

Appeal 2005



International Federation
of Red Cross and Red Crescent Societies

MOZAMBIQUE

Appeal no. 05AA012

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 181 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, objectives, and related activities to be implemented in 2005, and the corresponding 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 text, or can be requested through the respective regional department.

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Click on the title below to go to the relevant text; click on the figure to go to the programme budget

Programme title	2005 in CHF
Strengthening the National Society	
Health and care	847,222
Disaster management	180,648
Organizational development	241,302
Total	1,269,172¹

The following programme is included in this Appeal narrative; however, its associated budget is integrated within other programme budgets. Click the title to go to the text: [Coordination](#)

¹ USD 1,008,100 or EUR 817,500.

National Context

Following the end of the civil war and the first democratic elections in 1994, Mozambique has become Africa's most successful example of post-conflict reconstruction and development. Rapid economic growth, poverty reduction and political stability have been underpinned by market reform, democratic development and national reconciliation. As recently as the mid 1990s, the World Bank evaluated Mozambique as the world's poorest country in terms of GDP per head. The average economic growth rate since 1995 was around 8%, with an estimated growth rate of 10% in 2002 compared with 13.9% in 2001, one of the highest in the world.

The impressive performance notwithstanding, the country continues to face daunting development problems and challenges with major impact on human development. The challenges facing the country include illiteracy, unemployment, gender inequality, relatively high incidence of HIV/AIDS, high rate of vulnerability to natural calamities as well as the need for legal, judicial and public sector reform.

Despite the above-mentioned developments, Mozambique remains one of the poorest countries in the world. The 2004 UNDP report indicates that nearly four of every five people - 78.4% - live below the poverty datum line of USD 2.00 per day.



There is wide regional disparity in the incidence of poverty in the country. This ranges from 47% in Maputo city to 87.9% in Sofala. UNDP Human Development Report for 2004 ranks Mozambique 171 out of 175 countries on the human development index. The government has initiated a national programme of poverty reduction known as the Action Plan to reduce Absolute Poverty (PARPA). This constituted the basis for the IMF/World Bank supported Poverty Reduction Strategic Plan (PRSP). The government's programme clearly attempts to foster a people-centred policy framework to address the poverty problem. In partnership with NGO, government has undertaken a number of initiatives to support people living in poverty, particularly those who are affected by floods and drought.

Mozambique is prone to a wide range of natural disasters with devastating impact on people, livestock, property and infrastructure. In 2000 and 2001, floods caused considerable disruption and devastation in southern and central parts of the country. The international community played a major role in mobilizing financial assistance to support the reconstruction and recovery programme. In 2003, Mozambique was once again hit by two cyclones and drought. Over 1.2 million people were affected by the cyclones which resulted in increased number of cases of diarrhoea and cholera, and aggravated an underlying high rate of malnutrition.

The food security situation in the southern and central parts of the country remains serious after three to four years of crop failure due to floods and drought. The government of Mozambique foresees an 6-6.5% increase in food production this year. WFP is moving from emergency operation into a protracted rehabilitation and recovery operation with a medium to longer-term timeframe. This will provide new opportunities for partnerships for the Mozambique Red Cross especially within the social area and HIV/AIDS prevention and care.

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Human Development Indicators at a Glance

Category	Mozambique	Sub-Saharan Africa	World
Total population (millions)	18.5	641.0	6,225.0
GDP per capita (USD)	195	469	5,174
Life expectancy at birth (years): Female - Male	40.0 - 36.9	n.a.	n.a.
Infant mortality rate, per 1,000 live births	125	108	56
Maternal mortality per 100,000 live births (adjusted ratio)(2000)	1,000	n.a.	n.a.
Population (%) with sustainable access to an improved water source (2000)	57	57	82
HIV prevalence (% , ages 15-49) (2003)	12.2	7.7	01.1
Adult literacy rate (% , ages 15 and above): Female - Male	31.4 - 62.3	n.a.	n.a.

Source: UNDP Human Development Report, July 2004: Human Development Index (pages 139-250). Refer to http://hdr.undp.org/reports/global/2004/pdf/hdr04_HDI.pdf Note: Data is 2002 unless noted above.

