

Appeal 2004



BOTSWANA

Appeal no. 01.12/2004

The International Federation's mission is to improve the lives of vulnerable people by mobilizing the power of humanity. The Federation is the world's largest humanitarian organization, and its millions of volunteers are active in over 180 countries. All international assistance to support vulnerable communities seeks to adhere to the Code of Conduct and the Humanitarian Charter and Minimum Standards in Disaster Response, according to the SPHERE Project.

This document reflects a range of programmes and activities to be implemented in 2004, and the related funding requirements. These are based upon the broader, multi-year framework of the Federation's Project Planning Process (PPP). The PPP products are either available through hyperlinks in the text¹, or can be requested through the respective regional department. For further information concerning programmes or operations in this or other countries or regions, please also access the Federation website at <http://www.ifrc.org>

Click on programme title or figures to go to the text or budget

Programme title	2004 in CHF
Strengthening the National Society	
Health and Care	228,385
Disaster Management	86,417
Organizational Development	408,214
Total	723,016²

Please note that objectives, expected results, and activities associated with the Humanitarian Values programme are included in the narrative of this appeal; the budget associated with these activities is integrated within other programme budgets. [<Click here to go to the text>](#)

¹ Identified by blue in the text.

² USD 543,009 or EUR 465,411.

National Context

Botswana is a landlocked country surrounded by Zambia, Zimbabwe, South Africa and Namibia. The country has a robust economy by African standards, heavily dependent on diamond mining. The country's economy was transformed after the discovery of diamonds in 1967.

Botswana has little arable land and thus suffers from a regular food production deficit. The country also suffers from the highest percentage of HIV/AIDS cases both on the continent and in the world. HIV prevalence rate has been increasing steadily every year, from 35.5% in 1999 to over 39% in 2002 (UNAIDS 2002), among adults between 15 – 49 years. UNAIDS estimates 330,000 persons living with HIV/AIDS (PLWHA) in Botswana in 2001. Food shortages and malnutrition are devastating to people living with HIV/AIDS and increases their vulnerability. As a result of the impact of HIV/AIDS upon the country, there are increased numbers of orphans and vulnerable children and consequently child-headed households.



The population of 1.7 million is largely concentrated in eastern Botswana, leaving vast tracts of Botswana with a sparse population. Despite the country's large reserves of foreign currency, a large part of the population lives below the poverty line. The most common disasters that Botswana people experience are drought and occasional floods. In addition, wild fires devastate the country every year due to the extensive dry areas of the Kalahari Desert.

The country also faces increased cases of malaria in certain districts. In the Chobe district, for example, the disease is the leading cause of morbidity and mortality among the local population. The effect of malaria on individuals and families is well-documented. Apart from unavoidable deaths, acute malaria causes absenteeism (up to 14 days per annum) among students and teachers in endemic areas. Up to 30% of school children are infected by malaria resulting in poor concentration in class. Economically, it affects the individual capacity to participate in food production and other economic activities. Among the very poor, up to 25% (WHO Fact Sheet 2002) of a family's income can be spent on treating malaria.

In addition, tuberculosis (TB) is another communicable disease that is present among the population throughout the country. This is an area of concern to both the government and humanitarian agencies, including the Red Cross.

Human development indicators:

Indicators	2001	2000
Population (millions)	1.7	1.5
Life expectancy at birth (years)	44.7	40.3
GDP per capita (PPP USD)	7,820	7,184
Population living below USD 1.00 per day (%)	23.5	33.3
Population living below USD 2.00 per day (%)	50.1	61.4
Adult literacy rate (% age 15 and above)	78.1	77.2
Persons living with HIV/AIDS, adults (%)	39 *	-
Orphans due to HIV/AIDS	69,000 *	-
Access to affordable essential drugs (%)	-	80-94 (1999)
Access to water and sanitation (%)	-	66-95
Malaria cases (per 100,000)	-	48,704
TB cases (per 100,000)	224	513 (1999)
Under-five mortality rate (per 1,000 live births)	110	101

Source: UNDP Human Development Reports 2002 and 2003; * UNAIDS 2002

PPP in this context refers to Purchasing Power Parity

Red Cross and Red Crescent Priorities

Movement³ Context:

The **Botswana Red Cross Society** was founded in 1948 as a branch of the British Red Cross. It was later established through a parliamentary act after independence in 1968. Botswana Red Cross has 24 divisions throughout the country with only 20% active divisions. The divisions need to revive to increase the national society presence in the district and sub-district levels. The priority support will be given to those districts with active projects.

