

Appeal 2004



SOUTH AFRICA

Appeal no. 01.17/2004

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	1,566,004
Disaster Management	608,829
Organizational Development	1,151,604
Total	3,326,436²

Please note that objectives, expected results, and activities associated with the Coordination, Cooperation and Strategic Partnerships 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 2, 498, 262 or EUR 2, 141, 253.

National Context

Since the democratic election in 1994 the government of national unity has committed itself to effectively address the problems of poverty and the inequality evident in almost all aspects of South African society. To achieve this, the economy has to be placed on a path of sustainable growth. An integrated, coherent socio-economic policy framework namely the reconstruction and development programme (RDP) was instituted. The six basic principles of the RDP are: that it would be an integrated sustainable programme that harnessed all the country's resources; it is people-driven; it places high priority on peace and security; it supports nation building; a focus on building infrastructure such as electricity, water, telecommunications, transport, education, training for all people; and thorough democratization of South Africa, the state and



civil society. The urgent need for the RDP to get underway was highlighted by the results of the 1996 census; it indicated that South African history was dominated by colonialism, racism, apartheid, sexism and repressive labour policies had devastating long-term effects on the population's well-being. The 1996 census indicated that of a total population of 40.5 million (2002: 45.2 million):

- 20% of the adult population has no formal education,
- 34% (2002: 29%) of the population are unemployed,
- 54% of the population are urbanized,
- 57% (2000: 73%) has formal housing,
- 18% (2000: 10%) live in traditional dwellings,
- 16% (2000: 14%) live in informal settlements (shacks),
- 55% (1999: 61%) no running water inside their homes
- More than half the population uses electricity to light their homes, 29% uses candles and 13% paraffin.
- There are huge differences between income groups, with 51% of South Africans earning less than USD 200 per month and only 14% earning over USD 1,000 per month.

The HIV infection rate of women attending public antenatal clinics in 2001 was 25% and as high as 35% in KwaZulu Natal. At the beginning of August 2003 the South African government authorized the development of an operational plan for rolling out anti-retroviral (ARV) drugs to its population. The situation, which had been perceived by many as inflexibility of the government, has now enabled effective response to the pandemic. The Public Health Association of South Africa estimates that currently the country suffers from over 600 AIDS related deaths per day, the highest cause of death in the country. There are currently about five million people infected with HIV in South Africa (the highest in the world) and the projections suggest that this figure will rise to between seven and nine million by 2010. There are over 600,000 maternal orphans in the country; this will increase to about 1.5 million by 2007. Life expectancy will drop from 55 to about 40 by the year 2010. The **Ouagadougou Declaration** and ARCHI³ 2010 have highlighted the determination of African national societies and others to meet this challenge.

³ 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/>)

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Other challenges facing South Africa include land redistribution, a long-term vision for education, poverty, crime, struggling health services, high unemployment amongst the least educated citizens and ever growing separation between the poor and the wealthy (Statistics South Africa 2001: similarly to Brazil, South Africa has one of the biggest inequality gaps between rich and poor in the world).

Whilst South Africa is regarded as one of the main engines for African development, there is the enigma that it is unable to provide basic services for the majority of its people. The Department of Social Development makes monthly payments to 3.8 million adults (elderly and disability grants) and to 3.4 million children (child support grant). The payment of grants is the South Africa government's biggest poverty alleviation programme, but whilst vital for the recipients, it does not take the country forward towards sustainability. The government is also implementing an integrated food security and nutrition programme to provide certain relief measures to vulnerable groups who cannot afford adequate and nutritious food due to poverty and rising food prices.

Human development indicators:

Indicators	South Africa	Sub-Saharan Africa
Life expectancy at birth (years) 2001	50.9	46.5
Adult literacy rate (% 15 and above) 2001	85.6	62.4
Adult literacy rate (female as % of male) 2001	98	77
Combined primary, secondary and tertiary gross enrolment ratio (%) 2000/01	78	44
GDP per capita (PPP USD) 2001	11,290	1,831
Ratio of richest 10% to poorest 10% 1995	65.1	~
People living with HIV/AIDS, adults (% age 15-49) 2001	20.1	9
Children (0-14 years) living with HIV/AIDS 2001	250,000	2,600,000
Probability at birth of not surviving to age 40 2000-05 (%)	44.9	~

Source: UNDP Human Development Report 2003

PPP in this context refers to Purchasing Power Parity

The Human Development Index of South Africa has changed as follows - 1975: 0.649; 1985: 0.683; 1995: 0.724; 2000: 0.695. The country was ranked 107 in 2000 and 111 in 2003 out of 175 countries.

South Africa faces many of the social and environmental risks common to the Southern Africa region: drought and floods, poverty through lack of education and infrastructure, overcrowded living conditions and the accompanying township fires, the likelihood of mass population movements both due to political and economic reasons, low resistance to diseases such as cholera, HIV/AIDS and TB⁴ in particular, and fragile democratic institutions and traditions.

Red Cross and Red Crescent Priorities

Movement⁵ Context:

The Movement recognises that this region is like no others, neither culturally, politically nor environmentally. These challenges are however not insurmountable. National Red Cross Societies in the region and the Movement are playing an increasing role, having committed themselves to addressing the needs of the most vulnerable.

The Strategy 2010⁶ priorities require that new mechanisms and systems be put in place throughout the Movement so that a shift towards longer-term partnerships and funding is undertaken and that a new capacity-building culture is developed alongside the strong emergency-response culture that already

⁴ TB - Tuberculosis

⁵ 'Movement' refers to the International Red Cross and Red Crescent Movement

⁶ Strategy 2010 is the International Federation's guiding framework for the decade 2000 to 2010. This overall strategy identifies the following four CORE areas as the cornerstones upon which the International Federation will continue to build its collective expertise and reputation: humanitarian values; disaster preparedness; disaster response; and health and care in the community. Refer to <http://www.ifrc.org/wlb/strategy.asp>

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exists. It provides vision and guidance through a common goal: 'to improve the lives of vulnerable people by mobilizing the power of humanity'.

