

PROGRAMME UPDATE



International Federation of Red Cross and Red Crescent Societies
Fédération Internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

SOUTHERN AFRICA REGIONAL PROGRAMMES

30 June 2004

The Federation's mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world's largest humanitarian organization and its millions of volunteers are active in over 181 countries.

For more information: www.ifrc.org

In Brief

Appeal No. 01.21/2004; Programme Update no. 1, Period covered: January to April 2004;
Appeal coverage: 46.9%; Outstanding needs: CHF 2,754,789 (USD 2,178,600 or EUR 1,801,700).
[\(Click here to go directly to the attached Contributions List \(also available on the website\).](#)

Appeal target: CHF 5,184,992(USD 3,894,098 or EUR 3,337,619).

Related Emergency or Annual Appeals: n.a.

Programme summary: The HIV/AIDS pandemic remains the major public health, social and economic problem affecting the southern Africa region. The Red Cross has initiated projects to fight HIV/AIDS and to improve the quality of lives for the people living with HIV/AIDS (PLWHA) and orphans and other vulnerable children (OVC). There are a total of 76 HBC projects and 58 HIV/AIDS prevention projects in the regions. The total number of clients (PLWHA) receiving care and support within the HBC project is 30,000. Approximately 3,000 care facilitators were trained and are giving support to the clients. 138 coaches were trained in HBC and prevention work. The Red Cross has identified 70,000 OVC in the region and 53,000 of them have received assistance in the form of food, clothes, educational and psychological support.

The 2004 regional organizational development (OD) programme strategy focuses on strategic planning and CAS reviews, governance and leadership support, volunteer and branch development, resource and finance development activities as well as project planning process (PPP) training. The confirmed pledge contribution as of May is 20% of the appeal budget; this obviously has a negative impact on our OD support to the National Societies. The process of recruitment of a regional finance development delegate is underway and the delegation is looking for support to this important initiative to improve the financial management in national societies of the region.

The National Red Cross Societies in the region have taken positive steps towards volunteer management and branch development, through the development of volunteer management policies and strengthening of their branch structures. OD has focused on asset management as a way forward for national societies to effectively utilise the resources they already have towards reducing vulnerabilities within targeted communities.

The regional disaster management (DM) programme support to national societies focuses on building capacity and strengthening national societies in preparedness and timely response to disasters. Capacity building includes training of national society staff and volunteers in customized disaster management modules and the regional disaster response team (RDRT) course. The programme develops effective disaster response mechanisms, including operational deployment procedures for RDRT and it manages and coordinates RDRT deployments within the region. The DM Programme has provided technical and financial support to various DM activities in the national societies. It has played an important role in mobilizing and coordinating responses and the provision of resources from external sources. The work of the department is hampered by the fact that there is no

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guaranteed funding at the beginning of each year which delays implementing programme activities to the detriment of national societies support.

The water supply, sanitation and hygiene promotion programme has new direction, is coordinating increasingly with other health and care programmes and has a medium-term strategy for delegate withdrawal. The health programme is in the process of restructuring with the recruitment of a regional health coordinator to take the whole health and care department forward.

For further information specifically related to this operation please contact:

- *William Corkill, Acting Head of Southern Africa Regional Delegation, Harare; Email ifrczw02@ifrc.org; Phone 263.4.70.61.55 or 263.4.70.61.56; Fax 263.4.70.87.84*
- *Terry Carney, Federation Regional Officer for Southern Africa, Africa Dept.; Email terry.carney@ifrc.org; Phone 41.22.730.42.98; Fax 41.22.733.03.95*

This Programme Update reflects activities to be implemented over a one-year period. This forms part of, and is based on, longer-term, multi-year planning (refer below to access the detailed logframe documents).

All International Federation assistance seeks to adhere to the [Code of Conduct](#) and is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response](#) in delivering assistance to the most vulnerable. For support to or for further information concerning Federation programmes or operations in this or other countries, or for a full description of the national society profile, please access the Federation's website at <http://www.ifrc.org>

The Southern Africa Region encompasses ten countries; the regional delegation works with the National Red Cross Societies in each country. (Click the name below to access the specific Federation web page).

[Angola Red Cross](#) [Botswana Red Cross Society](#) [Lesotho Red Cross Society](#)

[Malawi Red Cross Society](#) [Mozambique Red Cross Society](#) [Namibia Red Cross](#)

[South African Red Cross Society](#) [Baphalali Swaziland Red Cross Society](#)

[Zambia Red Cross Society](#) [Zimbabwe Red Cross Society](#)

Operational developments

The Southern Africa Region bears the brunt of the HIV/AIDS pandemic, as an estimated 30 million people in Sub-Saharan Africa are living with HIV/AIDS – which makes up three quarter of the 40 million who are infected by the virus worldwide. This high prevalence of people living with PLWHA has had a significant impact on the socio-economic situation in the region. The HIV/AIDS pandemic has been the main contributor to increasing poverty in southern Africa and this has resulted in less agricultural output in the region as breadwinners fall ill, adults and children have to take care of HIV/AIDS patients at home, and families take on orphans who have lost their parents to the virus. The impact of this has further been deepened by harvest failures year after year, as a result of floods and drought, which have ravaged the region in recent years. Generally the agriculture and economic situation has improved in the region in 2004 though Zimbabwe suffers from a fall in GDP and in pockets of other countries the food security situation is still critical.

The regional delegation information department has devoted up to half its time to promote issues related to HIV/AIDS. This took the delegate to Swaziland, Namibia and Zimbabwe in the first six months of the year, for information gathering for the Federation website and the HIV/AIDS newsletter – *Southern Africa Initiatives* - now being prepared for publication.

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In the HIV/ AIDS programme 76 home-based care projects have been established with a total of 3,000 care facilitators providing support to 30,000 people living with HIV and AIDS (PLWHA) and their families (150,000 family members) in the region. In addition, a total of 190 support groups for PLWHA and OVC have been established with the purpose of providing psychological and social support to the group members. Each support group has an average of 30 people. Nine of the ten National Red Cross Societies in the region have provided support to 53,000 OVC: Botswana, Lesotho, Malawi, Mozambique, Namibia, South Africa, Swaziland, Zambia and Zimbabwe. This support has included material, educational, psychological and social support.