Poor sanitation and hygiene in the most drought affected provinces has increased the number of cases of diarrhoea and has aggravated the already high rate of malnutrition that existed prior to the drought. Malaria morbidity and mortality is high and cholera cases reached 19,333 with 97 deaths during the 2003-2004 rainy season. Acute malnutrition continues to be high, national average is 6.4% for children aged between 6 - 59 months. But the optimistic crop forecast has reduced the need for immediate interventions within supplementary feeding.

The main causes of death in the country are malaria, communicable diseases, epidemics, child birth, malnutrition and diarrhoeal diseases. A study on demographic impact of HIV/AIDS in Mozambique estimated that, between 2002 and 2003, 1.36 million people will be living with AIDS: 43% men, 56% women. The projection is 1.6 million for 2004-2005, and 1.71 million for 2006-2007.²

For ease of reference, the table below lists the standard abbreviations and references used in this Appeal.

ART – Anti-retroviral treatment	PMTCT – Prevention of mother-to-child transmission
CAS – Cooperation Agreement Strategies	PNS - Partner National Society(ies)
CBF – Federation Capacity Building Fund	RDRT – Regional Disaster Response Team(s)
CBDP – Community-based disaster preparedness	SADC – Southern African Development Community
HBC – Home-based care	SDP – Strategic development plan
Movement - International Red Cross and Red Crescent Movement.	STI / STD - Sexually-transmitted infections / diseases
ORS – Oral re-hydration solution	TB – Tuberculosis
OVC – Orphans and other vulnerable children	VCA - Vulnerability and capacity assessment
PLWHA - Persons living with HIV/AIDS	VCT – Voluntary counselling and testing
ARCHI 2010 – refer to http://www.ifrc.org/what/health/archi/	
ERU – Emergency Response Unit(s) Refer to http://www.ifrc.org/what/disasters/eru/	
FACT – Field Assessment and Coordination Team(s). Refer to http://www.ifrc.org/what/disasters/fact/	
Strategy 2010 – refer to http://www.ifrc.org/who/strategy.asp	
Ouagadougou Declaration – refer to http://www.ifrc.org/meetings/regional/africa/5thpac/5thpacde.asp	
Seville Agreement – refer to http://www.ifrc.org/meetings/statutory/ga/ga97/ga_97_8.asp	

² Prepared by the National Institute of Statistics, Ministry of Health (MoH), Ministry of Planning and Finance, Centre for Population Studies, National AIDS Council, Medical Faculty-Eduardo Mondlane University and Ministry of Education (2002: pp 31,32,33)

Red Cross and Red Crescent Priorities

National Society Strategy/Programme Priorities:

The Mozambique Red Cross Society³ 2003-2005 strategic plan specifies that the main goals for the three-year period are to strengthen the capacity of the most vulnerable people in disaster preparedness and response, to play a major role in the fight against HIV/AIDS and to improve the health and social well-being of the people through community-based interventions. The target groups are rural population in the poorest districts (especially in areas prone to national disasters such as droughts or consecutive floods) and the urban poor.

In order to reach these goals, the Mozambique Red Cross will strengthen its own capacity and promote its sustainability. The national society has defined its priorities for 2003-2005:

- To become a strong member-based national society, able to cover at least its core costs from its own resources;
- To strengthen its structures from grass-root to headquarters levels with an emphasis on the local-elected bodies, in order to maximize the impact of its interventions in the communities, especially in the areas of disaster preparedness and response;
- To support the development of the communities so as to reduce their vulnerability and increase their capacity to deal with disasters through an integrated policy of disaster preparedness and response;
- To respond to the HIV/AIDS pandemic through a major involvement of national society staff and volunteers in the areas of prevention, community-based care to PLWHA, and to advocate against HIV/AIDS-related stigma and discrimination.
- To consolidate and strengthen the community-based health programme with emphasis on community involvement in health education, mother and child health care, education on malaria, cholera and other preventable diseases;
- To continue water and sanitation (WatSan) activities, in particular community education;
- To promote social support for vulnerable individuals or groups targeting children in difficult circumstances, widows in need, elderly, the disabled, through community-based initiatives;
- To mobilize massive participation of youths in Red Cross activities as a common strategy for all programmes;
- To improve volunteer management and to advocate volunteers as the heart of the organization.