Working relationships among the South African Red Cross, the Federation, ICRC, British Red Cross, Finnish Red Cross, Icelandic Red Cross and Norwegian Red Cross have continued to develop positively. In addition to the government of the Republic of South Africa (RSA) and other South African Red Cross partners, new in-country stakeholders have been approached. The Danish Red Cross, German Red Cross, Swedish Red Cross and Swiss Red Cross have expressed interest to explore partnerships with the South African Red Cross in the future.

Over the past year, the South African Red Cross has received assistance from the Federation, the ICRC, and partner national societies in the following areas:

- Financial support for capacity building, organizational development, tracing, dissemination, disaster management and HIV/AIDS programming targeting youth in particular;
- Management of the soft loan agreement which is in support of the South African Red Cross recovery plan 1999-2000; and,
- Technical support and advice through the in-country representatives of the Federation and the bilateral delegates from the British Red Cross and Icelandic Red Cross.

The South African Red Cross has put re-organization of the national society as the priority after the appointment of the new secretary general at the beginning of 2003. There has not been sufficient time yet to initiate a dynamic Cooperation Agreement Strategy (CAS) process. The issue was initially discussed with the partners in the SAPRCS⁷ South African Red Cross partnership meeting in June 2003. Now that the national society's five-year development plan 2003-2007 has been finalized, a process of negotiating and drafting the CAS is one of the priorities for 2004. This process will define the support and seek commitment from the Movement partners and possibly from the government for South African Red Cross long-term programmes. However, project agreement within CAS framework is already used systematically by the national society and the priority areas identified for further development are also recognized by its partners. The table below summarizes the steps to be taken for development of CAS over the next five years. These steps were discussed in the partnership meeting in June 2003. The next step is to develop an implementation timeframe of the process in consultation with all partners concerned.

Steps to be taken for development of the Cooperation Agreement Strategy (CAS) 2004-2008:

1	Awareness process of CAS within South African Red Cross structures
2	Development of time table and plan of action for facilitating CAS (with partners)
3	Preparing/reviewing national context
4	Reviewing national society five-year development plan, revising if required
5	Determining and ensuring good partner objectives and support (mapping)
6	Ensuring coherence and coordination of all support: partnership coordination meeting
7	Compilation of all information into CAS document format
8	Approval of CAS
9	Review support to Federation Appeal: partners meeting
10	Monitoring review

National Society Strategy/Programme Priorities:

The **South African Red Cross** is focussing its efforts on the change process that has been initiated by the newly appointed secretary general. The national society is making encouraging progress and is well under way of becoming a well-functioning national society. South African Red Cross is determined to become more responsive to local-level vulnerability. Given the high HIV/AIDS prevalence rate in South Africa, the national society is committed to scaling-up its HIV/AIDS activities to be able to respond to the enormous humanitarian needs in the country. At the same time, it recognizes that it is vitally important that staff, volunteers and the public not only know about the Fundamental Principles of the Movement but that these result in behavioural changes. The national society believes that through commitment and focused efforts by all stakeholders, the South African Red Cross can be transformed effectively and improve the lives of the vulnerable people in the country.

⁷ SAPRCS – South African Partnership of Red Cross Societies

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The South African Red Cross national office is currently based in Cape Town; the implementing structure consists of five regional offices, 29 branches and 80 local committees along with over 10,000 active volunteers. The national society works in coordination with the local and provincial government emergency and disaster structures. The national society is represented at national level on the National Disaster Management Committee. The South African government recognises the need to work in partnership with non-governmental organizations (NGOs) in humanitarian works. A new disaster management bill which highlighted the role of volunteers in disasters was passed in 2003. South African Red Cross is currently liaising with the government to formalize a role for the national society in terms of the new legislation.

The national society has gone through a long-term strategic planning process since July 2001 involving all its structures at the national, regional, branch and local committee level. As a result, the South African Red Cross five-year development plan 2003-2007 was finalized and shared with major internal and external stakeholders. Based on this plan, a national-level annual plan of action was further developed for 2003 underlining newly identified priorities of the society. The five-year development plan focuses on the four core areas recommended by the Federation, as articulated in the table below.

Core Area	Programmes/Projects within Core Areas	Current/Anticipated Partners
Disaster Management	Disaster Preparedness	ICRC, British Red Cross/DFID and other partner national societies (to be identified)
	Disaster response	Government of the RSA ⁸ , partner national societies (to be identified)
	Food security	Federation
	Tracing service	ICRC
Humanitarian values	Advocacy, communications and external relations (ACE) Dissemination Exploring Humanitarian Values and Humanitarian Law with Youths at Risk	Federation ICRC ICRC and/or ESF
Health and care in the community	HIV/AIDS	Federation, ICRC, British, Finnish, German, Icelandic and Norwegian Red Cross Societies, Belgium Embassy, government of the RSA
	Community first aid	To be identified, previously integrated with HIV/AIDS programme
	Community health education and promotion	To be identified
Organizational development	Governance and management development	Federation with the support from the Capacity Building Fund, Danish, Finnish, Icelandic and Norwegian Red Cross, ICRC
	Administration and financial management development	Federation CBF, Norwegian and Swedish Red Cross
	Human resources development	Swiss Red Cross

⁸ RSA – Republic of South Africa

Core Area	Programmes/Projects within Core Areas	Current/Anticipated Partners
	Advocacy, communications, marketing, resource mobilization and fundraising development	Norwegian Red Cross, Federation with the support from Finnish Red Cross and other partner societies (to be identified)
	Volunteers management and branch development	Norwegian Red Cross, Federation with the support from Finnish Red Cross and other partner societies (to be identified)
	Empowerment of youth, focus on young women in leadership	To be identified

In order to clearly define and justify the development needs of the national society during the ongoing transformation period, the South African Red Cross conducted a thorough self-assessment in 2002 at the national, regional, branch and local committee level with support from the Federation and the Namibian Red Cross. Plans of action were developed for all levels to implement the recommendations. The self-assessment is considered by the South African Red Cross as an important tool to improve organizational development readiness and responsiveness and to revitalize the monitoring, accountability and evaluation process of the national society. In addition to the self-assessment process, the South African Red Cross conducted five in-depth institutional assessments in key areas requiring immediate development. Based on the assessment recommendations, it is clear that capacity building and development of organization at all levels, with focus on governance and management, administration and financial management, human resources, resource mobilization/fundraising, youth leaders and young women as well as volunteer and branch management, is a priority as mentioned in the table above.

