of the chosen peer educators had left school mid-year, a few branches started to replace and train new peer educators. Akwa-Ibom branch made a proposal to expand its project using locally raised funds. The NRCS plans to expand the peer education project to another 12 states in 2003.

**Constraints:** In total, nine out of 12 project branches gained new branch secretaries mid-year and most of them were not familiar with the project. Some of the former branch secretaries delayed the hand over which was detrimental to the progress of the project. The project branches and school authorities decided at an early stage that condom distribution was not to be part of peer education. The peer educators were trained on male and female condom use but were asked to refer clients to youth friendly clinics and branches with condoms for distribution. The core messages of the peer education are: abstinence, faithfulness, consistent and correct condom use and delay of sexual debut.

The flip charts will be reviewed because they were found inappropriate for young children and were in some branches rejected for religious reasons.

The organizational development of the NRCS supported a few branches in developing a suitable structure for project implementation.

#### ***Home based care and counselling***

The NRCS realized at an early stage that home based care support and counselling should be integrated and implemented at the same time.

**Objective 1: For 360 trained volunteers to provide psycho-social and somatic home care support to 3,600 people living with HIV/AIDS by the end of 2003.**

**Objective 2: To provide counseling to clients pre- and post- HIV/AIDS testing, to PLWHA or people affected by HIV/AIDS and to the volunteers and staff members of the NRCS.**

For maximal impact the same three LGAs in the twelve project states were chosen for the implementation of the second phase at the end of the year 2002. A manual for HIV/AIDS branch coordinators and trainers and booklets for volunteer home care facilitators and counsellors were produced. The production included posters, stickers and other visibility materials to be used as incentives for volunteers and 450 volunteer kits with basic first aid material and condoms for distribution to PLWHA clients.

An assessment of the project branches of the NRCS revealed that stigma is frequent and sometimes fierce, disbelief about HIV/AIDS as an incurable disease is common and basic knowledge of the disease and prevention is in some areas very low. PLWHAs expressed their major needs to be financial, psycho-social, treatment and drugs, food, clothing and sheltering. However, local communities and NGOs expressed without exception their support for the project. Medical referral

clinics are sometimes distant and traditional healers are often mentioned as care givers. Voluntary counselling and testing and antiretroviral therapy are developing in the state capitals only and is out of reach to most clients.

The headquarters' staff and zonal health officers were trained on home based care and counselling for ten days and they then trained some 24 branch trainers, 12 branch HIV/AIDS coordinators and 36 counsellors in collaboration with SWAAN. Two branch trainers were expelled from the training, due to inadequate performance. The branch trainers will train 30 home based care volunteers in early 2003.

**Constraints:** It is still not very well known how the PLWHAs will receive the project and if stigma is an obstruction for them to access the project. The proposal did not include orphans and children made vulnerable by HIV/AIDS. Close monitoring of the home based care project will define the extent of the problem and an integrated approach will be applied.

**Objective 3: For the NRCS to contribute to reducing the stigma and discrimination of people infected with and affected by HIV/AIDS.**

Although not specifically in the original proposal, stigma and discrimination reduction were integrated in the training for peer educators. Partly in response to the global initiative, anti-stigma campaigns were performed by the NRCS especially on 8 May and during World AIDS Day in December. These campaigns, in the form of rallies, lectures and dissemination sessions, reached approximately six million people in 2002 and engaged thousands of volunteers in all 37 branches. These events had a positive influence on volunteer recruitment in the branches as well.

**Organizational Development •**

Following the opening of the Federation's office in Lagos in July 2002, the first sub-regional group meeting, attended by presidents and secretaries general of the four National Societies, was held the same month in Lagos. The OD delegate attended a cooperative agreement strategy (CAS) workshop in Lomé, Togo from 16-18 October to help the regional National Societies conduct the CAS framework. The delegate traveled to Ghana to reactivate the process which was suspended for some time. In Nigeria, an overview of a self-assessment of the National Society and a CAS framework was presented to the General Assembly of the NRCS. The society expressed its commitment to finalize the process in 2003.

