

# Appeal 2005



International Federation  
of Red Cross and Red Crescent Societies

## SOUTH AFRICA

### Appeal no. 05AA014

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

*This document reflects a range of programmes, 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
<b>Strengthening the National Society</b>	
Health and care	471,632
Disaster management	154,029
Organizational development	360,155
<b>Total</b>	<b>985,817<sup>1</sup></b>

*The following programmes are included in this Appeal narrative; however, their associated budgets are integrated within other programme budgets. Click the title to go to the text: [Humanitarian Values - Coordination](#)*

<sup>1</sup> USD 783,000 or EUR 635,000.

## **National Context**

The South African third democratic elections were held on 14 April 2004. Ten years after installing a democratic government, the country has made remarkable progress. The judicial, educational, health and housing sectors have been transformed and the country is governed by a democratic constitution. Sound macro-economic principles and prudent monetary and fiscal policies have facilitated slow but steady economic growth and are continually improving business confidence. Accessibility to potable water and electrification, home ownership, education and better living standards through the implementation of the integrated, coherent socio-economic policy framework known as the reconstruction and development programme (RDP) has considerably improved.



There is still work to be done, as the country is still faced with a lot of challenges, such as very high crime levels and HIV/AIDS which is threatening to undo the good work that has been achieved so far. Income inequality is still among the highest in the world with nearly 60% of the population living in poverty; 36% is unemployed. The health system, ranked 175 out of 191 by WHO (2002), struggles under the weight of HIV/AIDS and related diseases.

The HIV infection rate of women attending public antenatal clinics in 2002 was 26.5% and as high as 36.5% in KwaZulu Natal. At the beginning of August 2003 the South African government developed an operational plan for rolling out ART to its population. This has enabled effective response to the pandemic. The government hopes to reach 53,000 with ART by March 2005. HIV/AIDS was responsible for 39% of all deaths in South Africa in 2002 and this is expected to increase to over 50% in 2005 according to the Health Systems Trust. About five million people are estimated to be infected with HIV in South Africa and the projections suggest that this figure will rise to between seven and nine million by 2010. There are over 600,000 maternal orphans; this is expected to increase to about 1.5 million by 2007. Life expectancy is expected to drop from 55 to about 40 years by the year 2010. The Ouagadougou Declaration and ARCHI 2010 have highlighted the determination of African Red Cross national societies and others to meet this challenge.

Statistics in South Africa estimates that the 2002 population was 45.2 million and according to the South Africa Survey 2002/2003:

- 71.6% literacy rate among people aged 20 and older in 2001,
- 29.4% of the population were unemployed in 2002 (this excludes an additional 11.5% unemployed persons who were actively seeking employment),
- 55% of the population are urbanized (28% in 1921),
- 73% of households were formal in 2000,
- 66% of households had electricity in 2001,
- 84% of households had access to clean water in 2000 although 4% had to travel 1km or more to fetch the water and 55% had no running water inside their homes,
- 43% of households did not have access to flush or chemical toilets in 2000
- There are huge differences between income groups, with 51% of South Africans earning less than USD 200 per month and only 14% earning over USD 1,000 per month.

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In 2003 expenditure on social welfare grants was ZAR 34.8 billion (from ZAR 10 billion ten years ago) with over seven million beneficiaries monthly of which some 3.9 million are children. The payment of grants is South Africa government's biggest poverty alleviation programme; while it is vital for the recipients, the programme is not sustainable hence the need for more community-based approach to the problems.

### Human Development Indicators at a Glance

Category	South Africa	Sub-Saharan Africa	World
Total population (millions)	44.8	641.0	6,225.0
GDP per capita (USD)	2,229	469	5,174
Life expectancy at birth (years): Female - Male	51.9 - 46.0	n.a.	n.a.
Infant mortality rate, per 1,000 live births	52	108	56
Maternal mortality per 100,000 live births (adjusted ratio)(2000)	230	n.a.	n.a.
Population (%) with sustainable access to an improved water source (2000)	86	57	82
HIV prevalence (% , ages 15-49) (2003)	24.3	7.7	01.1
Adult literacy rate (% , ages 15 and above): Female – Male	85.3 - 86.7	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](http://hdr.undp.org/reports/global/2004/pdf/hdr04_HDI.pdf) Note: Data is 2002 unless noted above.

South Africa faces environmental disasters common to the southern Africa region such as drought, tropical cyclones and floods. The impact of these coupled with lack of education and infrastructure in some parts of the country, overcrowded living conditions and township fires have worsened the plight of the poor communities. There is very high likelihood of mass population movements, mostly from the scarcely resourced rural areas to urban areas due to economic reasons, seeking better health care (particularly for HIV/AIDS related infections including TB); political and tribal unrests still occur in some areas such as KwaZulu Natal.