Strengthening the National Society

Since August 2002, the Federation has worked together with the South African Red Cross on three major areas:

- 1) National society strengthening;
- 2) Federation coordination amongst partner national societies; and,
- 3) International representation and advocacy of the Federation in South Africa.

These efforts, reflecting the Federation's Strategy for Change, will continue in the following years to support the South African Red Cross to become a well-functioning national society capable of delivering services to many more vulnerable people, mobilizing support and carrying out its humanitarian mission.

Health and Care

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Background and achievements/lessons to date

In a country with the highest number of people living HIV/AIDS in the world, the health and care programme is a high priority to the South African Red Cross. The five-year development plan 2003-2007 of the national society reflects a need for strong emphasis on HIV/AIDS prevention, care and support and anti-stigma strategies targeting the most vulnerable communities.

The national society has been involved in the provision of home-based care services for decades, previously mostly on a pay-for-care basis. HIV/AIDS awareness and education activities began in 1993 followed by the launch of the first home-based care project for people with HIV/AIDS in Cape Town later in the year. A number of similar projects were implemented in other areas but were not able to be sustained due to lack of financial support. In support of the Ouagadougou Declaration 2000 for African national societies to scale up HIV/AIDS activities, the South African Red Cross implemented its national HIV/AIDS community home-based care project in December 2000. Other health initiatives have been integrated into the project including health education and community-based first aid. A national youth HIV/AIDS peer education project was also implemented in October 2002.

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The national HIV/AIDS community home-based care (CHBC) project has been implemented in seven of the nine provinces in South Africa. Over 108,000 people benefited from the health education activities and over 17,000 received basic community first aid education during the period 2002-2003. Currently more than 5,500 clients and approximately 1,700 orphans and vulnerable children receive home-based care and support. The project continues to improve through lessons learnt and technical support provided by a bilateral health delegate. However, the magnitude of the problem, levels of poverty and limited community resources continue to bring challenges to the project. The project is currently supported by 120 trained CHBC facilitators and 490 active trained volunteer caregivers. A number of branches have strengthened their capacity through the introduction of the project.

The peer education project is still relatively new. However, steady progress has been made and 110 peer educators are providing peer education based on the "Together we can" training course and the project has provided an avenue of activity for the South African Red Cross youths while rebuilding their membership.

In response to a major cholera outbreak in the KwaZulu Natal province in 2001, a water-sanitation project was implemented in the province with focus on education and construction of boreholes and water pumps and pit latrines. Construction activities came to an end in April 2003 but health education and promotion continues to be the focus, though on a smaller scale. A number of community committees were established to continue the education activities, pump maintenance and providing pit latrine construction advice to the communities.

The majority of funding for the projects has come from Movement partner national societies. The South African Red Cross has also received financial, material and technical support from the government, foreign missions, international aid agencies, educational institutions, businesses and NGOs.

The health and care programme for 2004-2007 will establish separate projects for community health education and promotion and community first aid to extend health education and community first aid activities to areas beyond the HIV/AIDS CHBC projects. HIV/AIDS activities will, in addition to existing activities, place greater emphasis on psychosocial support for the growing number of orphans and vulnerable children, the development of an anti-stigma campaign and improving the psychological support for the project facilitators and volunteers. The South African government is in the planning phase of rolling out its anti-retroviral drug programme and the South African Red Cross needs to position itself to assist the government in reaching the most vulnerable communities through its existing HIV/AIDS project structures of facilitators and volunteers. Whilst the water-sanitation project is phasing out, health education and promotion activities will continue to focus on health issues relevant to local communities such as cholera, water and sanitation and malaria.

Goal: There is a reduction in the transmission of HIV and incidence of disease, and the quality of life of people infected and affected by HIV/AIDS and disease is improved.

Objective: The capacity of the national society to provide health and HIV/AIDS education and care and support to the most vulnerable communities, particularly those affected by HIV/AIDS, is increased during the period 2004-2007.

Expected results and related projects for this objective:

Project title	Expected result(s)
1. HIV/AIDS	The knowledge of the most vulnerable communities, particularly the youth, is improved on HIV/AIDS, STIs⁹ and TB and methods of prevention <ul style="list-style-type: none">• CHBC facilitators and volunteers are trained in HIV/AIDS and STIs education• Health education guides/ toolkits are developed and made available for use by project staff and volunteers• Communities receive education on HIV/AIDS and STIs• Peer Educators are trained• Youths in the age group 13-25 receive HIV/AIDS peer education – "Together We Can" course• Male and female condoms are distributed