**Nigeria**

Based on the goal and objectives of the OD programme of the NRCS for the year 2002, 28 branches of the NS were properly constituted and elected their executive committees. The branch relations and OD department provided guidelines and monitored elections to ensure conformity to election regulations of the NRCS.

The organizational structures and operating systems of the branches were further developed to improve delivery of programme services and respond effectively to disasters and other related humanitarian services. A branch manual, which was produced by the NRCS/Federation coordinated by the OD department, was distributed to all branches and programme departments. The manual provides guidelines on branch activities. Training on the use of the branch manual was given to all the 37 branch secretaries and 12 zonal officers. Through monitoring visits and feedback from branches, it was confirmed the manual is regularly used by branches and improvements were made in the management of volunteers, membership, activities of branch secretaries and various branch activity coordinators.

The OD department strengthened its relations especially with the health and disaster management departments to assist branches implementing programmes to improve training, management of volunteers and branch finance. The branch relations and OD visited eight of the 12 HIV/AIDS programme branches and provided on the job-training to improve their capacity to manage the HIV/AIDS activities. The OD also assisted in the monitoring and reporting of CBF support provided by the Federation and the final report on Lagos explosion operation. Programme monitoring by the

NRCS was encouraged through a monthly programme planning and reporting meeting which included programme officers at the head office to seriously scrutinize programme achievements against objectives set. These meetings helped to regularly evaluate programme implementation and find solutions to programme constraints. In many cases, zonal officers attended such meetings with the objective to include field inputs.

**Objective 1: Orientation of newly-elected governance on the different roles and responsibilities of governance and management, revision of the constitution, the country assistance strategy, and to discuss proposed changes in financial management.**

The annual general meeting (AGM) of the NRCS was held in January 2002 followed by the election of a new president and central executive board. In April, the new executive body arranged for a two-day retreat under the slogan 'Fast forwarding the NRCS' in which policy decisions were made to improve branch development. One of the significant developments was the employment of competent and resourceful new branch secretaries in all 37 branches. This decision was implemented during the year. Members of the executive board of the NRCS led by the president made an advocacy visit to the northern Islamic Sharia states of Sokoto, Zamfara, and Katsina to seek improved support by the state governments to the Red Cross branches there. The Red Cross emblem was also addressed in relation to its neutral and non-religious role. Elections of new branch executive committees were held in eight branches. Based on field assessment missions and recommendations by the branch relations and OD, the NRCS took action to set up a functioning executive committee in the Adamawa branch.

During the reporting period, it was observed that the executive committees in several branches improved their supportive role in branch activities. The OD delegate attended a three-day workshop on the country's CAS in Lomé, Togo in October 2002 to help start the process in the NRCS. An overview of the CAS framework was made at the NRCS AGM in December and the society expressed its agreement to finalize the process by December 2003. Action on redrafting the statutes of the National Society is still pending for further action by the central executive council. Accounting for working advances by the programmes of the National Society has improved. Additional staff were employed in the accounts department of the NRCS. The planned financial development of the NRCS and computerization of the accounts was not yet implemented.

**Constraints:** The executive committees in several branches of the National Society did not hold regular meetings. The composition of the committees to reflect resourceful and committed persons is still a major problem. Members of the committees in some state branches were not aware of their respective branch programmes due to lack of regular programme meetings. Efforts by the executive body to help branches access state subsidies were ineffective. The branch executive committees in many states are unclear about their roles and responsibilities. The divisions and relevant ministries and departments are not always represented in the branch executive.

**Objective 2: To strengthen and sustain the human resource capacity of the National Society for better management and performance of programmes and activities in programme branches.**

The department facilitated a training workshop for 11 zonal officers in programme and activity performance culture, management by objectives, and developing systems of coordination, monitoring, reporting and accountability against SMART objectives (March 2002). Seven branches benefited from assessment visits and on-the-job training. The mission assisted in establishing a minimum operating standard at the branch level and introduced a modern accounting system. The branches were also coached to improve their volunteer management, programme monitoring and reporting. Thirty seven branch secretaries were employed and branch relations and OD organized a two-day training on the implementation of the branch manual in October 2002.

**Constraints:**

- Many branch offices lack experience in proper filing and recordings.
- Government subventions to cover branch core cost are generally lacking. Promises made by many local governments have not yet materialized.
- Lack of office equipment to facilitate the work of the branches.