Movement Context:

The Mozambique Red Cross Society adopted its first strategic plan at the general assembly in April 1999. In light of experiences gained during and after the devastating flood operations in 2000, coupled with a set of commitments made at the Pan-African Conference of September 2000, the national society elaborated its 2002-2004 CAS. The 2004-2005 CAS was also developed by the national society with the support of the Federation and with the participation of PNS representatives in Mozambique

With Federation support, the national society revised its Strategic Plan in order to incorporate new factors such as:

- The fight against HIV/AIDS.
- Launching a ten-year campaign to reduce the vulnerability of Mozambican people against the most common health threats through ARCHI 2010.
- Prioritizing programmes in line with the Federation Strategy 2010 and its four core areas of disaster preparedness, disaster response, health and care, and the promotion of the Movement's fundamental principles and humanitarian values.

³ Mozambique Red Cross Society - <http://www.ifrc.org/where/country/check.asp?countryid=120>

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Apart from the support through the Federation, the Mozambique Red Cross has received bilateral support from:

- Norwegian Red Cross mainly in finance development and governance;
- Canadian Red Cross in branch development, governance and management training;
- British Red Cross in human resources review, income generation, branch development manual and reprint of youth manual, and IT development;
- Danish Red Cross establishment of an internal audit unit.

Other bilateral projects such as community-based health care, disaster preparedness, food security, HIV/AIDS financed by Belgium Red Cross Netherlands Red Cross, Danish Red Cross, German Red Cross, Icelandic Red Cross and Spanish Red Cross have also included organizational development aspects - a great achievement.

Strengthening the National Society

Health and Care: Community-based health care

Background and Achievements

Mozambique, like many other African countries, suffers from a high prevalence of poverty-related diseases. The main health problems are; malaria, HIV/AIDS, tuberculosis, cholera and other diarrhoeal diseases, and a high rate of malnutrition among children. Furthermore, the access to health facilities is poor.

Malaria is the biggest cause of death. The poorest populations are most at risk and the disease often strikes children (one in every four dies before the age of five), women who lose their acquired immunity to malaria during pregnancy and people who lack any immunity to the disease, such as displaced persons and migrants. The well-deserved attention paid to HIV/AIDS over the past few years has overshadowed the rapid comeback of malaria. Unfortunately, only 1-2% of people in malaria zones sleep under mosquito nets.

It is estimated that about 1.5 million Mozambicans are infected with HIV/AIDS. Life expectancy has fallen to below 40 years due the HIV/AIDS crisis. Malnutrition and food insecurity are endemic. Today, nearly 40% of Mozambican children below five years are affected by chronic nutritional deprivation.

The national society's health programme in collaboration with ministry of health, UN agencies, and other NGO is focused on:

- Malaria treatment and prevention including the use of mosquito nets.
- ORS education.
- Nutrition, including the prevention and care of moderate and severe malnutrition in children under five, and in pregnant and lactating women.
- Supporting the government on the promotion of mass vaccination campaigns, routine immunization, and vitamin A supplementation for children.
- Collaborating to reduce the spread and impact of HIV/AIDS/STI.
- Developing community-based first aid and community-based health care activities, which involve the construction and maintenance of first aid posts and community participation in the prevention and treatment of the main endemic diseases.
- Providing safe water supply and adequate sanitation to reduce the impact of WatSan related diseases.

In addition to Federation support, the health and care programme is supported by numerous bilateral PNS and UNICEF.

In the past two years, participatory approaches have been shown to be effective in programme planning and implementation. Improvement in monitoring and evaluation of impact is still required and this will be a focus in 2005. Federation support will be targeted at eight districts in Sofala, Tete, Gaza Provinces and Maputo City.

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Goal: Sustainable improvement in health and well-being for the vulnerable population in eight districts by 2006

Objective: The incidence and impact of the major health problems on the vulnerable population in eight districts is reduced by 2006

Expected Results:

- Vulnerable people knowledge and skills to avoid HIV/AIDS/STI infection is increased.
- Vulnerable people knowledge and skills to avoid and control malnutrition in vulnerable under-five children is reduced
- The incidence and impact of malaria, tuberculosis and hygiene related diseases on vulnerable people is reduced
- The national society's response to major public health problems and health emergencies is more effective.