⁹ STI - Sexually transmitted infections

Project title	Expected result(s)
	<p>Voluntary counselling and testing (VCT) and the prevention of mother-to-child transmission (PMTCT) of HIV infection are promoted</p> <ul style="list-style-type: none"> • Pregnant women are counselled and referred to PMTCT programmes and receive post-natal support • CHBC facilitators receive training in counselling for VCT • Community members are counselled and referred to VCT services • Lay counsellors receive VCT lay counselling training and provide pre- and post-test counselling in VCT sites <p>Care and support to people infected and affected by HIV/AIDS and other diseases is improved</p> <ul style="list-style-type: none"> • CHBC facilitators and volunteers are trained in CHBC and counselling • People living with HIV/AIDS and their families receive care and support including supplementary food • Support groups are established • Clients and their families benefit from food gardens and income-generating projects • Clients with TB are supported with DOTS (directly observed treatment short-course) • Clients who are receiving anti-retroviral treatment receive adherence support • 40% of clients receive disability grants by the end of 2007 • Psycho-social support is provided to project staff and volunteers <p>The psycho socio-economic conditions of orphans and other vulnerable children (OVC) are improved</p> <ul style="list-style-type: none"> • CHBC facilitators are trained in psychosocial support for OVCs • OVCs receive support • 30% of OVCs are fostered or adopted • OVCs are assisted in gaining access to schools through direct interventions with the school • OVCs and their carers receive HBC support • OVCs receive government financial support (grants) • Community day crèches for OVCs are established, running and supported • CHBC facilitators are trained as trainers in the memory box project. • Clients use the memory box <p>Stigmatization of HIV/AIDS and discrimination against people living with HIV/AIDS is reduced</p> <ul style="list-style-type: none"> • CHBC facilitators and project coordinators receive training on legal issues relating to HIV/AIDS • Guidelines for HIV/AIDS advocacy for use by CHBC facilitators are developed and facilitators are trained on these guidelines • An anti-stigma campaign is developed for 2005 during 2004 • South African Red Cross volunteer “advocates” are recruited and trained in stigma and advocacy. • Meetings are organised by the volunteer “advocates” with government, churches, community leaders and other relevant role -players to advocate for decreasing HIV stigmatization • All those receiving HIV/AIDS and peer education are informed on stigmatisation issues • Clients are supported in disclosure and in cases of discrimination • All South African Red Cross staff and volunteers are educated on HIV/AIDS stigma issues
<p>2. Community health education and promotion</p>	<p>Vulnerable communities are educated on interventions to reduce health hazards and health related problems</p> <ul style="list-style-type: none"> • Key health issues affecting targeted communities are identified (including water and sanitation, cholera, malaria and other diseases). • Health education IEC (Information, Education and Communication) materials and volunteer toolkits are developed and produced. • Volunteers receive training on use of toolkits and how to conduct education in communities. • Community members receive health education and promotion. • Communities are mobilized to identify and reduce health risks/hazards. • Trained volunteers are integrated into disaster and health programmes.

Project title	Expected result(s)
3. Community First Aid	<p>Vulnerable communities have the knowledge to take preventative action and respond to health problems and injuries reducing suffering and death</p> <ul style="list-style-type: none"> • Staff and volunteers are trained to train community members in community first aid • Community first aid training manuals are translated into three local African languages. • Community members are trained in community first aid. • Community members are able to take preventative action and respond to health risks and injuries. • Trained community members are integrated into South African Red Cross disaster and Health programmes.

Click below to access the Logical Framework Planning Matrix document for:

<HIV/AIDS> <Community First Aid>

<Community Health Education and Promotion>

Disaster Management

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Background and achievements/lessons to date

The South African Red Cross has been involved with disaster management activities since its establishment in 1896. Disaster management remains a core programme in the South African Red Cross and the five-year development plan 2003-2007 of the national society aims at improving existing capacity and expanding it to be able to be more effective in disaster management over a wider area of South Africa.

Over the past few years, the South African Red Cross has been involved in various disaster interventions and through them gained valuable experience and capacity. These interventions include the many fires, floods and extreme weather conditions that occur on a regular basis in the large squatter camp townships prevalent in South Africa, Cyclone Eline in 2000, the cholera outbreak in KwaZulu Natal in 2001 and the contingency planning for the possibility of an influx of refugees from Zimbabwe and refugee camp management 2002/2003.

The national society experienced difficulties to secure funding for disaster preparedness and mitigation activities although donor response during times of disaster is usually good. The South African Red Cross works closely with government, mostly at district level, and is included in their disaster response plans in some districts. This cooperation needs to be expanded to many more districts and to provincial and national levels. A new Disaster Management Act was passed at the end of 2002 and this is gradually being implemented throughout the government structures. The Act defines various roles and responsibilities of government and partners and recognizes the importance of utilizing volunteers. The South African Red Cross therefore has the challenge of ensuring that it is included as a partner to government in line with the Act.

The South African Red Cross capacity has improved significantly over the past year in terms of training of staff and volunteers:

- Three staff participated in RDRT (Regional Disaster Response Team) training;
- One staff participated in FACT (Field Assessment Coordination Team) training;
- Two staff participated in HELP (Health Emergencies in Large Populations) training;
- Three staff participated in VCA (Vulnerability and Capacity Assessment) training; and,
- 26 staff and volunteers attended disaster management training in South Africa, held by the Federation.

The government recently appointed South African Red Cross to distribute emergency relief and train community members in the provinces of Mpumalanga, Limpopo and the Eastern Cape.

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A tracing officer is employed at the national office to coordinate the tracing function and a number of staff and volunteers have been trained in the provinces to assist with tracing activities. These activities are fully funded by the ICRC.

The focus for disaster preparedness and response for the next four years will be to conduct VCA at all branches, build capacity at branches, establish disaster response teams (at branch, provincial and national levels) and response plans, integrate with the government's local, provincial and national disaster response plans, train additional staff and volunteers in basic and community disaster management and conduct community disaster awareness education.

Goal: The vulnerability of communities at risk to disasters is reduced.

Objective: The capacity of the South African Red Cross to be prepared for and to respond effectively to disasters is increased.