The government of Botswana takes cognizance of the national society and its humanitarian work. To that effect, the national society receives government grants to pay salaries of some staff. The existing sources of funding come from the government, the Federation regional delegation, ICRC, UNHCR and from within the country through various income-generating initiatives such as office rentals. The latter is sufficient to support the core costs of the national society and salaries of staff that are not linked to any funded programme.

The Botswana Red Cross has not yet developed a Cooperation Agreement Strategy (CAS); the national society is still finalizing the strategic plan. With the support of the Federation Southern Africa Regional Delegation (Harare), CAS development – outlining focus areas and needs for donor support - will be done following the finalization of the strategic plan.

Currently the Federation is providing support to the national society in the areas of disaster preparedness and response, organizational development (OD), community-based health care and HIV/AIDS. The Botswana Red Cross collaborates with ICRC, the Federation, UNHCR and the Botswana government when implementing activities.

Primary support from the Movement and other agencies 2004 - 2007

Partner	Health	Relief	Disaster management	Humanitarian Values/ Representation	Organizational Development
ICRC				X	
Botswana government	X				X
Federation	X	X	X	X	X
UNHCR	X	X			

³ 'Movement' refers to the International Red Cross and Red Crescent Movement

National Society Strategy/Programme Priorities:

The Botswana Red Cross has established HIV/AIDS activities in Kanye, Moshupa and Good Hope districts focusing on youth peer education and for the most part providing home-based care in Chobe district. This programme is being implemented in collaboration with the Federation through the HIV/AIDS programme.

The Botswana Red Cross community-based rehabilitation programme is giving assistance to the disabled in the form of life skills to enhance their coping mechanisms and to improve their social well-being and dignity in the community. The national society runs two rehabilitation centres in the country and is supported by the government. In addition, the national society conducts outreach activities through this programme to reach other vulnerable people with disabilities and to enhance their HIV/AIDS awareness. The national society has been a major contributor to the provision of first aid training to the public and business community. Through the trained first aid focal persons, the national society intends to roll out its community-based first aid activities into all areas where the HIV/AIDS programme exists. Malaria/TB will be another focal area in the next four years. The project will focus primarily on community education and sensitization, promotion of insecticide-treated mosquito nets, promotion of early detection of malaria among individuals and early treatment.

At the same time, the national society will continue to work closely with UNHCR for the provision of care and support to the refugees in Dukwi refugee camp. The national society is an implementing partner in this venture and receives funding for operation from UNHCR and the government.

Disaster preparedness and response is another priority area; the national society will continue to strengthen its capacity to effectively respond to human and natural disasters that affect the nation, through establishment of early warning systems.

Promotion of humanitarian values among the public is cardinal and central. The national society will continue to work closely with the ICRC in dissemination of Red Cross and Red Crescent principles and International Humanitarian Law (IHL).

However, the national society is still struggling to put structures and systems in place. There is willingness and desire within the Botswana Red Cross to change the way it operates. The staff and management are ready to see this change process, and await support from internal and external partners to put it forward.

Alongside the change process, the national society needs to review its constitution and the national executive committee has to be put in place. The divisions throughout the country also have to be revitalized. This will involve vigorous recruitment of division members, volunteers and election of committee members; this should be addressed to enable the Botswana Red Cross to become a well-functioning national society. Organizational development issues are apparently the foremost priority to the Botswana Red Cross.