<Refer to the Logical Framework Planning Matrix: Mozambique Community-based Health Care>

<http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/logframes/africa/05AA012HC.pdf>

Health and Care: HIV/AIDS

Background and Achievements

The national society has been implementing its five-year strategic HIV/AIDS plan since 2002, covering nine provinces to date. The programme covers;

- Prevention through peer youth education
- Care and support for PLWHA and OVC
- Advocacy for the rights of PLWHA and OVC

To date, there are 28 prevention projects in nine provinces and 690 youth peer educators have been trained. A total of 150 volunteers have been trained in 21 HBC projects and they are supporting 2,400 clients.

Food security situation for HBC clients has been increased through provision of seeds and tools. Support for development of poultry projects and training of HBC client families in vegetable growing has been received. In some areas food distribution is being made with WFP support.

During 2004, the HIV/AIDS programme received financial support through the Federation and from many PNS bilaterally and additionally through partnerships with Save the Children, WFP, and the National AIDS Council. Technical support was received from the Ministry of Health.

In 2005, as well as consolidating existing projects, there will be one new prevention project and six new HBC projects. The Federation support will be channelled to Tete and Nampula provinces and will cover prevention, HBC and advocacy activities.

The national society has learned that good collaboration with the government health sector is a key issue in the implementation of the HBC programme. In prevention, use of innovative and participatory methodologies is necessary to improve the impact of the activities at community level. Close supervision and support to the volunteers at local level is also important. There is a need to encourage the involvement of the community leaders, churches and teachers in the implementation of projects.

The Federation regional HIV/AIDS support team will continue to provide technical support to the national society projects in the form of monitoring and support visits and training. The funding for this support is in the regional budget.

Approximately 70% of the 2005 HIV/AIDS project budget will be received through the consortium funds for the regional HIV/AIDS programme. This Appeal seeks the remainder, approximately CHF 77,000, for this project.

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Goal: Sustainable improvement in health and well being of targeted vulnerable populations.

Objective: The quality of life for 5,000 PLWHA and 1,000 OVC is improved and 500,000 youths are reached with prevention activities.

Expected Results:

- The HBC project is expanded to reach 5,000 PLWHA.
- A total of 1,000 OVC have received educational, material, psychological and social support
- A total of 1,000 PLWHA and 2,000 OVC have improved access to food and quality of diet
- Stigma and discrimination decrease through advocacy concerning the rights of PLWHA and OVC
- Youth peer education reaches 500, 000 young people.

<Refer to the Logical Framework Planning Matrix: Mozambique Health-HIV/AIDS>
<http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/logframes/africa/05AA012HH.pdf>

Health and Care: Water supply, sanitation and hygiene promotion

Background and Achievements

The Federation supports the national society's water supply, sanitation and hygiene promotion projects through the regional Water and Sanitation Delegate based in Harare. The capacity building support provided is in strategic and project management and in technical skills and is detailed in the Harare Regional Delegation Appeal document. Work in this sector is an integral part of the national society strategic plan and the cooperation agreement strategy (CAS). The national society coordinates its work with other sector agencies through its participation in monthly national/ local sectoral coordination meetings. Its partners at the implementation level are the local government agencies involved in the health and care sector and other agencies, for example UNICEF and Oxfam.

In the last two years, the national society has been implementing water supply, sanitation and hygiene promotion development projects, funded by the British Red Cross and Finnish Red Cross through the Federation, and funded by other PNS and external donors bilaterally, that have benefited over 100,000 vulnerable people in all the provinces. Improving vulnerable people's access to safe water and adequate sanitation is a vital component of poverty reduction as recognized in the UN millennium development goals. Improved access to safe WatSan not only leads to improvements in health but also saves time and energy and enhances livelihood opportunities.

The national society with the support of the Federation will continue strengthening the 2005 project in the areas of hygiene/ sanitation promotion and in training of communities to manage their water supply facilities ("software"⁴ aspects of the project). The project interventions work in the same geographical area and are coordinated with other national society health operations.