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

ART – Anti-retroviral treatment	OVC – Orphans and other vulnerable children
CAS – Cooperation Agreement Strategies	PLWHA - Persons living with HIV/AIDS
CBFA – Community-based first aid	PNS - Partner National Society(ies)
CHBC – Community home-based care	PMTCT – Prevention of mother-to-child transmission
HBC – Home-based care	RC-Net – Red Cross Red Crescent Network for East Africa
HELP – Health emergencies in large populations	RDRT – Regional Disaster Response Team(s)
IEC – Information, Education, Communication	STI/ STD - Sexually-transmitted infections / diseases
IHL – International Humanitarian Law	TB – Tuberculosis
Movement - International Red Cross and Red Crescent Movement.	VCA – Vulnerability and capacity assessment
	VCT – Voluntary counselling and testing
ARCHI 2010 – refer to <a href="http://www.ifrc.org/what/health/archi/">http://www.ifrc.org/what/health/archi/</a>	
ERU – Emergency Response Unit(s) Refer to <a href="http://www.ifrc.org/what/disasters/eru/">http://www.ifrc.org/what/disasters/eru/</a>	
FACT – Field Assessment and Coordination Team(s). Refer to <a href="http://www.ifrc.org/what/disasters/fact/">http://www.ifrc.org/what/disasters/fact/</a>	
Strategy 2010 – refer to <a href="http://www.ifrc.org/who/strategy.asp">http://www.ifrc.org/who/strategy.asp</a>	
Ouagadougou Declaration – refer to <a href="http://www.ifrc.org/meetings/regional/africa/5thpac/5thpacde.asp">http://www.ifrc.org/meetings/regional/africa/5thpac/5thpacde.asp</a>	
Seville Agreement – refer to <a href="http://www.ifrc.org/meetings/statutory/ga/ga97/ga_97_8.asp">http://www.ifrc.org/meetings/statutory/ga/ga97/ga_97_8.asp</a>	

## Red Cross and Red Crescent Priorities

### National Society Strategy/Programme Priorities

The South African Red Cross Society<sup>2</sup> is focussing its efforts on the change process that has been initiated in 2003 and is making progress towards becoming a well-functioning national society. Given the high HIV/AIDS prevalence rate in South Africa, the national society continues to be committed to scaling-up its HIV/AIDS activities and related networking. At the same time, the national society recognizes that it is important for staff, volunteers and the public to know about the Fundamental Principles of the Movement.

The South African Red Cross national office is currently based in Cape Town; the implementing structure consists of five regional offices, 29 branches and 80 local committees with over 5,000 active volunteers. The national society works in coordination with the local and provincial government emergency and disaster structures and is represented at national level on the national disaster management committee. A new disaster management bill which highlighted the role of volunteers in disasters is being implemented by government at all levels. The South African Red Cross is liaising with the government to formalize the role for the national society in relation to the new legislation.

The national society went through a long-term strategic planning process since July 2001 that culminated in the South African Red Cross five-year development plan (2003-2007). Based on this plan, an annual plan of action was developed in 2003 underlining identified priorities of the national society. The five-year development plan focuses on the four core areas namely, Health and Care, Disaster Management (DM), Organization al Development (OD) and Humanitarian Values.

Based on the results and recommendations of the self-assessment processes and five the in-depth assessments carried out in 2002 - 2003, the South African Red Cross has expanded OD programme. In 2003, OD programme defined six projects; governance and management development, administration and financial management development, human resources development, external relations and resource mobilization development, volunteer management, and branch development and empowerment of youth, focus on young women in leadership - to facilitate the development of the national society in key priority areas. It is important to ensure support in 2005 to be able to systematically continue with the implementation of the programmes and therefore effective service delivery to the most vulnerable.

The following documents are available concerning the strategy and activities of the South African Red Cross Society:

- Five-year (2003-2007) development plan (dated 16 November 2002): [http://www.ifrc.org/cgi/pdf\\_appeals.pl?/annual05/logframes/africa/05AA014N1.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?/annual05/logframes/africa/05AA014N1.pdf)
- Follow-up (dated 17 November 2003) on implementation of SARCS Strategic Objectives 2003-2007: [http://www.ifrc.org/cgi/pdf\\_appeals.pl?/annual05/logframes/africa/05AA014N2.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?/annual05/logframes/africa/05AA014N2.pdf)
- South African Red Cross Society Consolidated National Appeal for 2005: [http://www.ifrc.org/cgi/pdf\\_appeals.pl?/annual05/logframes/africa/05AA014N3.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?/annual05/logframes/africa/05AA014N3.pdf)

### Movement Context:

Cooperation and working relationships between the South African Red Cross and its partners, the Federation, ICRC, British Red Cross, Finnish Red Cross, Icelandic Red Cross, Norwegian Red Cross and Swiss Red Cross, have continued to develop. In addition to the government of the Republic of South Africa and other South African Red Cross partners, new in-country stakeholders have been approached, the National Lottery being the most significant to mention. The American Red Cross, Danish Red Cross, German Red Cross and Swedish Red Cross have expressed their possible interest to explore partnerships with the South African Red Cross in the future.

In 2004, the South African Red Cross received assistance from the Federation, the ICRC, partner national societies and other partners in the following areas:

- Financial support for capacity building, OD, tracing, dissemination, DM and HIV/AIDS programming; and
- Technical support and advice through the Federation representative for South Africa, the Federation regional delegation based in Harare and ICRC regional delegation based in Pretoria.