- Poor management by the branch secretaries to guide the activities of coordinators, who are key for all activities of branch volunteers. However, some branches have made good progress in motivating their volunteers in HIV/AIDs awareness and polio mobilization campaigns.
- Misunderstanding of the Red Cross emblem in some parts of northern Nigeria.

**Objective 3: For the NRCS to continue the development of efficient financial management, control and accountability with a standardized system of accounting and audit procedures at the national headquarters and branch levels.**

The finance delegate and accountant of the NRCS provided systems of budgetary control and financial reporting to programme officers, zonal officers and during training sessions for branch secretaries. The National Society engaged an accountant to improve the performance of its accounting department. Retirement of working advances by the NRCS has shown improvement. The planned financial development of the National Society has not begun.

**Constraints:** Lack of coordinated financial planning and poor implementation of the working advance system between the programme officers and zonal officers delayed smooth accounting processes.

**Objective 4: Improve the financial security of the NRCS by developing existing property for commercial rental, by supporting 18 branches in developing their fund raising capacity and branch fund raising plans, and by increasing fund raising capacity of the fundraising officer of the National Society.**

- Close to CHF 1.2 million was donated to the NRCS by 1,500 donors in aid of victims following the Lagos explosion on 27 January.
- The NRCS created its own web site to profile the activities of the NS.
- A corporate sponsorship strategy was adopted by the NRCS to raise funds. In line with this strategy, BAT Foundation sponsored the printing of the society's newsletter at the approximate cost of CHF 2,855.
- Various souvenir items were procured for resale at a cost of approximately CHF 4,557. Expected profit from the resale is approximately CHF 1,563.
- The resource development officer attended a resource mobilization workshop in the Netherlands in October to enhance his capacity.

**Constraints:** Income generation and fund raising at the branches were unsuccessful.

**Objective 5: Branches to selectively recruit and manage volunteers for programme and other branch activities and to increase and broaden their membership base and involvement.**

Membership promotion materials (membership registration forms, brochure, membership cards and receipts) were printed and distributed to the 37 state branches for a vigorous recruitment drive. A membership recruitment officer was appointed and a plan of action for the implementation of membership recruitment was put in place. A computer and a hands-on training were provided to maintain membership and volunteer data base.

**Constraints:** Though activities were carried out in a few branches, they brought little improvement to the Red Cross structures at the grass-roots level. Weak and unsupported Red Cross divisions lack commitment which affected membership recruitment. More efforts are needed to engage volunteers in activities of the Red Cross.

**Objective 6: To further develop first aid capacity by developing equipment and providing materials to branches for first aid training on service and commercial basis.**

Commercial first aid was developed towards meeting core costs. Currently, it represents a small percentage of the total income of the NRCS as presented in the table below. However, given the untapped potential market in the country, more funds could be generated by the National Society.

Table 1: First Aid Activities of NRCS in 2002

| Activity   | No. participants        | Amount generated (in US\$) |
|--|-------------------------|----------------------------|
| 1-Commercial first aid/ Work place first aid<br>1-1 Mobil Oil, Industrial workers and AED<br>1-2 Sheraton Hotel, Oxfam (GB), Centre for Management Development and Provast Ltd.<br>1-3 ABB Power Lines Ltd.<br>1-4 Berger paints | 56<br><br>10<br>25      | 10,067.00<br><br>-<br>-    |
| 2- First aid Bags sale   |                         | 2'300                      |
| 3- Standard first aid training<br>3-1 Zonal officers training<br>3-2 Branches' first aid training<br>3-3 Casualty Moving and Handling<br>3-4 Trainers' training  | 12<br>763<br>331<br>209 |                            |
| 4- World First Aid Day on 4 September 2002   |                         |                            |
| 5- Once a week TV programme on National TV. Network  |                         |                            |

**Constraints:** The first aid manual could not be published on time due to logistical reasons. It is to be published early 2003.