In 2005, there will be a continuing focus on working in small local government administrative units to raise the water supply and sanitation services to defined government minimum service levels then exiting from this area. The sustainability of the projects is then assessed one year after exit from the area. This strategy provides a cost per beneficiary that is good value and allows for improved sanitation and hygiene promotion, community management training, monitoring and evaluation due to reduced time and costs on travelling to the project sites and better organizational learning.

Goal: Sustainable improvement in health and well being for vulnerable population (20,000) in Nampula Province by 2006.

Objective: Establishment of sound, sustainable environmental services for vulnerable population (20,000) in one district in Nampula Province by 2006 in water supply, sanitation and hygiene promotion

⁴ '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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Expected Results:

- A total of 40 viable, fully functioning and adequate community managed water supplies in low income villages by 2006 (40 hand-pump rehabilitations).
- A total of 40 community based operation and maintenance and cost recovery systems established and functioning by 2006.
- Distribution of 600 SanPlats to households who build adequate traditional latrines by 2006.
- Hygiene promotion and sanitation promotion volunteers effectively cover target population of 20,000 by year 2006.

*<Refer to the Logical Framework Planning Matrix:
Mozambique Health-Water supply, sanitation and hygiene promotion>
<http://www.ifrc.org/cgi/pdf_appeals.pl?/annual05/logframes/africa/05AA012HW.pdf>*

Disaster Management

Background and Achievements

Mozambique is one of the most disaster-prone countries in the Southern Africa region. With the exception of Niassa province, all the northern provinces are prone to natural disasters such as cyclones and flash floods, whereas the southern and central provinces are prone to floods, and recurrent droughts. The impact of these disasters on the population has been exacerbated by the prevailing HIV/AIDS pandemic in the whole country.

In the past ten years, Mozambique Red Cross has responded to natural and man made disasters that include a civil war, refugee returnees, droughts, cholera epidemics, train disaster, chemical explosion and cyclones which caused devastating floods. Through lessons learnt the national society has gained experience and capacity in disaster management. Due to the country's disaster scenarios and vulnerabilities Mozambique Red Cross has recognized the need to empower local communities to reduce risks through community-based initiatives following the major floods of 2000 and 2001.

The national society has made strides in capacity building of its human resources through training of staff and volunteers in various disaster management modules, including empowering communities in disaster awareness as well as disaster simulations. Training of volunteers and dissemination of early warning systems for tropical cyclones has been undertaken. With the support of stakeholders, emergency stocks have been purchased and pre-positioned in disaster prone areas and the national society has been able to respond to disasters effectively in the past two years.

With bilateral support and in coordination with the National Institute for Disaster Management (INGC) Mozambique Red Cross has established three CBDP projects in three provinces of Inhambane, Zambezia and Sofala. In the 2005 disaster management programme the main focus is to continue strengthening the disaster management capacities to be able to deal effectively with disasters with the participation of communities at risk. The CBDP programmes established in the three provinces are benefiting the vulnerable communities and the national society would like to extend these projects into seven other provinces. This involves staff and volunteers conducting VCA in seven districts of the targeted provinces. Human resource capacity building will include training of staff and volunteers in various modules of disaster management. This will include disaster needs assessment, SPHERE minimum standards, the code of conduct and the CBDP first module. The national society will continue sending participants to the RDRT training including exchange programmes with operating national societies in the region.

In empowering communities to mitigate disasters, Mozambique Red Cross will conduct VCA in seven districts through participatory rural appraisal, where communities can identify their priorities after which CBDP will be designed. Training on the CBDP will be provided and the established early warning systems will be disseminated to communities in the targeted districts.

In relation to effective disaster response capacity, efforts will be directed at consolidation of local structures for prompt and appropriate response to disasters by establishment of local committees in ten CBDP target communities and pre-positioning of emergency stocks. Disaster simulations for water rescuing will be conducted with the participation of communities and other stakeholders.

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Goal: The vulnerability of the populations living in disaster-prone areas is reduced.

Objective: The vulnerability of the communities in disaster-prone areas in all provinces is reduced and their capacity to respond to disasters strengthened.

Expected Results:

- Capacity of Mozambique Red Cross staff and volunteers in disaster management increased through tailor – made training.
- VCA conducted in seven disaster prone districts in order to design and prioritize CBDP activities in seven communities.
- Vulnerable communities' capacity in disaster management is strengthened in seven communities through expansion of the CBDP programme basic activities.
- Mozambique Red Cross effective disaster response capacity strengthened through consolidation of local structures for prompt and effective response to disasters.