The DM department has spent a significant amount of time supporting the Namibian Red Cross in a relief operation to assist flood victims in the Caprivi region in northern-east Namibia, where the Zambezi River rose e seven meters and burst its banks in late March. A multi-sectoral RDRT was sent to the area to conduct an initial assessment which was followed by a relief operation. The devastating floods caused substantial damage to property, destroyed crops, polluted water sources and threatened the livelihoods of an estimated 20,000 people in Kabbe and Katima rural constituencies. Some people affected needed immediate evacuation and government relocated 4,000 people to four camps. On confirmation of the extent of the flooding, the Federation regional delegation immediately dispatched relief items to the area and made an emergency appeal. The appeal raised 700,000 CHF from ECHO, Danish Red Cross, British Red Cross, Swedish Red Cross, Japanese Red Cross and Monaco Red Cross.

Technical and emergency material support was provided to Zambia Red Cross in responding to the cholera outbreak, which had been raging unabated in slum areas of Lusaka since December 2003. Two cholera kits were dispatched to Zambia Red Cross. In February, Baphalali Swaziland Red Cross was assisted with USD 1,500 to respond to cholera outbreak around Mancini region rural areas where 2,470 people were affected. In Zimbabwe of 33 family tents from the regional stocks were issued to Zimbabwe Red Cross in responding to storm damage in Hurungwe and Shamva districts, which left 33 families homeless.

In its effort to develop the capacity of national societies in the region, the regional delegation carried out a review of the Federation support to Angola Red Cross, after the country delegation was closed in January 2004. The review has highlighted the need for continued Federation support with focus on OD and finance management and development, so as to improve the image of Angola Red Cross locally and internationally. This support requires financial and technical inputs from both bilateral and multilateral donors. Meaningful achievement is to be made toward a responsive and focused national society that serves the needs of the most vulnerable communities in Angola.

The Botswana Red Cross has taken a proactive approach towards revival through revising its constitution, and prioritising the areas that it would like to focus on in 2004 and beyond. This is a positive development for a national society that has been without donor and partnership support. A proposal for rolling out the pilot finance development achievements for Mozambique Red Cross to other national societies in the region has been developed and awaits endorsement by SAPRCS¹ before implementation. If approved the rolling out process is expecting funding from the Norwegian Red Cross. The current regional concern on finance development has created the need to support national societies to build their capacities in reporting and managing their finances in a more transparent manner.

¹ SAPRCS – Southern Africa partnership of Red Cross Societies– formed in 1997, the partnership national societies aims to strengthen the collaboration, cooperation and self-determination of national societies in the region to achieve a greater level of self-sustainability.

Health and Care

Community-based health (CBH)

Goal: A sustainable improvement in the general health of the targeted vulnerable communities.

Objectives: The capacity of national societies to assets, design, implement and monitor community-based health care projects is scaled up and strengthened

The health delegate's contract was terminated in May due to the lack of funding for the programme. There was little progress against the objective and expected results. A new strategy for the health and care department is being worked on that will include the recruitment of a health coordinator to manage the way forward.

HIV/AIDS

Goal: The vulnerability of orphans and other vulnerable children, people living with HIV/AIDS and their families is reduced in the ten southern African countries.

Objective: The capacity of ten national societies to initiate, plan, implement, monitor and scale up HIV/AIDS community-based interventions is strengthened.

Progress/Achievements

Community home -based care (CHBC)

The capacity of ten national societies to provide quality care and support to PLWHA through CHBC projects is increased and strengthened

During the reporting period emphasis was on assisting national societies to consolidate the HBC care projects and ensure delivery of quality services. The HIV/AIDS programme staff also gave orientation on HBC work to two new HIV/AIDS coordinators from Lesotho Red Cross and Zambia Red Cross and an OVC officer from Lesotho Red Cross.

Improved quality of life for PLWHA

The HBC programme has improved the quality of life for PLWHA as evidenced by the increased mobility of HBC clients. The regional HIV/AIDS department assisted the Zimbabwe Red Cross in strengthening support groups.

Improved access to HBC medical and hygiene care, psychological and material support

The regional delegation provided HBC kits for care facilitators for the National Red Cross Societies of Lesotho, Malawi, Mozambique, Namibia, South Africa, Swaziland, Zambia and Zimbabwe.

Capacity of the ten national societies to address stigma and discrimination through appropriate, affordable and acceptable strategies established.

Red Cross day activities focused on fighting stigma and discrimination and working more closely with PLWHA. Two PLWHA were invited to give testimonies on how they were on the brink of death and through "positive living", they now felt they had more years of life to look forward to.

Prevention

The national society capacity to improve knowledge, attitudes, practices and behaviours of various target groups strengthened.

Because of the vital need to set up effective prevention programmes a decision has been made to set up a prevention taskforce which will look at all various prevention interventions for the various target groups. Technical Support has been provided to Namibia and Swaziland in setting up VCT centres in February and March 2004.

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Orphans and other vulnerable children (OVC)

Care and support for OVC is improved through the establishment of community-based OVC care projects.

Technical support to set up OVC programmes was provided in Zululand – South Africa, Lesotho and Botswana. Two psychological support workshops were conducted in collaboration with Regional Psychosocial Initiative (REPSSI) and participants from the Red Cross and REPSSI partner organizations from South Africa, Swaziland, Lesotho and Malawi took part. A regional OVC working group was set up and the first meeting took place in Zimbabwe in May, 2004.

Integrated food Security

Ten national societies have established and strengthened their capacity and skill to produce and provide food for PLWHA and OVC.

The regional food security programme assisted OVC and PLWHA in Zambia, Zimbabwe, Lesotho, Swaziland and Malawi with food parcels. Most support groups in the region now incorporate nutrition gardens and some clients and their families also have doorstep gardens

Project coordination and management

Monitoring and evaluation tools developed and refined throughout the period

A review was conducted of the regional HIV/AIDS programme which covered all ten countries in the region. As result of this review four working groups have been set up to look at implementation of the recommendations of the review. These groups cover monitoring and evaluation, care for the carer, policy and strategy, and training. The groups include participants from the national societies, the partner national societies (PNS) and the regional delegation and they should conclude the initial stage of their work by November.

Sharing of best practices among the ten National Societies promoted through exchange visits

The Southern Africa Regional AIDS Network meeting brought together the HIV/AIDS coordinators, PNS and regional office to look at accomplishments this year so far and also the plans for 2005. Important issues such as gender and ARV were also discussed at the meeting.