### Conclusions and recommendations •

The OD programme helped to develop the management capacity of the NRCS both at the head office and branch levels in implementing programmes. Coaching of programme officers, on-the-job training to branch secretaries and assessment visits to branches proved effective in developing skills and raising standards towards the aim of well-functioning branches. The employment of new branch secretaries established a good basis to move branch development forward. The preparation and dissemination of branch manuals, volunteering policy and code of conduct for volunteers is expected to enhance skills of branch secretaries and promote active volunteering at a divisional/grass-roots level. Currently, the challenge for the National Society is to cascade activities and decisions to grass-root levels from the head office to divisions and to branches.

The zonal offices will require more support to implement the decentralized structure. Better coordination and objective-focused planning and monitoring between programme officers and zonal officers are required. Other regional National Societies, namely Ghana, Benin and Togo will also be assisted in areas of good governance, staff training and in the drafting of the CAS in line with the 2003 appeal.

### Regional Cooperation •

#### *Benin*

A dispute remains unresolved between the current president of Benin Red Cross and his officers and two former officers of the society on issues of legitimacy and management of the NS. The head of Lagos office of the Federation travelled to Benin and mediation efforts continue. The National Society runs a bilateral programme with the German Red Cross. It plans to do a self-assessment exercise in the first quarter of 2003.

#### *Ghana*

The Ghana Red Cross faced major financial reporting problems for funds received from its bilateral partners. Plans are underway to conduct a management audit of the society by an external consultant funded by the Swiss Red Cross. Partners suspended funding pending transparent accounting of donations and the final outcome of the management audit.

The head of office and OD delegate travelled to Accra and met with the president, senior management and programme officers of the National Society.

An overview of the CAS process was presented and the decision was made to resume it with a time table to prepare the first draft of the document set for June 2003. The visit helped to reactivate the CAS committee. The National Society expressed its commitment to the CAS and the Lagos Office will continue to provide the required technical assistance.

### **Togo**

The National Society will hold a general election in February 2003 for a new president and its executive body. It will undertake a self-assessment of the National Society in the first quarter of 2003.

Table 2: Status of development activities followed up by the Federation's Lagos Office in 2002

| <b>Activities</b>        | <b>Benin RC</b>  | <b>Ghana RC</b>   | <b>Nigeria RC</b>                             | <b>Togo RC</b>                               |
|--------------------------|--|---|---|--|
| National governing board | Mediation between the current officers and the former president is pending | Election is due in June 2003  | AGM was held from 13-14 December 2002         | Election is planned for February 2003.       |
| Self- assessment of NS   | To be completed by end of March 2003                                       | KPMG is to undertake the management audit from Feb-June 2003, financed by the Swiss Red Cross | NS agreed to finalize it by end of March 2003 | To be completed before end of March 2003     |
| CAS                      | N/A  | In progress, NS agreed to have the first draft ready by June 2003                             | Planned to be completed by December 2003      | N/A  |
| Main challenges          | Dispute between current leadership and former president                    | Serious financial reporting which affects the image of the NS                                 | Branch development and resource mobilization  | Branch development and resource mobilization |

### **Coordination and Management •**

With the arrival of a new head of office in June, the delegation was transformed into a regional office. The first meeting of the sub-regional group took place from 18-19 July in Lagos attended by presidents and secretaries general of National Societies from Benin, Ghana, Nigeria and Togo.

### **Objective 1: The NRCS to have annually revised three-year strategic plans, gain adequate funding, and technical competence.**

The strategic plan was revised for the period 2003-2005. Copies of the plan were circulated to partner societies, notably the British and Finnish Red Cross Societies, to help them develop cooperation agreements to support the long-term development of the National Society.

**Constraints:** More assistance in the financial development is expected to improve budgetary costing and control. A system for coaching management and accounting staff is to be introduced in 2003.

### **Objective 2: Support the programme officers of the NRCS in programme planning, implementation, financial management, monitoring and reporting.**

The NS appointed assistant secretaries general for programmes and finance/administration.

**Constraints:** There are some gaps in programme coordination, reporting and management of field programmes. The NRCS has a high public profile. However, it needs to develop an efficient system to manage its staff members, improve better coordination between head office and field staff members as well as programme accounting.

**Objective 3: Assist the NRCS to revise its constitution.**

*0*The legal advisor of the NRCS is still revising the constitution.