<Refer to the Logical Framework Planning Matrix: Mozambique Disaster Management>
http://www.ifrc.org/cgi/pdf_appeals.pl?/annual05/logframes/africa/05AA012DM.pdf

Organizational Development

Background and Achievements

Since the post-war restructuring process of the Mozambique Red Cross in 1997 and 1998, organizational development (OD) has been a major concern for the national society, in order to strengthen the foundation, structures and operation at all levels and to increase its degree of sustainability. The operations during and after the severe floods in 2000 and 2001 reinforced the crucial need to incorporate capacity building in all its programmes to ensure successful implementation.

Strengthening of Mozambique Red Cross local, district and provincial branches has become the priority area. Databases have been established on volunteers, district and provincial commissions. The regional branch development manual has been translated, improved and adapted to the Mozambican context. Governance and management training for district committees has also been carried out in six of the 11 provinces. Since 2003 internal elections have taken place in all provinces and 97 districts. The general assembly and national elections will be held early 2005.

Tools for volunteer management and the assessment of the functioning of branches have been developed and used on an experimental basis. The implementation of the youth policy and the improvement of membership management are also in process.

A finance development programme, supported by the Federation since 1999, initially concentrated on Mozambique Red Cross headquarters, now seeks to improve financial management in all provinces. Since 2001, all finance and programme staff of Mozambique Red Cross headquarters and provincial branches, including provincial presidents and treasurers, has received training in finance management. The national society is updating its finance software and intends to extend its use to the provincial branches. The internal financial control systems are now in place and the follow-up of the global audit findings has been undertaken. A financial supervision guide has been established and headquarters finance staff have travelled to all the branches to follow up on the audits findings and develop the branch financial officers capacity. A finance management manual has been drafted. Global external audits are conducted annually. Meanwhile, an internal audit unit is being set up.

During the past years, the Mozambique Red Cross has greatly improved its information systems with support from the regional LISN project as well as from various bilateral partners. The headquarters has now a well functioning network. All provincial branches have computers and are electronically linked to the headquarters. Computer literacy and use particularly in the provinces still needs to be enhanced.

An overall review of human resources policies and systems took place in 2002. Implementation of the recommendations started in 2003 and will continue in 2005.

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With regard to financial resource development, an income generation policy was approved in 2002. In 2003 a finance resource development strategy that should lead the national society to a minimum level of sustainability was drafted and presented to its partners. A finance resource development plan has been drafted for 2004-2005. A "Friend of the Red Cross" campaign was initiated amongst some of the biggest companies in the country.

Mozambique is vast geographically and communications are difficult. In addition, qualified human resources in the organizational development area are limited and very often over-stretched with different responsibilities. At the provincial level there is no specific officer for OD. Progress is slowly and a more systematic follow-up is needed.

The area of most concern, however, is the lack of financial sustainability of the national society. In spite of all efforts, the Mozambique Red Cross covers only about one third of its core costs at present.

Goal: The lives of vulnerable people in Mozambique are improved and their vulnerability to disasters reduced.

Objective: The national society's structure, systems and human resource skills has been strengthened at all levels in order to increase its capacity for quality service provision in a sustainable manner.

Expected Results:

- **Governance and branch development:** The Mozambique Red Cross branch structure at national, provincial, district and local level is developed and/or improved. The branch structure capacity to deliver services is improved. The governing bodies better understand and practice their governance role.
- **Volunteer management development:** The ability of the Mozambique Red Cross to develop, manage and retain volunteers is improved.
- **Youth development:** The Mozambique Red Cross youth structure is strengthened and youth members are elected to be part of governing bodies.
- **Finance development:** Mozambique Red Cross's finance management is improved at national, provincial and district level.
- **Programme management development:** The day-to-day management skills of senior and programming staff are improved.
- **Information systems development:** Mozambique Red Cross's telecommunications, radio and computer systems are improved.
- **Human resources development:** Human resources management and development is improved at all levels.
- **Finance resource development:** Mozambique Red Cross's ability to generate financial resources and broaden the range of sources of funding is improved.
- **Promotion of the fundamental principles, humanitarian values and the Mozambique Red Cross image:** Increased understanding of the fundamental principles, humanitarian values and Mozambique Red Cross mission amongst Mozambique Red Cross staff and volunteers, various targets groups and the general public is increased.