Expected results and related projects for this objective :

Project title	Expected result(s)
Disaster Preparedness and response	The vulnerability of communities is reduced and their capacity to deal with disasters improved. <ul style="list-style-type: none">• VCAs are carried out at branch and provincial levels.• Local committee members and community members receive community disaster management training• Community members receive IEC material on disaster prevention and response• Trained community members are integrated into South African Red Cross disaster response plans
	South African Red Cross staff and volunteers are trained in disaster management <ul style="list-style-type: none">• Staff and volunteers are trained in basic disaster management.• Staff and volunteers receive training in VCA. The capacity of South African Red Cross to respond to disasters is strengthened. <ul style="list-style-type: none">• Disaster management units are in place in all branches• Disaster response teams are established in all provinces and nationally.• Staff and volunteers are able to implement VCA.• Disaster response plans are developed at branch, provincial and national levels.• South African Red Cross is integrated into government disaster management plans at district, provincial and national levels.
	South African Red Cross is able to respond to disasters in minimum time. <ul style="list-style-type: none">• Disaster management human and technical resources are accessible when needed.• Disaster stores are appropriately stocked with supplies/equipment in close proximity to the most vulnerable areas.• Adequate disaster relief is efficiently distributed in a timely manner.

<Click here to access the Logical Framework Planning Matrix document for Disaster Preparedness and Response>

Organizational Development

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Background and achievements/lessons to date

Requested by the national society, the Federation established a country office in South Africa in August 2002 and appointed a Federation representative based in Cape Town to work along the national society governance and management by providing guidance and advice on strategic direction, Red Cross policy formulation and implementation. Special emphasis was put to assist the national society through its transition towards a well-functioning national society with a presence throughout the country, delivering services to vulnerable people in accordance with the Movement principles.

The South African Red Cross believes that effective and systematic capacity building is the key to success for the national society. This needs to be established through a systematic organisational development process including financial resource development, human resource development and effective South African Red Cross programmes addressing the needs of the most vulnerable. Organizational Development (OD) includes the issues of identity and functions (mission, legal base and constituency) and governance and organisation (structure, systems and procedures), as stated in the Federation 'characteristics of a well-functioning national society'.

The national society is not complacent and recognises that the programme expansion planned over the next four years will present it with new challenges that must be addressed through capacity building at both internal and external levels. It will be necessary to clearly separate governance and management through the revised statutes and strengthen them to ensure that core competencies are in place and sustainable. South African Red Cross calls on partners and donors to continue supporting it in this area and assures them that wherever possible internal capacity building will be addressed through service delivery programmes.

The South African Red Cross entered into a new era following the appointment of the new secretary general at the beginning of the year. The planned change process has commenced, which addresses the priority needs of the national society. The new leadership and management have brought new hope for a realistic and thoroughly planned transformation process of the national society which has struggled for the past several years. The atmosphere and mindset is slowly changing among the membership and motivation clearly increases as soon as governance, management, staff and volunteers can witness tangible results. The challenges are immense and cannot be addressed at the same time. The new management has chosen a systematic, well planned step-by-step approach and the national society needs to be encouraged to take adequate time for putting systems and procedures in place to implement the change process. The main focus during the past one year has been to analyse the overall situation and status of the national society by continuing the self-assessment process and conducting five in-depth assessments related to the development of the organisation. Publicity and visibility has also been addressed by initiating better visibility of the national society's buildings and vehicles and articles in the local newspapers. Providing national training in this sector in relation to improved partnerships and networking also highlighted planning and reporting. Overall, the national society is leaping ahead to become a well-functioning national society and a role model for national societies in the southern Africa region.

The Federation support in this process has added value in terms of a systematic step-by-step approach, assisting the national society in addressing its priority needs. For the first time ever, South African Red Cross was included in the Federation's annual global appeal in 2002 and is therefore learning gradually about the Federation systems, procedures, guidelines and policies. By working together, the national society has learnt more about its role as a member of the Movement and the Federation and has actively taken up its role. Current partners are supportive of the transformation process and the government of the RSA is clearly interested in supporting its development and its role as an auxiliary to the government in South Africa. The overall aim of the ongoing transformation process is to strengthen the national society foundation, capacity and performance to become a well functioning organization that can respond efficiently to the enormous humanitarian needs in the country according to its mandate.

With the support of the Federation representative over the past one year, the national society has made the following notable achievements in the transformation process:

- Successful annual meetings of the general assembly in 2002 and 2003;
- Regular quarterly meetings of the governing board (national executive committee);

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- Appointment of a full-time secretary general as of 1 January 2003;
- Decreasing the debts and payment of arrears of the national society's statutory contributions until the end of 1999 by using funds mobilized from within the country;
- Promotion of partnerships and successful mobilization of resources both internally and externally for programme implementation in 2003 (for example, government funding, national lotto, the Red Cross Movement and others donors);
- Development and effective distribution of progress report 2002 among national and international partners;
- Consolidation of strategic planning documents, development of a five-year development plan 2003-2007 and an annual plan of action 2003 and effective dissemination among national and international partners;
- Completion of external consolidated audit for the national society's fiscal year April 2001/March 2002 and April 2002/March 2003 and effective dissemination of the results internally and externally;
- Progress in revising the existing constitution;
- Drafting the government act for the recognition of the national society (work in progress together with the government);
- Completion of the self-assessment process at the national, regional and local committee levels, revision of guidelines and questionnaires for all levels for the self-assessment process 2003;
- Completion of five OD related assessments in key development areas, development of reports, recommendations and proposals for funding support;
- Awareness and skills development on the need for a systematic planning and reporting processes to ensure a well functioning organization;
- Drafting the new structure for national and provincial level and development of key performance objectives for all positions;
- Improved visibility and publicity of the national society by participating at various forums, organizing logos and signboards for Red Cross buildings and vehicles and conducting mass media for newspaper articles on important Red Cross events;
- Participation at the highest level of the South African Red Cross leadership in the regional network of the Southern African National Red Cross Societies, SAPRC meetings and other regional and global events as well as hosting regional delegation and secretariat organized trainings in South Africa;
- Skills development of South African Red Cross staff and volunteers through workshops and on-the-job training.