**Objectives 4, 5 and 6 are covered under OD programme**

**Objective 7: Develop a legal status agreement.**

A letter from the Federation's secretary general and accompanying documentation was submitted to the Ministry of Foreign Affairs.

**Objective 8: Transition from a country delegation to sub-regional office.**

The Lagos office was established successfully in July and started to provide technical assistance to the National Societies in Benin, Ghana and Togo. The HoO and OD delegate travelled to Benin, Togo and Ghana and met with the ICRC and representatives of the Swiss Red Cross and German Red Cross on developmental issues of the National Society.

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

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

**INTERNATIONAL FEDERATION OF RED CROSS AND RED CRESCENT SOCIETIES**

|                |   |
|----------------|---|
| Interim report |   |
| Annual report  | X |
| Final report   |   |

**Appeal No & title: 01.03/2002 Nigeria**  
**Period: year 2002**  
**Project(s): PNG006, 101, 160, 161, 401, 410**  
**Currency: CHF**

**I - CONSOLIDATED RESPONSE TO APPEAL**

| FUNDING                                    | CASH             |          | KIND & SERVICES |                | TOTAL INCOME     |
|--|------------------|----------|-----------------|----------------|------------------|
|  | Contributions    | Comments | Goods/Services  | Personnel      |                  |
| Appeal budget                              | 2,831,279        |          |                 |                |                  |
| less                                       |                  |          |                 |                |                  |
| Cash brought forward                       | 510,002          |          |                 |                |                  |
| <b>TOTAL ASSISTANCE SOUGHT</b>             | <b>2,321,277</b> |          |                 |                |                  |
| <i>Contributions from Donors</i>           |                  |          |                 |                |                  |
| American Red Cross (DNUS)                  | 4,999            |          |                 |                | 4,999            |
| British Red Cross Private donors (DPNGB)   | 294,908          |          |                 |                | 294,908          |
| British Red Cross (DNGB)                   | 217,429          |          |                 |                | 217,429          |
| DFID - British Government (DFID)           | 213,465          |          |                 |                | 213,465          |
| Donor - Capacity Building Fund (DCBF)      | 138,000          |          |                 |                | 138,000          |
| Finnish Govt.via Finnish Red Cross (DGNFI) | 67,686           |          |                 |                | 67,686           |
| Finnish Red Cross (DNFI)                   | 19,340           |          |                 |                | 19,340           |
| Nestle (DPS011)                            | 700,000          |          |                 |                | 700,000          |
| Norwegian Red Cross (DNNO)                 | 47,436           |          |                 |                | 47,436           |
| Swedish Govt.via Swedish Red Cross (DGNSE) | 399,356          |          |                 |                | 399,356          |
| Swedish Red Cross (DNSE)                   | 35,719           |          |                 |                | 35,719           |
| Unilever/Domestos (DPS007)                 | -200,000         |          |                 |                | -200,000         |
| Sweden                                     |                  |          |                 | 59,959         | 59,959           |
| Great Britain                              |                  |          |                 | 113,346        | 113,346          |
| <b>TOTAL</b>                               | <b>1,938,339</b> |          |                 | <b>173,305</b> | <b>2,111,644</b> |

**II - Balance of funds**

|                     |                |
|---------------------|----------------|
| OPENING             | 510,002        |
| CASH INCOME Rcv'd   | 1,938,339      |
| CASH EXPENDITURE    | -1,820,584     |
|                     | -----          |
| <b>CASH BALANCE</b> | <b>627,757</b> |