<Refer to the Logical Framework Planning Matrix: Mozambique Organizational Development>
<http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/logframes/africa/05AA012OD.pdf>

Coordination, Cooperation, and Strategic Partnerships

Representation, Implementation and Management

Background and Achievements

After the floods in 2000 and 2001, a large number of PNS engaged in bilateral programmes with Mozambique Red Cross and the Federation established a delegation to implement a big relief operation and coordinated the multi-faceted Red Cross interventions. In the post-flood recovery phases, the number of PNS with representations in Mozambique gradually diminished and the programmes moved slowly towards support for development activities. At present, Danish Red Cross, German Red Cross, Spanish Red Cross and Finnish Red Cross have their in-country delegations in Mozambique. Mozambique Red Cross maintains bilateral cooperation with American Red Cross, Belgium Red Cross, Netherlands Red Cross, Austrian Red Cross, British Red Cross, Norwegian Red Cross, and ICRC. Partners outside the Movement include the JLC, OXFAM, Save the Children, National Aids Council (CNCS), UNICEF and ARCI-Svillupo. There are regular coordination meetings with PNS representatives in

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Mozambique, to ensure that all activities are in line with the national society priorities and policies. Coordination meetings are the platform for exchanging views and analyzing the situation in the country.

The HIV/AIDS prevention and care activities are coordinated with the following: local health centres, Ministry of Health, NGO, the National AIDS Council, Associations of PLWHA, Network of AIDS Services Organizations (MONASO), and Save the Children. The Mozambique Red Cross participates in HIV/AIDS coordination meetings together with PNS. The Mozambique Red Cross is member of the board of the National AIDS Council.

The potential of a partnership is being explored between WFP and Mozambique Red Cross in building up community safety nets within the food security and HIV/AIDS context. In addition, Mozambique Red Cross participates in the government technical council for disaster management meetings, and in the UN and government jointly-organized disaster management partner group meetings which are called on an ad hoc basis.

In disaster situations the national coordination body is the National Institute for Disaster Management (INGC). The Mozambique Red Cross has a good collaboration with INGC both locally and in the provinces and participates in coordination meetings with the government and UN. The national society also has close coordination with the Ministry of Women Affairs and Coordination of Social Action, the Ministry of Public Works and Housing and water department.

International Disaster Response

Background and Achievements

The Mozambique Red Cross has a well developed network of 4,800 volunteers countrywide, who can be mobilized when disasters strike. Being present in all 11 provinces with volunteers in most districts, the national society is often the first to respond, when a disaster strikes. The Mozambique Red Cross provides invaluable support to the government in disaster response to assist the victims. Often the disasters are of a scale that can be handled locally without the need for major external input. In this respect, the Federation ensures support for the national society response through mobilization of resources and information sharing through the established Federation channels.

In the event of large-scale disasters which draw massive international assistance, the Federation offers a platform for a coordinated response within the International Red Cross and Red Crescent Movement in support of national society through the Federation disaster coordination and response tools such as the deployment of FACT and ERU in order to maximize the quality, effectiveness and appropriateness of the assistance to the beneficiaries. The national society has a number of RDRT trained staff who will be an integral part of the assessment and coordination mechanism. The Federation together with Mozambique Red Cross ensures that PNS with interest in bilateral operations are allocated tasks and integrated within the general framework of the operation in accordance with Mozambique Red Cross priorities.

Effective Representation and Advocacy

Background and Achievements

The Mozambique Red Cross is a well-respected humanitarian organization in the country. This provides an excellent opportunity for advocacy on key agenda of the Red Cross, in particular, the promotion of humanitarian values and core intervention areas of HIV/AIDS, community-based health care, WatSan, and the integration of these within the context of food insecurity, extreme vulnerability and HIV/AIDS. Other important themes are disaster preparedness and response, dissemination of International Humanitarian Law and the Movement's fundamental principles. The national society has recruited a Communication Officer to enhance the visibility and credibility for the national society's community-based humanitarian work.