The Regional Delegation is mainly providing support and technical advice in the areas of organizational development, disaster response, health and HIV/AIDS. In the first two years, efforts will be concentrated in the area of organizational development to ensure a well functioning national society with the human and technical resources available to respond to the humanitarian needs in the country. During 2004–2007, the Federation will continue to focus on capacity building process of Botswana Red Cross to ensure that the national society has the adequate institutional capacity to respond to the enormous humanitarian needs in the country. Overall priority will be to scale up HIV/AIDS activities in order to reduce HIV/AIDS transmission rates and mitigate the impact of the disease in the country. Partnerships with other organizations will also be explored to ensure successful implementation of all programmes.

Strengthening the National Society

Health and Care

[<Click here to return to title page>](#)

Background and achievements/lessons to date

Community-based health care

Since early 1980's the Botswana Red Cross has implemented a community-based rehabilitation and health programme. The programme concentrates on the provision of training and guidance for home-based rehabilitation and care. Its aim is to improve the quality of life of people with disabilities so as to reach their potential and play a fulfilling role in the communities. The national society also oversees two rehabilitation centres, for disabled people, which run income-generating activities aiming at promoting self-reliance: the Stimulation Centre in Francis town and the Tlamelong Rehabilitation Centre in Tlokweng. The programme deals with both institutional and community-based services specifically for the needs of people with disabilities. The centres also provide vocational rehabilitation to physical disabled adults and stimulation for mentally disabled children. The two centres care for approximately 300 people with disabilities - including the children – per year. The national society will continue to seek support for this project in the next four years.

Through the community-based first aid, the national society intends to seek support to address Malaria in two districts, Chobe and the Northern district that are worst hit by the disease. The strategy will be training of community members on the simple definition and identification of the signs and symptoms of malaria. Community education on the affordable and appropriate preventive measures including the promotion and use of insecticide treated nets. Promotion of DOTS⁴ for TB treatment will be integrated in the approach. These activities will be implemented within the HIV/AIDS selected areas to promote integration so as maximize programme impact on the vulnerable communities.

HIV/AIDS

HIV/AIDS is the single most important challenge facing Botswana today. The country is experiencing one of the most severe HIV/AIDS situations in the region with a national adult prevalence rate of 39%. Botswana Red Cross has developed strategies and plans, based on Strategy 2010 and ARCHI⁵ 2010, for scaling up HIV/AIDS activities in the country. The national society commissioned baseline surveys, first in 2001 and then in 2003; the surveys were done with the assistance of the Federation. The purpose of the survey was to generate more information about the epidemic and to identify the key players in the fight against HIV/AIDS. The national society initiated an HIV/AIDS prevention project focusing on youth peer education in southern District. The project has so far trained 24 peer educators in Kanye district and surrounding villages, 40 youths in Moshupa and 30 youths in Dukwi refugee camp. In total the youth peer educators so far have reached 8,000 fellow youths. A Home Based Care Project was started in 2003 in Kasane – Chobe district with 13 care facilitators trained; this was part of the cross-border project with Zambia, Botswana and Namibia.

Goal: The general health of the vulnerable people in Botswana is improved through community-based health care.

Objective 1: Community-based health: The vulnerability of the people in five-targeted districts due to malaria, TB/ HIV/AIDS and the adverse effects of disability is reduced by the end of 2007.

Objective 2: HIV/AIDS: Transmission of HIV/AIDS is reduced among 30,000 youths, and 1,000 people living with HIV/AIDS and orphans and other vulnerable children are cared for and supported by the end of 2007.

⁴ DOTS – Directly observed treatment short course

⁵ ARCHI – African Red Cross and Red Crescent Health Initiative 2010 builds on its strength: a Red Cross and Red Crescent presence in each of 53 countries in Africa and, in all, more than 2 million volunteers. The overall goal of ARCHI 2010 is to make a major difference in the health of vulnerable people in Africa. (refer to <http://www.ifrc.org/WHAT/health/archi/>)

Expected results and related projects for these objectives:

Project title	Expected results	Activities
Community-based health	<ul style="list-style-type: none"> 800 disabled people rehabilitated into their communities by 2007. 	<ul style="list-style-type: none"> Identification of people with disabilities (PWD) Provision of care to PWD
HIV/AIDS	<ul style="list-style-type: none"> Community-based first aid (CBFA) is integrated in all HIV/AIDS projects by 2007. 1,000 PLWHA⁶ receive care and support through home-based care 	<ul style="list-style-type: none"> Adapting training curriculum Training of care facilitators/peer educators in CBFA Establish five HBC projects Train 200 care facilitators Provide 2,000 HBC kits Provide care and support to 1,000 clients Strengthen the existing HBC projects Identify and care for PLWHA Work with government, Programme Support Group (NGO), other non-governmental and community-based organizations Train care facilitators on TB/malaria, anti-retroviral treatment, PMTCT⁷ Improve access to anti-retroviral treatment Train care facilitators on DOTS for TB clients Sensitize pregnant women on PMTCT Provide 1,000 insecticide-treated nets
	<ul style="list-style-type: none"> 1,000 OVC receive psychological and social support 	<ul style="list-style-type: none"> Conduct OVC assessment in Kanye and Kasane OVC included in the baseline survey for Kgatleng and Tonota Provide psychological support to 200 OVCs in Support OVC Provide psychological support to 200 OVCs in Kasane, Kanye, Kgatleng and Tonota Facilitate material support to OVC from government and other organization
	<ul style="list-style-type: none"> Nutritional support to vulnerable clients and OVCs 	<ul style="list-style-type: none"> Establish gardens for 1,000 clients Provide 3,600 food parcels Network with the government home-based care programme
	<ul style="list-style-type: none"> Knowledge, attitudes, practices and behaviour of 30,000 youths and 50,000 adults is improved 	<ul style="list-style-type: none"> Train 600 youth peer educators Establish 40 Red Cross clubs Train 80 patrons (teachers) Conduct youth peer education Organize awareness campaigns
	<ul style="list-style-type: none"> Stigma and discrimination against PLWHA and OVC is reduced 	<ul style="list-style-type: none"> Conduct sensitization campaigns Develop anti stigma messages Formation of support groups and income generating Activities

<Click here to access the Logical Framework Planning Matrix document for Health and Care>

⁶ PLWHA – Persons living with HIV/AIDS

⁷ PMTCT – Prevention of mother-to-child transmission

Disaster Management

[<Click here to return to title page>](#)

Background and achievements/lessons to date

Over the years, the Botswana Red Cross responded to the needs of the most vulnerable communities affected by natural or man-made disasters. The national society responds to local disasters when these occur, floods and fires are the most prevalent hazards. At present, the national society supports the government and UNHCR in running health services in Dukwe refugee camp. The national society has established action teams in four districts, which are fully trained in community-based early warning systems. The action teams work in collaboration with government.

Following the Cyclone Eline floods in 2000, the national society was able to engage in a rehabilitation programme which assisted in building 77 houses for the flood victims in four villages; the Regional Delegation assisted and supported this intervention. The national society also developed contingency plans for the possible cross-border population movement during the run-up to parliamentary and presidential elections in Zimbabwe in 2000 and 2002, respectively; the Regional Delegation supported this effort.

The Botswana Red Cross has also trained a substantial number of first aid volunteers. The challenge is to strengthen volunteer management along with resource mobilization development under the organizational development programme to ensure quality volunteers are recruited and retained.

The national society has neither a disaster management policy nor a plan to guide its disaster preparedness and response activities. To address this, the national society will also focus on the development of a disaster management policy. The activities in this plan of action will be implemented within the HIV/AIDS project areas. The volunteers in the districts will benefit from the planned training activities.

Goal: Vulnerability of the communities is reduced through implementation of disaster management interventions.

Objective: Botswana Red Cross capacity in disaster management is enhanced through capacity building and community empowerment.