Partnerships at local, regional, national and international level established

Partnerships at the regional level were strengthened with UNICEF, REPSSI and SAFAIDS. A letter of technical cooperation was signed with REPSSI.

Impact

The increase of HBC projects from 53 to 76 has resulted in a community-based service to 29,000 clients and their families. It has become increasingly obvious that income-generating activities rarely generate much income. However coming together for these activities provides a source of psychological support for clients, OVC and care facilitators. The small amounts of income that are generated enable the clients to feel valued and that they are playing a useful role in their communities. Due to the lack of a prevention policy and structure the prevention programme has not progressed to become comprehensive enough to reach a variety of different groups in the community.

At the SARAN meeting it was unanimously agreed that support for OVC is now firmly on the agenda of the national societies. The clients and health care personnel confirmed that the inclusion of the food component into the community-based health care has improved the general health status of the clients and OVC.

Constraints

Due to lack of response to the Federation annual appeal neither the regional HIV/AIDS team nor the National Societies were able to fully meet their objectives. Progress on the integrated prevention project, which was initiated by the regional health delegate, could not proceed due to lack of funds. It is hoped that when the prevention task force is formed it will address this issue.

The regional HIV and AIDS programme is becoming increasingly complex with the addition of OVC, antiretroviral drugs (ARV) and food security, in addition to the basic programme of prevention, advocacy, care

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and support. However the financial and human resources to deal with this increased programme are not available either at regional or National Society level. Some national societies have begun to address the human resources issue for example in Zimbabwe they have prevention officers at provincial level and in Lesotho an OVC project officer has been appointed. It is clear that non-traditional sources of funding have to be found both at regional and national level.

Although the food security programme had a significant impact on the health of the clients and OVC, this programme in most countries is coming to an end. There is no clear strategy on the long-term provision for the nutritional aspect of the programme despite the fact that clients are unable to take tuberculosis (TB) treatment or ARV without adequate nutritious food. The food security officer in Geneva is currently looking for support for this programme and PNS are willing to provide a suitably qualified food security delegate to the region.

Water Supply, Sanitation and Hygiene Promotion (WatSan)

Objective: Capacity of five national societies to assess, design, resource, implement, monitor and evaluate water supply, sanitation and hygiene promotion projects in integrated health and care programmes is increased.

Four national societies are implementing Federation supported long-term development water supply, sanitation and hygiene promotion projects in the region - Malawi, Mozambique, Zambia and Zimbabwe. The Zambia Red Cross provides WatSan services to Congolese refugees in Northern Zambia. The Namibia Red Cross is implementing a short term WatSan project in response to floods in the Caprivi region. The National Red Cross Societies of Angola, Namibia, Malawi, Zimbabwe and Mozambique are implementing water supply, sanitation and hygiene promotion projects supported directly through partner national societies (PNS).

There is increasing coordination between WatSan projects and other health and care interventions. The long-term projects in Malawi, Mozambique and Zimbabwe are implemented in coordination with national society HIV/ AIDS projects. In Zambia the long-term project is implemented in coordination with a Mission Hospital Home Based Care operation. WatSan hygiene promotion volunteers are being trained and becoming active in health and HIV/ AIDS awareness promotion in addition to hygiene. In Zimbabwe the WatSan projects the focus beneficiaries are Home Based Care clients. Coordination will continue to improve, while projects will be integrated where this is a common sense approach, for example the WatSan operation for the Congolese refugee camp in Northern Zambia is fully integrated part of the Zambia Red Cross services to the refugees.

Project managers on the long-term development projects in Zambia, Mozambique and Malawi have received on the job training (through missions by the regional delegate) in project management (assessment, design, resourcing, implementation, monitoring and evaluation of projects) including the production of logframes, budgets, cash flow, workplans, and in expenditure tracking. Standard processes have been introduced that have improved and simplified appeal and operational planning, report writing, and the disbursement of funding.

The delegate is developing project management process/ systems for WatSan projects in the region. This is a long-term activity to get the final product, but it has already been used to improve project implementation capacity.

National societies still require Federation support in the medium term though progress towards implementation without support is being made. A strategy to gradually phase out delegate support over the next year is in place.

Progress/Achievements (activities implemented within this objective)

Progress and achievements reported are against the operational expected results and the project logframe for 2004.

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Five National Societies in the region implement water, sanitation and hygiene promotion projects effectively and efficiently in line with sector best practices (community managed, demand responsive approaches) and creating synergy with other health and care projects.

Programme update reports and monitoring from the regional water and sanitation delegate indicate that projects are being implemented efficiently and effectively in line with sector best practices and creating synergy with other health and care projects. For further information see country programme updates and mission reports. The project managers in Malawi, Mozambique, Zimbabwe and Zambia with support from the regional WatSan office are in the process of improving and documenting the way that they implement community management and hygiene promotion to demonstrate that they use best practices and to enable organisational learning.

Software² managers responsible for the implementation of the community management and hygiene promotion aspects of the WatSan projects have been recruited in Malawi, Mozambique and Zambia. This is improving the hygiene and community management implementation in these projects.

In Zimbabwe the present project manager is a software specialist – what is required here is to recruit an engineer to improve the engineering capacity of Zimbabwe Red Cross.

The software manager from Mozambique went to Angola to train the Angolan Red Cross health staff in best practices in hygiene promotion.

Establishment of sound, sustainable environmental services for 125,000 most vulnerable in defined local government administrative areas by 2005 in:

Hygiene Promotion

Sanitation, and

Water Supply

Through the activities of the five national societies in integrated health and care programmes

Progress on projects is reasonable; though implementation has been slowed in the first reporting period due to the fact that donor funds were received late (March/ April rather than January) The number of beneficiaries of the Federation supported the long-term development projects is 100,000. This is a reduction from the appeal expected result as not all projects were fully funded. The regional WatSan office strategy is for the number of Federation supported long-term development projects to remain at four national societies (Malawi, Mozambique, Zambia and Zimbabwe). The requirement for WatSan interventions is highest in these four countries and fund raising for these four countries is realistic.

The regional delegation will continue to support other national societies in the region with projects implemented with bilaterals and other agency funding. For example project managers are using lessons learnt from training by the regional delegate on bilateral supported projects and the regional delegate has contributed to the writing of a proposed German Red Cross supported project in Mozambique and to the implementation of a Danish Red Cross supported project in Zimbabwe. The regional delegation has been able to charge the Danish Red Cross for its significant services in the implementation of this project.