The current challenges for the national society are time, capacity and resources. For years, the national society has struggled without a full-time manager, lack of clear vision or direction until the beginning of 2003. The staff members have done their best under the given circumstances – without support, guidance or effective management. The secretary general and his team face great challenges and the time is limited to address all priority areas and needs immediately, especially with limited human resources available.

Many systems, procedures and guidelines will have to be developed or drafted from scratch, which is a time-consuming process. Once the management tools have been developed and adopted by the national society, an intensive training process is needed throughout the structures of the national society to disseminate the tools. The process takes a long time in a big country such as South Africa and requires technical and financial resources, which first has to be found. The challenge ahead is to maintain a momentum for the transformation, implement planned activities systematically and effectively, get the management structure for national, provincial and branch level approved, recruit necessary manpower for key positions and support the human resources for implementing the change. At the same time it is important to continue improving the image and raising the profile of the national society in the humanitarian sector. The key for success is investing in human resources of the national society, effective planning and systematic, step-by-step implementation, monitoring and evaluation of the ongoing transformation process. The OD programme will address all these challenges through projects based on thorough assessment process.

Goal: The lives of vulnerable people in South Africa are improved.

Objective: The South African Red Cross meets the basic requirements of the characteristics of the well-functioning national society and is a recognized player in the humanitarian sector in South Africa.

Expected Result(s) and related projects for this objective:

Project title	Expected result(s)
1. Governance & management development	<p>The capacity of South African Red Cross governance and management is developed for better practice of their role and responsibilities</p> <ul style="list-style-type: none"> • Governance and management is familiar with the Federation and Movement policies, strategies and requirements and apply them in their own planning. • The role and mandate is clearly understood by the governance, especially in relation to the role and mandate of the national society management • The national society has revised and adopted statutes in place. • The national society has processed the Red Cross Acts with the government of the RSA for the recognition of the national society and the use and protection of the Red Cross Emblem in South Africa. • The national society has adopted a minimum of nine South African Red Cross policies for intervention in line with the Federation policies. • The national society has established partnerships with the government of the RSA, the Movement partners, foreign missions, EU, UN and other international organisations, NGOs and corporate sector in RSA. • National-level partnership agreement is concluded with the government of the RSA covering disaster management, HIV/AIDS and other issues and thus opening the door for service agreements at the provincial level. • The national society has further decreased the debt and paid the arrears of its statutory contributions to the Federation. • The national society has put a communications and management system in place covering all levels of the national society. • Results of the self-assessment process 2003 are analysed and recommendations implemented. • Long-term development plan is regularly updated responding to the changing needs of the national society and the country. • Annual Reports are produced and distributed prior to the meeting of the annual general assembly. • CAS 2004-2008 has been produced and adopted, implemented, monitored and evaluated. • Clear governance and management structures are approved for the national, provincial, branch and local committee levels. • Technical assistance and support is provided to overall development of the national society either through the Cape Town based Federation Country Office or the Harare based regional delegation for Southern Africa.

Project title	Expected result(s)
2. Administration and Financial Management Development	<p>The ability of South African Red Cross to manage their administration and finances is developed</p> <ul style="list-style-type: none"> • Administration and finance unit is equipped and fully functional throughout the structures. • A qualified finance manager is appointed. • Financial rules and procedures manual are revised, adopted, printed, disseminated and implemented throughout the structures. • Recommendations of consolidated audit reports are effectively implemented for development of the financial management of the national society. • External consolidated audit is conducted on annual basis. • Internal audit function is established on ad hoc basis, reporting directly to the SG. • Procurement procedures manual is developed in accordance with the Federation standards, adopted, printed and disseminated throughout the structures. • A centralised fixed asset register is developed and registered at the national level.
3. HR Development (fully funded bilaterally)	<p>The ability of South African Red Cross to manage, develop and retain their human resources is improved</p> <p>Activities planned:</p> <ul style="list-style-type: none"> • Clear key performance objectives are produced and adopted for all positions throughout the structures. • Skilled and professional staff members are appointed in the open positions ensuring a smooth function of the national society in a sustainable manner. • A manual for administrative procedures is developed and disseminated throughout the structures. • All staff employed by the national society has valid standard contracts. • Revised HR manual is adopted. • All employees understand their role and rights as per the revised HR manual. • Performance management system is adopted and implemented throughout the structures. • Remuneration policy is reviewed and urgent corrective actions taken for significant out of line situations, particularly in disadvantaged areas. • Staff development needs are identified and capacity is built as per the agreed employee's development plan. • South African Red Cross management and staff are familiar with the Project Planning Process (PPP) and apply it in their own planning. • South African Red Cross management and staff are familiar with the minimum reporting requirements • Systematic team building is regularly practised with the support of an external, professional facilitator. • A qualified and experienced person with HR background is made responsible for coordinating HR development at the national level.

Project title	Expected result(s)
<p>4. Advocacy, Communications, Marketing, Resource Mobilization</p>	<p>The ability of South African Red Cross to advocate and market their programming and to mobilize their own resources is developed</p> <ul style="list-style-type: none"> • Advocacy, communications, marketing and resource mobilisation (RM) strategies and policies are in place and implemented. • A model structure for RM/fundraising is approved. • RM targets are agreed on and met at the national, provincial and branch level. • RM manual is developed, adopted and disseminated throughout the structures. • A voluntary committee with skilled and committed people is in place for RM/fundraising. • A qualified, dynamic person responsible for advocacy, communications, public relations, marketing and resource mobilisation/fundraising at the national level is appointed.
<p>5. Volunteer Management and Branch Development</p>	<p>South African Red Cross branch structure and its management capacity is developed ensuring improved service delivery, and the ability of South African Red Cross to recruit, develop, manage and retain volunteers is improved.</p> <ul style="list-style-type: none"> • Volunteering and development policies finalised, adopted, disseminated and implemented throughout South African Red Cross structures. • Volunteer management system defined and approved at the national level and disseminated throughout the structures. • Database for volunteer recruitment and maintenance established at the national level. • Volunteer management and branch development are coordinated at the national level. • Structures, systems and procedures developed, approved and disseminated at the branch level to enable effective function of branches and service delivery among vulnerable people through 27 branches in nine provinces. • Leadership and management skills, including skills in programme cycle management, developed in 27 branches in nine provinces. • South African Red Cross directory, including national, provincial, branch and local committee levels, is developed and maintained at the national level. • A minimum of nine branch exchange visits are organised between the provinces. • An experienced person with a background of volunteer management and branch development is appointed to coordinate the project at the national level.