**Appeal No & title: 01.03/2002 Nigeria**

Period: year 2002

Project(s): PNG006, 101, 160, 161, 401, 410

Currency: CHF

**III - Budget analysis / Breakdown of expenditures**

| Description                         | APPEAL<br>Budget | CASH<br>Expenditures | KIND & SERVICES |                | TOTAL<br>Expenditures | Variance       |
|-------------------------------------|------------------|----------------------|-----------------|----------------|-----------------------|----------------|
|                                     |                  |                      | Goods/services  | Personnel      |                       |                |
| <u>SUPPLIES</u>                     |                  |                      |                 |                |                       |                |
| Shelter & Construction              |                  | 564                  |                 |                | 564                   | -564           |
| Clothing & Textiles                 |                  | 12,637               |                 |                | 12,637                | -12,637        |
| Food & Seeds                        |                  | 492                  |                 |                | 492                   | -492           |
| Water & sanitation                  |                  | 2,065                |                 |                | 2,065                 | -2,065         |
| Medical & First Aid                 | 32,800           | 26,854               |                 |                | 26,854                | 5,946          |
| Teaching materials                  | 55,200           | 8,989                |                 |                | 8,989                 | 46,211         |
| Utensils & Tools                    |                  | 8,420                |                 |                | 8,420                 | -8,420         |
| Other relief supplies               | 7,500            | 55,107               |                 |                | 55,107                | -47,607        |
| <b>Sub-Total</b>                    | <b>95,500</b>    | <b>115,130</b>       |                 |                | <b>115,130</b>        | <b>-19,630</b> |
| <u>CAPITAL EXPENSES</u>             |                  |                      |                 |                |                       |                |
| Land & Buildings                    |                  |                      |                 |                |                       |                |
| Vehicles                            | 275,000          | 78,615               |                 |                | 78,615                | 196,385        |
| Computers & Telecom equip.          | 61,075           | 22,084               |                 |                | 22,084                | 38,991         |
| Medical equipment                   |                  |                      |                 |                |                       |                |
| Other capital expenditures          | 46,983           | 21,420               |                 |                | 21,420                | 25,564         |
| <b>Sub-Total</b>                    | <b>383,058</b>   | <b>122,118</b>       |                 |                | <b>122,118</b>        | <b>260,940</b> |
| <u>TRANSPORT &amp; STORAGE</u>      | 74,830           | 78,499               |                 |                | 78,499                | -3,669         |
| <b>Sub-Total</b>                    | <b>74,830</b>    | <b>78,499</b>        |                 |                | <b>78,499</b>         | <b>-3,669</b>  |
| <u>PERSONNEL</u>                    |                  |                      |                 |                |                       |                |
| Personnel (delegates)               | 408,991          | 329,103              |                 | 173,305        | 502,408               | -93,418        |
| Personnel (national staff)          | 395,397          | 366,500              |                 |                | 366,500               | 28,897         |
| <b>Sub-Total</b>                    | <b>804,387</b>   | <b>695,603</b>       |                 | <b>173,305</b> | <b>868,908</b>        | <b>-64,521</b> |
| <u>GENERAL &amp; ADMINISTRATION</u> |                  |                      |                 |                |                       |                |
| Assessment/Monitoring/experts       | 3,333            | 15,480               |                 |                | 15,480                | -12,147        |
| Travel & related expenses           | 98,823           | 117,826              |                 |                | 117,826               | -19,002        |
| Information expenses                | 88,835           | 80,737               |                 |                | 80,737                | 8,098          |
| Admin./general expenses             | 226,213          | 240,984              |                 |                | 240,984               | -14,771        |
| External workshops & Seminars       | 744,858          | 189,305              |                 |                | 189,305               | 555,553        |
| <b>Sub-Total</b>                    | <b>1,162,063</b> | <b>644,332</b>       |                 |                | <b>644,332</b>        | <b>517,731</b> |
| <u>PROGRAMME SUPPORT</u>            |                  |                      |                 |                |                       |                |
| Programme management                | 190,828          | 122,748              |                 |                | 122,748               | 68,081         |
| Technical services                  | 57,192           | 36,751               |                 |                | 36,751                | 20,441         |
| Professional services               | 63,421           | 40,768               |                 |                | 40,768                | 22,652         |
| <b>Sub-Total</b>                    | <b>311,441</b>   | <b>200,267</b>       |                 |                | <b>200,267</b>        | <b>111,174</b> |
| Operational provisions              |                  | -35,365              |                 |                | -35,365               | 35,365         |
| Transfers to National Societies     |                  |                      |                 |                |                       |                |
| <b>TOTAL BUDGET</b>                 | <b>2,831,279</b> | <b>1,820,584</b>     |                 | <b>173,305</b> | <b>1,993,889</b>      | <b>837,390</b> |