The focus on working in defined local government administrative units to raise the water supply and sanitation services to minimum service levels as detailed in the appeal has been achieved in Malawi and Zambia. Mozambique is working towards this strategy and will achieve it in 2005. Zimbabwe Red Cross has adopted an alternative approach: its interventions are focusing on Home-Based Care clients in a integrated approach with the Home-Based Care programme.

² 'Software' refers to the planning stage of a project where needs of a community are identified, defined and capacities build in order to promote self-sustainability, ownership.

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The five national societies have capacity to respond, (and respond to) disasters requiring water, sanitation and hygiene promotion response

Zambia Red Cross provides WatSan services to 30,000 Congolese refugees in Northern Zambia. The manager of this operation was enabled to participate in a capacity building Emergency Response Unit (ERU) training course in Sweden by the regional WatSan office.

Namibia Red Cross with the support of the regional delegation responded to floods in Caprivi. The number of beneficiaries for the WatSan component of this response was 20,000. The technical officer from the regional delegation was on mission for one month in Namibia supporting this response. WatSan equipment supplied to the operation from the regional delegation will be repurchased from funding received for the operation. The regional WatSan emergency stock has been maintained and stock lists updated.

As detailed above the regional delegation supported Zimbabwe Red Cross implement a WatSan intervention funded by ECHO through Danish Red Cross for 50,000 beneficiaries. The project was part of an integrated Food Security project.

Zambia Red Cross responded effectively to flooding supported by the country and regional delegation. There were 14,000 beneficiaries of the WatSan component of this response.

Five National Red Cross Societies in the region have the capacity to implement a WatSan response to disasters – Malawi, Mozambique, Namibia, Zambia and Zimbabwe.

The five national societies are successful advocates for increased sector resources, and contributors to national sector policies, best practices, coordination and cooperation

Income for the long-term development projects has been increased in Zambia; it has remained the same in Malawi and Mozambique and reduced in Zimbabwe.

Zimbabwe is a special case. Last year the previous project manager was terminated due to suspicion of fraud. A new project manager was not in place until the end of the year. There was very little activity in the proposed WatSan projects last year in Zimbabwe. This resulted in a large carry-over of funds (and thus activities) from 2003 to 2004. Much progress has been made in the implementation of activities in 2004 with major support from regional delegation. What is required now is less implementation of activities and increased rebuilding of the capacity of Zimbabwe Red Cross to implement projects with less support from the regional delegation. The overall result is that although there will be a large expenditure of funds by Zimbabwe Red Cross in WatSan this year, little fund raising is required. It is expected that income will increase in 2005 once capacity has been built. For details see individual country programme updates.

The National Red Cross Societies of Malawi, Mozambique, Zambia and Zimbabwe are recognised as major sectoral agencies in their countries as evidenced by the invitations they receive to contribute to sectoral coordination meetings and the visits they receive from other NGOs who need advice in the sector.

Impact

National society WatSan project management is improving according to the regional WatSan delegate from the evidence of missions to the projects and the reports received. Full impact of the capacity building in project management and the recruitment of software managers will become clear if projects are completed on time and in budget and if income is increased in 2005. The four priority National Red cross Societies for WatSan (Malawi, Mozambique, Zambia and Zimbabwe) are increasingly becoming respected players in the sector. The WatSan response to disasters of Namibia Red Cross and Zambia Red Cross (see above) has been recognised as effective by the governments of these countries and other humanitarian agencies.

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Constraints

During this reporting period the regional water and sanitation delegate has been acting Programme Coordinator for a two-month period and acting Head of Regional Delegation for two weeks. This has reduced the time the delegate has been able to spend on WatSan. This will continue until the middle of August.

Lack of funding due to non-payment of some soft pledges by PNS will mean that the strategy to employ a local/regional software specialist may be delayed to 2005. However it is hoped that the soft pledges will be honoured. The implementation of the strategy to replace the delegate with this person and a local/ regionally employed engineer will require increased funding compared to 2004 in 2005 to allow training/ handover from the delegate to these staff.

Disaster Management (DM)

Goal: The vulnerability of communities is reduced in southern Africa region with respect to threat and impact of disasters

Objective: Well-prepared national societies engage in mitigation/rehabilitation activities that facilitates long-term development/sustainability and respond appropriately to disasters with the participation of empowered communities 'at risk'.

Progress/Achievements

Disaster preparedness (DP)

National societies' capacities in disaster management are strengthened and exhibiting minimum standards of well prepared national societies

National societies in the region have made strides in their quests to strengthen disaster management and are all exhibiting different levels of the minimum standards of a well-prepared national society. All of the national societies have disaster management officers to oversee the implementation programme activities; however, the Botswana Red Cross officer recently resigned. There is a noticeable preparedness change in all the ten national societies with some better than others. However, programme implementation has been delayed due to non-funding and delays in disbursing available funds.

Considerations of Better Programming Initiative (BPI) and gender diversity are integrated into all training and programme activities

The regional DM department supported the ICRC in facilitating a DM training workshop for Zimbabwe Red Cross staff and volunteers in conflict preparedness in line with the pending parliamentary and council elections. All considerations of BPI, and gender diversity were integrated into the training. Due to unavailability of confirmed funding for the national societies all the planned training and programme activities have not been undertaken.

During the Caprivi floods relief operation the RDRT showed how these considerations were addressed. On issues of gender diversity there was a good gender balance within the volunteers mobilized and they worked well within the agreed parameters. The issue of HIV/AIDS was addressed as an integral part of the operation, health education/promotion and care and treatment. In other strategic priorities of the Movement, the Red Cross team advocated to the Namibia governments Regional Emergency Management Unit (REMU) to ensure SPHERE minimum standards were adhered to during the relief operations. The government officials requested that Red Cross to provide guidance and training to REMU members. In health care, the RDRT team shared the ARCHI 2010 toolkit with the ministry of health and social services (MOHSS) officials. The senior health programme officer for the MOHSS is going to translate the ARCHI 2010 toolkit English version to the local language for use by the volunteers during their health education activities.