Project title	Expected result(s)
6. Empowerment of youth, focus on young women in leadership	<p>South African Red Cross youth programming is developed, focus on leadership, life skills, self-development and gender issues</p> <ul style="list-style-type: none"> • Youth representation is secured at the South African Red Cross governing board emphasising gender balance. • Database is established and maintained at the national, provincial and branch level for youth members. • 15,000 youth members are recruited, trained and retained. • 50 youth groups and social clubs formed and disseminated on Fundamental Principles and ideals per province in nine provinces. • Youth participation is increased in the programme management cycle. • Youth exchange is facilitated at the global, regional and national level. • A survey on young women in Red Cross conducted. • 10 facilitators trained in leadership, life skills, and self-development and gender issues. • 1,000 young women trained in leadership, life skills, and self-development and gender issues. • Nine provincial Young Women in Development (YWID) camps held in South Africa (one per each province). • One national YWID Conference held. • A dynamic, gender sensitive person with youth development background is appointed at the national level to coordinate and advice youth and gender initiatives and programming.

Click below to access the Logical Framework Planning Matrix document for:

<Governance and Management Development>

<Administration and Financial Management Development>

<Advocacy, Communication, Marketing and Resource Mobilization>

<Volunteer Management and Branch Development>

<Empowerment of Youth>

Risks and assumptions related to South African Red Cross programming:

Internal risks

- Current unity in South African Red Cross is not sustained, resulting in future disruption of the implementation of the five-year development plan.
- Roles of governance and management are not clearly understood and/or practised leading to ineffective leadership, poor or no decision-making and confusion at the operational level.
- New organization chart (Organigram) and job-descriptions are not adopted in time causing confusion and leading to an ineffective function of the national society throughout the structures.
- Procedures, systems and guidelines are not put in place or disseminated in time throughout the structures leading to confusion and poor implementation and service delivery at the operational level.
- Infrastructure for implementation of programmes and projects at the branch level is not put in place leading to ineffective implementation and service delivery.
- Implementation capacity of the national society is not built up quick enough to meet the needs at the operational level leading to delay in implementation.
- The planning, reporting, monitoring and evaluation process is not clearly understood at the provincial and branch level leading to delay in implementation and poor reporting.

External risks

- Other organisations involved in similar activities to South African Red Cross are able to compete more effectively and or more visibly for the funding and income available to the sector. This can also include other resources such as volunteers and technical support.
- Volunteerism worldwide and in South Africa continues to decline with a resultant decrease in the capacity of South African Red Cross to deliver effective services at grass roots level.
- The effects of HIV/AIDS could lead to a loss of volunteer capacity in the most vulnerable communities and the ability of South African Red Cross to deliver services to these communities.

Coordination, Cooperation, and Strategic Partnerships

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The role of the Federation in-country representative in relation to cooperation, coordination and strategic partnerships is to facilitate various negotiations and processes and provide guidance and advice as needed within the country, regionally and internationally. With the Federation support, negotiation of the Cooperation Agreement Strategy (CAS) and production of the CAS document in 2004, will provide an opportunity for the national society to market their long-term development plan effectively.

Strategic partnership development initiatives can be summarized as follows:

Government of the Republic of South Africa (RSA): The government of the RSA pledged their support for development of the national society in the 27th International Conference in 1999. Due to the internal conflict within South African Red Cross in the past few years, the government has not been able to actively support the national society development and there was a need to re-establish the contact with the government after the appointment of the new secretary general at the beginning of 2003. With the Federation support, the national society has made substantial efforts since then in contacting government in relation to development of the Red Cross and Red Crescent Act for recognition of the national society and for the use and protection of the Red Cross/Red Crescent Emblem in South Africa. National-level agreement, focus on forging partnership in disaster management and community health and care sectors, has also been discussed.

ICRC: Cooperation and working relationship with the ICRC is professional and supportive and extensive information sharing takes place between the Movement partners. ICRC is very supportive towards development of the CAS and implementation of the Movement strategy is being discussed between the Federation and the ICRC.

Partner National Societies: Communication with and exchange of information between the Federation country office and the partner national societies occurs regularly. There is currently only one partner national society delegate (British Red Cross) present in the country; communication occurs mainly through e-mail. All partner national societies support the South African Red Cross's long-term development plan and their priority areas. Currently, there are no challenges for donor-driven approaches outside the South African Red Cross five-year development plan.

Foreign Missions, International Organisations and NGOs: Due to the location Federation office in Cape Town, it is evidently difficult to establish strong links with Pretoria based Foreign Missions, international organisations and NGOs. It is a time-consuming exercise to try to establish a network with various important structures like the New Partnership for African Development (NEPAD) or Southern Africa Development Community (SADC). The possible establishment of the South African Red Cross relationship management office in Pretoria may help in strengthening this area.

Regional and global coordination and networking: The president and the secretary general of the South African Red Cross are both active in regional and global networking and in humanitarian advocacy. The president is regularly invited as a guest speaker for various in-country events involving humanitarian organizations. With the support of the Federation representative, South African Red Cross has successfully hosted several regional or global workshops in Cape Town.

Regional coordination and networking by the Federation representative : Federation representative is part of the Federation Southern Africa Management Team (SAMT), which meets on quarterly basis. The representative also attends continental and international meetings as required. The planned activities under the communications, marketing and resource mobilization project of the OD programme will further strengthen this sector.