Expected results and related projects for this objective :

Expected results	Activities
Botswana Red Cross capacity in disaster management is strengthened and exhibiting minimum standards of well-prepared national society.	<ul style="list-style-type: none">• Conduct VCA (Vulnerability and Capacity Assessment)• Staff and volunteers trained in DM• Establish community based disaster management initiatives
Improved national society disaster preparedness and response capacity through training of staff and volunteers and community involvement	<ul style="list-style-type: none">• Train staff in disaster management• Mobilize communities• Conduct VCA• Promote SPHERE standards
Botswana Red Cross collaborates with government to maintain community-based early warning systems (CBEWS) and operations benefiting the vulnerable communities	<ul style="list-style-type: none">• Develop and establish a CBEWS and situation monitoring system for national potential hazards with financial and technical support from regional delegation
Improved refugee services in health care are achieved through the use of SPHERE standards	<ul style="list-style-type: none">• Establish standards• Strengthen the standards

[<Click here to access the Logical Framework Planning Matrix document for Disaster Management>](#)

Humanitarian Values

[<Click here to return to title page>](#)

Background and achievements/lessons to date

The Botswana Red Cross is promoting Red Cross Principles through activities in schools and to the general public. The national society also produces a quarterly newsletter which is circulated to its partners within and outside the country. The newsletter provides opportunities to profile the Botswana Red Cross programmes and activities to the public. Calendars containing information about the movement and the national society are also produced every year.

The Botswana Red Cross promotes the Movement's Fundamental Principles and conducts tracing activities, both supported by ICRC. The national society is also conducting a campaign against misuse of the Red Cross emblem; high-level discussions have been held with the President's office to promote this initiative.

Goal: The Fundamental Principles of the Movement and humanitarian values are promoted and understood by the public.

Objective: Botswana Red Cross programmes and activities are promoted.

Expected results and related projects for this objective :

Expected results	Activities
• Educational materials produced	• Produce quarterly newsletter and annual calendars
• Dissemination of Red Cross principles conducted throughout	• Conduct 20 dissemination workshops for staff, volunteers, schools and public • Celebrate World Red Cross Day
• Promotion of International Humanitarian Law conducted among uniformed forces	• Conduct sensitization sessions for uniformed forces
• Campaign against misuse of the Red Cross emblem launched	• Lobby with the government for support • Organize education campaign to the public
• Tracing activities conducted	• Collect and distribute Red Cross message and tracing requests

[<Click here to access the Logical Framework Planning Matrix document for Humanitarian Values>](#)

Organizational Development

[<Click here to return to title page>](#)

Background and achievements/lessons to date

The overall goal of the Botswana Red Cross organizational development programme is to advocate for structures and to enable the Society, at all times, to be able to mobilize volunteers and members and to promote harmonization amongst the vulnerable communities.

It is quite evident that due to various reasons including socio-economic, political, cultural and environmental, the spirit of volunteering has declined in the country. In Botswana, most of the division and branch members and volunteers are inactive, as they demand remunerations/incentives. Governance/management commitment is fully required to ensure establishment and maintenance of issues pertaining to organizational development.

The Regional Delegation OD department assisted the national society to develop a draft strategic plan for 2002-2006. A vulnerability and capacity assessment (VCA) was conducted in collaboration with the disaster management programme to comprehend the needs of the communities. In the next four years, the national society will concentrate on the establishment of statutes, putting the executive committee in place, and reactivating its branches. With regard to detailed activities for 2004, the national society will develop an implementation plan in consultation with the Regional Delegation OD department.

Botswana; Annual Appeal no. 01.12/2004

Goal: The Botswana Red Cross has improved in terms of foundation, capacity and performance through implementing the Federation's characteristics of a well-functioning national society.

Objective: The national society's institutional capacity and its progress towards operating a well-functioning national society is enhanced and programmes are responsive to local vulnerabilities.