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Community-based disaster management (CBDM) initiatives are in place

The department supported Zimbabwe Red Cross in facilitating the installation of a HF Radio in the flood prone district of Muzarabani. This was a community-based initiative for disaster preparedness to enable communications during disaster situations. The community had identified and prioritized this during a hazard and risk analysis exercise in 2003. The community identified a venue at a school that conducive for shelter during emergencies and bought solar panels to enable the installation of a HF radio. Zimbabwe Red Cross is also in the process of consulting with the community in setting up another risk reduction initiative following recommendations made in the VCA in Matobo district in Matebeleland province.

In recognition of the need to empower local communities to reduce risks through community-based initiatives, Botswana Red Cross conducted a vulnerability and capacity assessment (VCA) in three villages of Boronong, Molalatau and Mathathane in the sub district of Bobirwa. The community identified and prioritized the need for community-based food security project and the national society requested for support from the regional delegation to facilitate the process. Technical support and advice was provided in developing a community garden project to address the food insecurity of the vulnerable people in the village of Molalatau. Lessons learnt from the Swaziland pilot food security project were shared with the programme staff and a draft project proposal was developed. It is unfortunate that the project proposal is delayed as the responsible national society programme officer resigned before finalizing the proposal, hence, it will take the new officer time to start the project.

The regional DM department also assisted the Baphalali Swaziland Red Cross in finalizing the plan of action and budget for the third year of the community-based food security pilot project. However, transfer of funds for the project to national society was delayed due to some technical procedures. All the other national societies have plans to initiate CBDM projects as soon as funds are made available.

Comprehensive contingency plans developed for likely emergencies/ key sites

Zambia Red Cross is in the process of developing a contingency plan for cholera response in the slum areas. Zimbabwe Red Cross is also being supported in updating its contingency plan for conflict management during councils and parliamentary elections to hold in 2005.

National societies working in partnerships with other stakeholders within local communities through integrated, multi-sectoral and multi-disciplinary approach teams and fora

National societies are participating in their national disaster management units, national VCA and health services boards, national AIDS councils and are cooperating with other stakeholders such as UNICEF. In the current relief operation in Namibia, the Namibia Red Cross coordinated effectively with other stakeholders such as the Namibia government, WFP and UNICEF. A task force committee made up of relevant government departments and Red Cross representatives was instituted and was the decision making body for the relief operation in which operational directions were provided and resources allocated to the operational teams to effectively implement their activities.

Disaster Response (DR)

Regional disaster response capacity is improved

At the regional delegation a taskforce of all other sectors is available and coordinates all the disaster responses and support for the national societies. Disasters in the region are responded to timely and effectively as shown by the various small and medium scale disasters that have occurred in the region recently.

The DR warehouse in Harare has non-food emergency stocks for 5,000 people and is used to support national society responses to disasters before an appeal can be raised. Logistics office provides regular updated lists of available emergency stocks at the warehouse and is shared with all regional departments. The stocks that were sent to assist in the Namibia relief operation need to be replaced and we anticipate that the Namibia floods appeal or other donors will support the replenishing the stock.

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Roster of trained RDRT personnel established in the region and respond effectively when needed

A RDRT roster has been established and members are being utilized more frequently within their own countries. Review of current RDRT members and updating of the database is continuously done to ensure that appropriate disaster response teams can be deployed at short notice.

The RDRT sent to the Namibia Floods consisted of three members from the Namibia Red Cross and one from the Baphalali Swaziland Red Cross, supported by the regional disaster response officer and information delegate, being operational on the ground in April 2004. Based on the RDRT assessment report an operational plan of action was drawn up and several activities undertaken to provide non-food relief items to affected and relocated people with support of the regional delegation. The team was deployed within 48 hours after an alert was raised from Namibia Red Cross. The team worked effectively as commended by the government officials in the Caprivi Region, which demonstrates effective disaster response capacity in the region.

Technical and financial support was extended to Botswana Red Cross when the north-west district of Chobe experienced localised flooding at the beginning of April. An in-country RDRT carried out an assessment from the 14-19 April 2004; damage was mostly destruction of crops along the Chobe River. The assessment report recommended for health education, restocking of DP emergency material used by the Chobe Red Cross branch in responding to floods.

Following heavy rains in Zambia during the months of February and March, two in-country RDRT members were deployed to carry out assessments in Chavuma, Zambezi, Lukulu, Sesheke, and Senanga and Kalabo districts. Zambia Red Cross received CHF20,000 from disaster relief emergency funds (DREF) to begin the operation assisting displaced and affected population through provision of relief items, health education and hygiene promotion.

DM agreements exists with national societies/governments/partners

A programme agreement with all the ten national societies but they cannot be fully fulfilled as only two DM programmes were funded. Agreements with governments are yet to be devised although countries like Mozambique, Zambia and Zimbabwe and South Africa are in discussions with their governments.

Ensure national societies have smooth handovers, both in planning and at the end of emergency response

During the reporting period there has been only one medium size disaster in Namibia supported by the RDRT where a smooth handover to the national society was done professionally and support is still being provided by the regional delegation until the operation is over by end of June 2004.

Federation and all national societies are participating in DMIS and promoting use of SPHERE standards

Many of the national societies are not able to effectively use disaster management information system (DMIS) due to limited capacity of computers and the lack of information technology support. However, the use of SPHERE has become part of good practice in all the national societies since all DM training workshops provide training on the use of SPHERE minimum standards.

Increased capacity to deliver quality services for refugees, internally displaced people (IDPs) and Returnees within the region

The National Red Cross Societies of Zambia, Malawi and Botswana are continuing to provide refugee services in their countries. However, since January not much support has been extended from the regional delegation due to limited funding. Funding has just been allocated from PRM³ for regional support to refugee services. This funding will be beneficial to the DM department in supporting the NS in the refugee programmes as well as prepare for any likely refugee situations.

³ PRM – U.S. Government, Bureau of Population, Refugees and Migration (Department of State)

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Impact

With the activities undertaken in this reporting period impact was in the alleviation of human suffering affected by emergency disasters. In the Namibia relief operation the Red Cross operations together with government action has benefited approximately 4,000 relocated people who have been provided with shelter and safe water. All efforts focused on ensuring that the relocated people continued having the necessary relief services within two to three months until the floods receded. There has also been impact on building capacity of the national society staff and volunteers in disaster response and there is increased visibility of the Red Cross actions.