Its financial resource development strategy is built on the respect the national society earns in the country. Increased visibility of the national society's humanitarian activities in the communities will promote interest from private enterprises to support Mozambique Red Cross financially.

Mozambique Red Cross will elect a new executive council and a new president. This will be used as an opportunity to raise awareness about the national society, the fundamental principles and humanitarian values, and to promote a membership campaign.

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The Federation has a status agreement with the government of Mozambique, and represents the Federation in the international humanitarian community alongside Mozambique Red Cross. The Federation representative will use the position to promote the work of the national society within the donor community and UN.

Delegation Management

Background and Achievements

In 2002, the Federation delegation in Mozambique was downsized; between early 2003 to July 2004, there has been only one Federation Delegate present in Mozambique. The Finance Development Delegate provided technical support to the national society in the field of finance development and management. The financial management capacity of the Mozambique Red Cross has been strengthened to such a degree that further external assistance is no longer needed. However, the need for other delegates will be assessed and meanwhile, the national society has been coordinating its activities of WatSan, health, HIV/AIDS, and organizational development with the Harare regional delegation.

Mozambique Red Cross has requested a representative who will support the national society with special emphasis on marketing of the national society. The main objective of the Federation assistance is to build up the Mozambique Red Cross capacity to develop quality programme intervention through:

- improved image and profile within the general public in Mozambique and abroad
- improved management structures at all levels;
- effective planning, implementation, evaluation and reporting;
- strengthened disaster coordination, response and preparedness capacity;
- improved communications between the Mozambique Red Cross, the Federation and PNS;
- improved coordination within the international humanitarian community;
- effective finance resource development strategy; and
- enhanced resource mobilization.

For further information please contact:

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BUDGET 2005

PROGRAMME BUDGETS SUMMARY

Appeal no.: 05AA012

Name: MOZAMBIQUE

PROGRAMME:	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	Emergency	Total
	CHF	CHF	CHF	CHF	CHF	CHF	CHF
Shelter & construction	28,200	0	0	0	0	0	28,200
Clothing & textiles	10,791	0	0	0	0	0	10,791
Food	0	0	0	0	0	0	0
Seeds & plants	0	0	0	0	0	0	0
Water & Sanitation	93,388	0	0	0	0	0	93,388
Medical & first aid	35,880	0	0	0	0	0	35,880
Teaching materials	21,871	0	0	0	0	0	21,871
Utensils & tools	0	0	0	0	0	0	0
Other relief supplies	16,864	0	0	0	0	0	16,864
SUPPLIES	206,994	0	0	0	0	0	206,994
Land & Buildings	0	0	0	0	0	0	0
Vehicles	64,515	0	0	0	0	0	64,515
Computers & telecom	2,678	0	0	0	0	0	2,677
Medical equipment	0	0	0	0	0	0	0
Other capital exp.	0	0	0	0	0	0	0
CAPITAL EXPENSES	67,193	0	0	0	0	0	67,192
Warehouse & Distribution	1,536	6,216	0	0	0	0	7,752
Transport & Vehicules	33,031	0	0	32,130	0	0	65,161
TRANSPORT & STORAGE	34,567	6,216	0	32,130	0	0	72,913
Programme Support	55,069	11,742	0	15,685	0	0	82,496
PROGRAMME SUPPORT	55,069	11,742	0	15,685	0	0	82,496
Personnel-delegates	0	0	0	0	0	0	0
Personnel-national staff	279,099	44,060	0	99,452	0	0	422,610
Consultants	3,372	0	0	0	0	0	3,372
PERSONNEL	282,471	44,060	0	99,452	0	0	425,982
W/shops & Training	63,869	91,656	0	23,205	0	0	178,729
WORKSHOPS & TRAINING	63,869	91,656	0	23,205	0	0	178,729
Travel & related expenses	26,315	21,700	0	31,246	0	0	79,260
Information	14,884	3,824	0	6,426	0	0	25,134
Other General costs	95,861	1,450	0	33,159	0	0	130,469
GENERAL EXPENSES	137,060	26,974	0	70,831	0	0	234,864
TOTAL BUDGET:	847,223	180,648	0	241,303	0	0	1,269,172