Expected results and related projects for this objective :

Expected results	Activities
<ul style="list-style-type: none">• National society structures established	<ul style="list-style-type: none">• Mobilize divisions• Recruit members• Prepare for elections at divisional and national level
<ul style="list-style-type: none">• National society has a legal foundation and capacity to effectively support its activities	<ul style="list-style-type: none">• Review Botswana Red Cross Act• Review, update and adopt the national society constitution• Create a monitoring system
<ul style="list-style-type: none">• The Botswana Red Cross staff and volunteers have improved capacity in project management	<ul style="list-style-type: none">• Conduct an assessment• Monitor and evaluate programme impact• Train staff and volunteers in PPP (Project Planning Process)
<ul style="list-style-type: none">• Information management system at national and division level is enhanced	<ul style="list-style-type: none">• Conduct computer-based training• Develop information strategy
<ul style="list-style-type: none">• Botswana Red Cross financial resource development is improved and strengthened	<ul style="list-style-type: none">• Provide staff and volunteers with training in fundraising
<ul style="list-style-type: none">• A good volunteer management system is in place	<ul style="list-style-type: none">• Develop volunteer policy• Implement the policy• Monitor and evaluate the policy
<ul style="list-style-type: none">• Youth and gender activities are promoted	<ul style="list-style-type: none">• Develop youth policy• Establish youths commission• Engage youths in HIV/AIDS activities and community campaigns• Integrate OVCs into youth programmes• Conduct an exchange programme and youth camp.• Incorporate gender issues into all programmes

<Click here to access the Logical Framework Planning Matrix document for Organizational Development>

For further information please contact:

- *Norah Mophabane, Secretary General, Botswana Red Cross Society, Gaborone; Email brcs@info.bw; Phone 267 352 465; Fax 267 312 352*
- *Alasan Senghore, Federation Head of Regional Delegation, Harare; Email ifrczw02@ifrc.org; Phone 263 4 705 1667; Fax 263 4 708 784*
- *Richard Hunlédé, Federation Regional Officer, Geneva; Email richard.hunlede@ifrc.org; Phone 41 22 730 43 14; Fax 41 22 733 0395*

<Budget below - Click here to return to title page>

BUDGET 2004

PROGRAMME BUDGETS SUMMARY

Appeal no.: 01.12/2004

Name: Botswana

PROGRAMME:

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	Emergency	Total
	CHF	CHF	CHF	CHF	CHF	CHF	CHF
Shelter & construction	0	0	0	0	0	0	0
Clothing & textiles	10,350	0	0	0	0	0	10,350
Food	9,300	0	0	0	0	0	9,300
Seeds & plants	1,200	10,000	0	0	0	0	11,200
Water & Sanitation	0	0	0	0	0	0	0
Medical & first aid	9,000	0	0	0	0	0	9,000
Teaching materials	6,600	0	0	4,000	0	0	10,600
Utensils & tools	0	5,000	0	0	0	0	5,000
Other relief supplies	0	0	0	0	0	0	0
SUPPLIES	36,450	15,000	0	4,000	0	0	55,450
Land & Buildings	0	0	0	0	0	0	0
Vehicles	0	0	0	0	0	0	0
Computers & telecom	0	0	0	4,600	0	0	4,600
Medical equipment	0	0	0	0	0	0	0
Other capital exp.	0	0	0	0	0	0	0
CAPITAL EXPENSES	0	0	0	4,600	0	0	4,600
Warehouse & Distribution	0	0	0	0	0	0	0
Transport & Vehicules	9,600	13,000	0	24,080	0	0	46,680
TRANSPORT & STORAGE	9,600	13,000	0	24,080	0	0	46,680
Programme Support	14,845	5,617	0	26,534	0	0	46,996
PROGRAMME SUPPORT	14,845	5,617	0	26,534	0	0	46,996
Personnel-delegates	0	0	0	144,000	0	0	144,000
Personnel-national staff	88,800	0	0	57,600	0	0	146,400
Consultants	6,000	0	0	6,000	0	0	12,000
PERSONNEL	94,800	0	0	207,600	0	0	302,400
W/shops & Training	47,000	36,000	0	89,000	0	0	172,000
WORKSHOPS & TRAINING	47,000	36,000	0	89,000	0	0	172,000
Travel & related expenses	9,290	4,800	0	13,200	0	0	27,290
Information	2,000	0	0	0	0	0	2,000
Other General costs	14,400	12,000	0	39,200	0	0	65,600
GENERAL EXPENSES	25,690	16,800	0	52,400	0	0	94,890
TOTAL BUDGET:	228,385	86,417	0	408,214	0	0	723,016