Constraints

From January to May implementation of planned activities was hampered by limited funding. However, some confirmed DM funding was received from the Finnish Red Cross and the Norwegian Red Cross; a soft pledge was received from the Swedish Red Cross. This support has started to give light towards implementing planned activities. The Namibia floods relief operation had a negative impact on the planned regional activities as it diverted the regional human resources.

Organizational Development

Goal: Strong and dedicated national societies are making an effective and positive difference in the lives of vulnerable people.

Objective: National societies manage vulnerability-focussed programmes and lead their organizational development processes.

Progress/Achievements

The regional OD team has defined and addressed areas of capacity building in national society programmes contributing to greater programme impact.

In April the OD team had an orientation meeting with the secretary general of Botswana Red Cross following a request for support towards developing a revival plan to become a well functioning national society. Since January the regional OD programme technically and financially supported Botswana Red Cross in capacity building, restructuring and rebuilding systems. A follow up will soon be conducted focusing on the development of the recovery plan and ensuring that the proposals submitted to partners.

The regional delegation with support from the Swedish Red Cross carried out a review mission on the Federation support to Angola during the month of May 2004. The team was composed of a consultant from the Swedish Red Cross, Federation representative in Mozambique and the regional senior OD officer. The mission established the need for OD support in governance, management, human resource, financial management and programme coordination. A step by step process to carry out provincial and the general assembly and elections is currently being developed by the national society with the regional OD support. A team to work with regional OD team to support the change process taking place in Angola is being identified by the regional delegation and Africa Department.

In February and March the OD team held meetings with the Swedish Red Cross and Finnish Red Cross who had visited the region and with the in-country Danish Red Cross representatives who have pledged funding for the regional OD. The Finnish Red Cross support is directed at Baphalali Swaziland Red Cross and Mozambique Red Cross prioritizing development of sustainability while the Swedish Red Cross focus is on Zambia and Angola Red Cross integration of HIV/AIDS into HBC pilot projects. The Danish Red Cross supports the National Red Cross Societies of Zimbabwe, Malawi and Mozambique for capacity building.

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Integrated capacity building teams providing relevant programme support to National Societies.

The regional OD in collaboration with the ICRC facilitated an orientation workshop for Zimbabwe Red Cross staff at the headquarters in February. The orientation trainings are funded by ICRC, planned and implemented by Zimbabwe Red Cross and facilitated by the Federation OD department and ICRC officers. The regional OD officer also attended a SPHERE trainer of trainers training in Geneva in January, since then the officer has facilitated a SPHERE consultative workshop in April at the regional office for various humanitarian organizations and agencies in Zimbabwe including Zimbabwe Red Cross. The materials from the Trainer-of-Trainers (ToT) training were also shared with the RDRT team that responded to Namibia floods in March.

National societies have well defined and relevant strategic plans, targeting local vulnerabilities, effectively supported by partners

The regional programmes coordinator supported Lesotho Red Cross cooperation agreement strategy (CAS) development during the month of March 2004, a follow up to finalise the process will be undertaken before September.

Common approach to local capacity building is built and reflected in the impact of the work of National Societies focusing at branch and local levels

The senior OD Officer attended a twinning workshop in Nairobi where the focus was on sharing experience in branch development and resource development tools. This has resulted in developing a SAPRCS⁴ branch development manual to be adopted as a tool for capacity building during the twinning development programmes.

The resource development officer visited some of the resource development projects of Zimbabwe Red Cross to give support in the management of some of the projects that could generate income for the national society. A detailed report produced was shared with the Zimbabwe Red Cross management team and a follow up assessment on asset management will be conducted mid year.

The regional OD team together with the finance development delegate for Mozambique are working on a finance development proposal for rolling out the pilot finance development achievements and the lessons learnt from Mozambique Red Cross to the other nine national societies in the region. The plan has been developed and awaits endorsement by SAPRCS before implementation. If approved the rolling out process is expecting funding from the Norwegian Red Cross. The current regional concern on finance development has created the need to support national societies to build their capacities in reporting and managing their finances in a more transparent manner.

The volunteer finance advisor who was provided for Swaziland through a cooperation agreement with Skill Share International and the regional OD for a period of two years in 2003 has since changed roles and is now working on food security and finance development. The two projects are now being funded by the Finnish Red Cross. Zambia Red Cross has now progressed in the installation of the NAVISION accounting package and has also identified an external audit firm for its 2001 to 2003 operational period. Both activities are aimed at developing Zambia Red Cross financial management.

National societies have improved capacity to attract, manage and retain volunteers.

The regional OD department has compiled volunteer management information for purposes of evaluating the impact made from the joint activities carried out by OD and the national societies during 2003. The first volunteer policy draft for Zambia Red Cross was developed during the month of March, with technical support from the regional OD and a local consultant. The draft is currently under discussions in all the branches before its final adoption at the general assembly to be held in September.

⁴ SAPRCS – Southern Africa partnership of Red Cross Societies– formed in 1997, the partnership national societies aims to strengthen the collaboration, cooperation and self-determination of national societies in the region to achieve a greater level of self-sustainability.

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Impact

The branch development concept has gained momentum as Zimbabwe Red Cross was able to carry out an orientation of staff as the first level of the training. The second level will be at provincial level.

Through support given to Botswana Red Cross towards end of year last year the national society has managed at the beginning of this year to prioritise 15 branches for revival and all of them have been visited by headquarters staff including the secretary general. Zambia Red Cross has finally developed a draft volunteer policy utilising the funds that were allocated for branch development at the end of December 2003.

The financial support that was given to Namibia Red Cross towards the end of year last year has been used for strengthening the human resource management, through financing legal fees on the retrenchments and on the appointments of personnel and up dating of job descriptions.

Constraints

Limited funding to the programme and the delay in funds disbursing for the few pledges that were made is continuously hampering progress again this year for the OD team. Although the OD team has revised its appeal and budget to try and focus on short period support visits to national societies, there is still inadequate funding to enable the team to give the much needed direct support to the national societies.

Two senior finance officers from Zimbabwe Red Cross and Namibia Red Cross who had been identified as key personnel for learning lessons on NAVISION to other national societies have both left creating gaps in finance development within the region.