Effective Representation and Advocacy

This sector has not yet been given sufficient focus from the Federation country office perspective as a lot of time has been spent in supporting the national society's internal re-structuring processes following the appointment of the secretary general in early 2003. However, it can be said that the Federation led the humanitarian agenda in Southern Africa linking the HIV/AIDS pandemic and poverty in the region which resulted in a successful appeal and Johannesburg based food security operation in 2002-2003 which is now being integrated with the Southern Africa regional delegation in Harare, Zimbabwe.

The new management and leadership of the South African Red Cross puts a lot of emphasis on advocacy, communications and external relations and getting Red Cross better known in South Africa. The Federation representative has supported the national society from the Cape Town country office by promoting Red Cross advocacy role, emphasis on HIV/AIDS and disaster management initiatives as well as strategic partnerships, especially with the government of the RSA who passed the Disaster Management Bill in 2003 and has recently shifted their strategy to HIV/AIDS related issues. Close contact has been maintained with the Movement partners in the country, region and globally. Due to the location of the national office and Federation country office, close cooperation with partners like government, foreign missions and international organization is not always very easy as they are mostly based in Pretoria, a two-hour flight away from Cape Town. The re-location of the national office is being discussed but more time is needed for deliberation at leadership level. A satellite office for strategic partnership development and relationship management in Pretoria could be one solution for a more effective advocacy and networking within the country and the whole Southern Africa region. Discussions are currently being held at various forums to explore this possibility.

The national society has developed a database of 400 external contacts, including the government, foreign missions, international organizations, major corporations and NGO sectors. The idea is to provide regular information for advocacy purposes to these external partners about the Red Cross (South Africa Red Cross and the Federation) through email. This channel is currently being used for communication and results will take some time to be measured.

An international and professional journalist with Red Cross experience offered her services in August 2003 on voluntary basis for one year to assist the national society to develop their advocacy, communications and external relations capacity along with development of marketing and resource mobilization initiatives. As more resources become available for South African Red Cross as a result of the restructuring and transformation process, it is important that a plan of action addressing advocacy, communication and external relations will be drawn up in 2004 targeting strategic organizations relevant to Red Cross work in South Africa and the Southern Africa Region.

Country Office Management

The Federation country office is based in the premises of the South African Red Cross Society in Cape Town and next to the office of the secretary general. The office is managed and run by the Federation representative. Support services such as administration, secretarial services, transport, financial management and editing are either bought from the national society or externally or done by the Representative herself. This arrangement has both advantages and disadvantages. For instance, it has convenience over relationship building and information sharing. The national society capacity is being built directly instead of establishing a parallel structure for the Federation, building capacity of the Federation employed staff. It is also more cost effective since all administrative costs can be shared. The disadvantage is that if the national society resources are limited, staff can be overloaded to cater both organisations. It is therefore planned that the structure of South African Red Cross national office will be strengthened in 2004 to facilitate the needs of the South African Red Cross management and the Federation office. Respective staff employed by the South African Red Cross will be seconded to the Federation for a certain period of time or for certain tasks (for example, personal assistant to the

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Representative or the project accountant within South African Red Cross finance unit). The cost of the Federation presence in South Africa is being built in the budget of the organisational development programme. This approach has proved to be a very practical way of financing the Federation support to the national society development.

The Federation representative is part of the Southern Africa Management Team and technical support for the national society development is requested from the Southern Africa regional delegation in Harare and the Africa continental units in Nairobi as needed.

For further information please contact:

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BUDGET 2004

PROGRAMME BUDGETS SUMMARY

Appeal no.: 01.17/2004

Name: South Africa

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	23,530	0	0	0	0	0	23,530
Food	70,589	0	0	0	0	0	70,589
Seeds & plants	0	0	0	0	0	0	0
Water & Sanitation	0	0	0	0	0	0	0
Medical & first aid	47,932	0	0	0	0	0	47,932
Teaching materials	40,334	0	0	0	0	0	40,334
Utensils & tools	0	0	0	0	0	0	0
Other relief supplies	36,853	0	0	0	0	0	36,853
SUPPLIES	219,238	0	0	0	0	0	219,238
Land & Buildings	0	0	0	0	0	0	0
Vehicles	58,824	78,431	0	0	0	0	137,255
Computers & telecom	0	0	0	16,828	0	0	16,828
Medical equipment	0	0	0	0	0	0	0
Other capital exp.	0	0	0	0	0	0	0
CAPITAL EXPENSES	58,824	78,431	0	16,828	0	0	154,083
Warehouse & Distribution	0	42,039	0	0	0	0	42,039
Transport & Vehicules	50,320	22,059	0	15,065	0	0	87,444
TRANSPORT & STORAGE	50,320	64,098	0	15,065	0	0	129,483
Programme Support	101,790	39,574	0	74,854	0	0	216,218
PROGRAMME SUPPORT	101,790	39,574	0	74,854	0	0	216,218
Personnel-delegates	0	0	0	155,538	0	0	155,538
Personnel-national staff	315,368	104,216	0	284,809	0	0	704,392
Consultants	80,876	3,922	0	88,845	0	0	173,642
PERSONNEL	396,244	108,138	0	529,192	0	0	1,033,573
W/shops & Training	465,726	287,392	0	327,243	0	0	1,080,360
WORKSHOPS & TRAINING	465,726	287,392	0	327,243	0	0	1,080,360
Travel & related expenses	97,422	7,843	0	89,957	0	0	195,222
Information	113,346	11,765	0	43,269	0	0	168,379
Other General costs	63,094	11,588	0	55,196	0	0	129,878
GENERAL EXPENSES	273,862	31,196	0	188,422	0	0	493,480
TOTAL BUDGET:	1,566,004	608,829	0	1,151,604	0	0	3,326,436