Table 1: Funding Analysis of regional OD

Donor	Pledge status	Amount CHF	Reallocations	Comments
Opening balance 2004	Various pledges	80,100		
Norwegian Red Cross pledge	hard pledge	63,500	10,295	Reallocations earmarked for OD activities in Angola, Zambia and Zimbabwe Red Cross
Finnish Red Cross	hard pledge	46,000	13,600	Earmarked for OD activities in Mozambique and Swaziland
Swedish Red Cross	soft pledge	83,300	30,261	Reallocations earmarked for OD activities in Botswana Red Cross, Lesotho Red Cross and Baphalali Swaziland Red Cross
Total		272,900		
1 st quarter expenditure		(90,000)		
Reallocations		(54,156)		
Available May-December 2004		128,744		Amount available for OD activities then is only CHF 128,744, this amount includes the Swedish Red Cross soft pledge.

N.B. The above information is indicative only, and must not be construed as an official financial report.

Humanitarian Values

Goal: Red Cross Red Crescent principles and humanitarian values are known and respected across the region and discrimination against vulnerable groups is reduced.

Objectives: The capacity of national societies in Southern Africa to generate a high degree of visibility, credibility, cooperation and support for Red Cross Red Crescent activities is strengthened.

The information delegate was requested to assist the South African Red Cross' preparation for an official visit of Princess Astrid of Belgium, and the president of the Belgian Red Cross. The princess visited Red Cross programmes in the Cape on 29 April, and generated great media interest in the work of the South African Red Cross, which extended all the way through its activities for the World Red Cross Red Crescent Day on 8 May.

A new information officer, hired by January, was tasked to supervise the HIV/AIDS newsletter, but by end of March it became apparent that he was not suitable for the job. He left the delegation by the end of his probation period by the end of March – further delaying production of the newsletter.

A press release was issued on population movements in Angola, Zambia and the Democratic Republic of the Congo (DRC) in the beginning of the year, resulting in some media interest. The response of the Zambia Red Cross and Mozambique Red Cross to severe cholera outbreak in February and March also generated a few articles both on the Federation's website and in The Federation's News. All articles were also posted on AlertNet and ReliefWeb.

Progress/Achievements

The national societies in the region have a strong and well developed communication capacity (planned in cooperation with the ICRC), and a regional communication network will be in place

As there has been no funding for capacity building of information staff in the national societies, this has been done more on an ad hoc basis, as the information delegate has been deployed to work for the Federation's regional programmes in different countries. The delegate has made a point of working closely with information staff of national societies on her visits, and thus attempted to transfer skills to the information officers while on the job. A communication workshop, to be held in cooperation with the ICRC as all communication programmes of national societies are funded by our sister organization, has not yet materialized in the first half of the year. Good relations with the ICRC communication and cooperation delegates have none the less been actively retained.

Links with the local and international media are further strengthened to ensure high profile of the Red Cross and secure continuous media coverage of Federation and national societies activities in the region

Relations with the international and local media in the ten countries of the southern Africa region have been further strengthened through issues of press releases and interviews. All articles written for the Federation's website on Southern Africa Red Cross programmes and operations have also been published on international websites such as AlertNet and ReliefWeb. The delegation will continue to maintain its relations with the international media based in South Africa through its membership of the Foreign Correspondent's Club.

Increased awareness of Red Cross Red Crescent principles and humanitarian values amongst key external stakeholders such as governments, authorities, embassies, the corporate sector, nongovernmental organizations and the general public.

More and more external stakeholders are aware of the Red Cross principles and humanitarian values through the constant advocacy campaigns, as well as through the media visibility of the national societies' and the regional delegation's operations and programmes. The Red Cross has earned a good reputation in its approach on linking the impact of HIV/AIDS on food insecurity in the region, and is seen as an authority on advocating the need for additional nutrition for HIV/AIDS infected and affected households.

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More and more Red Cross societies in the region have now been invited to participate in the vulnerability assessment committee (VAC), showing increasing respect for the Red Cross as a disaster response organization. The newest example is the flood operation in Namibia, where the Namibia Red Cross and the RDRT team with the support of the regional delegation was asked to take over the overall coordination of the disaster response. Through its integrity and professional performance, the Red Cross gained a national trust of both the government and the general public in Namibia, and made its name within the country.

Federation and national societies in the region will receive high media coverage at times of disasters or major events

The Namibia Red Cross enjoyed enormous media attention during the floods in the Caprivi Region, and gained world recognition for its timely and appropriate response. The southern Africa Red Cross societies have all enjoyed an impressive media visibility in their respective countries for their operations and special events, such as marking the World Red Cross Red Crescent day.

Integration of communication component in all regional programmes

All regional programmes are aware of the importance of incorporating information component in their programmes. Information activities of the information department largely rely on resources of the programmes, and most travels and advocacy campaigns are funded by respective programmes, as there is little as none funding for the humanitarian values programme. The cooperation between the information department and other programmes is excellent, and will be extended throughout the year, as the need occurs.

Impact

The National Red Cross Societies in the Southern Africa region and the regional delegation have enjoyed continuous media attention and visibility throughout the first six months of the year. This attention always increases at the time of disasters, such as could be seen during the Namibia floods. The impact of this visibility is clear, as more stakeholders and partners know the work of the Red Cross in the region and are willing to support the national societies and the regional programmes. This support is vital for the Red Cross to carry out its mandate of alleviating the plight of the most vulnerable people. The response to the emergency appeal in Namibia was crucial for the Red Cross to carry out its planned activities, and the media attention was an important vehicle to announce the outstanding needs and what could be done with appropriate support. The Red Cross in the region has also an important advocacy role to play in the fight against the HIV/AIDS pandemic, health emergencies, food insecurity, increasing poverty and growing vulnerability of people affected by consecutive disasters.

Constraints

Lack of funding always poses a constraint on the information activities of the regional delegation, although regional programmes have been very accommodating in paying for travels and cost of providing publicity to the work of the Federation and the National Red Cross Societies in the Southern Africa region. The information delegate hired a national information officer by January, in order to have a proper handover period once her mission came to an end. The person hired proved to be wrong for the job, and thus his contract had to be terminated by the end of March. Things that he had been tasked to do were not done properly, and that has delayed the publication of the HIV/AIDS newsletter.

The information delegate was away for most of April because of work in Namibia and South Africa, which delayed the hiring of a new information officer, who could only take up his post by the middle of May – leaving only three weeks of handover with the delegate. The information officer will thus need all the support he can have from the technical department in Geneva as well as from the programme managers within the delegation to be able to carry out his job sufficiently.

Coordination, Cooperation, and Strategic Partnership

Goal: The Federation is working together effectively and efficiently improving the lives of the vulnerable people in southern Africa

Objective: The southern Africa national societies achieve their humanitarian mandates through efficient framework of cooperation

The Federation coordination and facilitation of CAS processes have increase the impact of the Movement support to all nation societies in the region

This is an ongoing process that has had some success; however, a re-think on the CAS strategy is required to take this expected result forward.

The CAS process is consolidated and extended to all national societies in the region

The regional programmes coordinator supported Lesotho Red Cross cooperation agreement strategy (CAS) development during the month of March 2004, a follow up to finalise the process will be undertaken before September

Regionally managed Federation assistance is coordinated and targets specific needs for support from each national society

The information department continues to coordinate all its activities with programme managers, national societies in the region, and donor national societies who require assistance in promoting the Red Cross work in the region. For the past six months the information delegate has visited the National Red Cross Societies of Swaziland, Namibia, South Africa and Zimbabwe, and worked closely with the information department of most of the other six national societies in the region – especially the Mozambican Red Cross) which has just recruited a new information team. The information delegate has furthermore worked closely with the Finnish Red Cross on information issues, and the Danish Red Cross which sent out an information team in April/May to report on their bilateral programmes in Zimbabwe.

Improves southern Africa regional delegation coordination of the collective Federation disaster response

The delegation marked the World Water Day on 22 March with a website story on floods in the Zambezi, and preparations for water and sanitation activities were the floods escalate. That happened a week later when an emergency situation emerged in the Caprivi region in Namibia, resulting in the deployment of a RDRT for assessment and response. An emergency appeal was launched to assist some 20,000 people and relocate some 5,000 people displaced by the floods. This generated great media interest and the secretary general of the Namibia Red Cross as well as members of the team were interviewed by all major news agencies such as Reuters, AP, BBC, AFP and SABC, as well as all Namibian media. The information delegate was part of the RDRT initial team responding to the Namibia floods and carried out all information gathering for website articles as well as reports.

Improved harmonisation of activities with the ICRC and the partner national societies including the development of joint ventures, joint planning and sharing of knowledge and best practices

Relations with the ICRC regional delegation in Harare have been effective as there has been collaboration in facilitating a number of workshops.

Stronger ties are made between the regional delegation and partners to ensure adequate flow of resources to support programmes

The funding situation of the regional delegation programmes could be improved and this expected result will be a priority in the second half of the year.

[Contributions List below: Click here to go to title page and contact information](#)

Southern Africa regional programmes

ANNEX 1

APPEAL No. 01.21/2004

PLEDGES RECEIVED

14/07/2004

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
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CASH

REQUESTED IN APPEAL CHF ----->				5,184,993	TOTAL COVERAGE 46.9%	
CASH CARRIED FORWARD				1,309,600		
AMERICAN - RC		10,650	USD	13,488	09.03.04	HIV/AIDS
AMERICAN - GOVT/PRM		120,000	USD	152,820	26.03.04	REFUGEES PROGRAM
BRITISH - RC		25,000	GBP	55,400	19.01.04	OVC DELEGATE
BRITISH - RC		5,000	GBP	11,080	26.01.04	HIV/AIDS ASSESSMENT
BRITISH - RC		15,000	GBP	35,382	09.03.04	REGIONAL WATER SANITATION
BRITISH - RC				7,000	25.03.04	SAPRCS
BRITISH - RC		7,000	GBP	16,362	07.04.04	OVC TECHNICAL SUPPORT
BRITISH - RC		5,000	GBP	11,540	16.06.04	REG. DISASTER RESPONSE TRAINING
CANADIAN - RC		15,000	CAD	14,302	26.01.04	HIV/AIDS EVALUATION
CHINA - HONG KONG RC		33,885	HKD	5,371	23.03.04	FOOD SECURITY
DANISH - RC		54,722	USD	68,348	29.01.04	HBC HIV/AIDS
FINNISH - RC		30,000	EUR	46,785	17.05.04	WATSAN PROGRAMME
FINNISH - RC		15,000	EUR	23,393	17.05.04	ORGANISATIONAL DEVELOPMENT
FINNISH - RC		40,000	EUR	61,440	02.06.04	DISASTER MANAGEMENT
FINNISH - RC		15,000	EUR	23,040	02.06.04	HEALTH & CARE
GERMAN - RC		4,500	EUR	7,090	18.03.04	SAPRCS
ICRC		1,942	USD	2,473	26.04.04	PARTNERSHIP MEETING
LESOTHO - RC		3,498	USD	4,431	26.02.04	
NETHERLANDS - RC		4,463	EUR	6,960	22.03.04	
NORWEGIAN - RC		100,000	NOK	18,500	19.01.04	HIV/AIDS EVALUATION
NORWEGIAN - RC				7,000	09.03.04	SAPRCS
NORWEGIAN - GOVT/RC		842,500	NOK	159,233	25.04.04	ORGANISATIONAL DEVELOPMENT, HEALTH, REGIONAL COORDINATION
NORWEGIAN - RC		100,000	NOK	18,800	24.06.04	RD-RT WORKSHOP ZAMBIA
PRIVATE DONORS				2,292	05.01.04	
SWAZILAND - RC		1,844	USD	2,348	26.04.04	PARTNERSHIP MEETING
SWEDISH - GOVT		1,000,000	SEK	169,000	02.06.04	DISASTER MANAGEMENT
SWEDISH - RC		500,000	SEK	84,500	02.06.04	ORGANISATIONAL DEVELOPMENT
SWISS PRIVATE DONOR				130	05.01.04	
ZIMBABWE - RC		1,998	USD	2,496	03.02.04	SAPRCS
SUB/TOTAL RECEIVED IN CASH				2,340,604	CHF	45.1%

KIND AND SERVICES (INCLUDING PERSONNEL)

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
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Southern Africa regional programmes

ANNEX 1

APPEAL No. 01.21/2004

PLEDGES RECEIVED

14/07/2004

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
GREAT BRITAIN	DELEGATES			46,800		
ICELAND	DELEGATES			42,800		
Note: due to systems upgrades in process, contributions in kind and services may be incomplete.						
SUB/TOTAL RECEIVED IN KIND/SERVICES				89,600	CHF	1.7%

ADDITIONAL TO APPEAL BUDGET

DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
SUB/TOTAL RECEIVED				0	CHF	