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<sup>2</sup> South African Red Cross Society – refer to <http://www.ifrc.org/where/country/check.asp?countryid=158>

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The national society has not managed to get sufficient time to initiate the cooperation agreement strategy (CAS) process due to other more urgent. The top management has highlighted it as one of the priorities for 2005. However, project agreements within the CAS framework are already used and the priority areas identified for further development are being shared with other partners. The table below summarizes the steps to be taken for development of CAS in South Africa.

### Steps to develop the CAS 2005-2009:

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

## Strengthening the National Society

### Health and Care

#### Background and Achievements

South Africa is among the countries with the highest number of PLWHA in the world. The health and care programme continues to be of high priority to the South African Red Cross and the five-year development plan reflects a need for strong emphasis on HIV/AIDS prevention, care and support and anti-stigma strategies.

The national society has been involved in the provision of HBC services for decades. HIV/AIDS awareness and education activities began in 1993 followed by the launch of the first HBC project for PLWHA in Cape Town later in the year. A number of similar projects were implemented in other areas but were not able to be sustained due to lack of human and financial resources and capacity. In response to the Ouagadougou Declaration, the South African Red Cross commenced implementation of its national HIV/AIDS CHBC project in December 2000. A national youth HIV/AIDS peer education project also commenced in October 2002.

The CHBC project has now been implemented in seven of the nine provinces in South Africa. Over 11,000 people per month benefited from the health education activities during the period 2003-2004. Currently more than 5,500 clients and their families receive HBC and support (over 8,500 over the whole year – some clients die during the year and new clients are taken on). Additionally approximately 2,100 OVC receive HBC and support. The project continues to improve through lessons learnt during implementation. However, the magnitude of the problem, levels of poverty and limited community resources continue to bring challenges to the project. New interventions are continuously required as needs become more evident, such as the need for education and support for people receiving ART through the government. 160 trained CHBC facilitators and 600 active trained volunteer caregivers currently support the project. A number of branches have strengthened their capacity through the introduction of the CHBC project. The project has been very effective in reducing stigma at community level, particularly within the home environment.

HIV/AIDS activities over the next year will, in addition to CHBC activities, place increased emphasis on; prevention including peer education, the promotion of VCT and PMTCT, psycho-social support for the growing number of OVC, anti-stigma and advocacy activities and on improving the psychological support for the project facilitators and volunteers. For further details please see the logical framework below.

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

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The total budget for the CHBC project, as detailed below in narrative and logical framework form, is CHF 4.2 million. Most of this money is expected to come from partner national societies, the ICRC, and the government of the Republic of South Africa. The South African Red Cross has also received financial, material and technical support from the government, National Lottery, foreign missions, international aid agencies, educational institutions, businesses and NGOs. The national society is appealing for CHF 400,000 through the Federation. 80% of this amount will be received through the consortium funding of the regional HIV/AIDS programme, therefore the Federation is appealing for 20% (CHF 80,000) for this programme under this appeal.

The national society implements three other health and care projects; community first aid, community health education and promotion and youth peer education. Funding is obtained from partner national societies, the ICRC, and the government of the Republic of South Africa for these projects and they are therefore not included in detail in this appeal

The peer education project lacked funding in 2004 and implementation of the activities slowed down. Activities took place only in provinces that had managed to access local funding. The peer education project uses the "Together we can" in-country training course and the project has provided an avenue of activities for the South African Red Cross youth while rebuilding their membership.

The health and care programme for 2005-2007 will establish separate projects for community health education and promotion and CBFA to areas beyond the HIV/AIDS CHBC projects. Whilst the water and sanitation (WatSan) project activities in KwaZulu Natal has been phased out, health education and promotion activities will continue to focus on health issues relevant to local communities such as cholera, WatSan and malaria.

### **Health and Care: HIV/ AIDS Project 2005**

**Goal: The vulnerability of people to HIV is decreased and the quality of life of people is improved for people infected and affected by HIV/AIDS and other diseases.**

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

#### **Expected Results:**

- The knowledge of the most vulnerable communities, particularly the youth, is improved on HIV/AIDS, STI and TB and methods of prevention.
- VCT and the PMTCT of HIV infection are promoted.
- Care and support to people infected and affected by HIV/AIDS and other diseases is improved.
- The psycho socio-economic conditions of OVC are improved.
- Stigmatization of HIV/AIDS and discrimination against PLWHA is reduced
- Care givers, including volunteer care givers, CHBC facilitators and project coordinators receive adequate psycho-social support.

*<Refer to the Logical Framework Planning Matrix: South Africa Health-HIV/AIDS>  
<[http://www.ifrc.org/cgi/pdf\\_appeals.pl?annual05/logframes/africa/05AA014HC.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/logframes/africa/05AA014HC.pdf)>*

## **Disaster Management (DP/DR)**

### **Background and Achievements**

Disaster management remains one of the core programmes for the South African Red Cross and the five-year development plan aims at improving existing capacity to be more effective in disaster management over a wider area in South Africa. The national society experienced difficulties in securing funding for disaster preparedness and mitigation activities although donor response during times of disaster is usually good.

The South African Red Cross has been involved in various disaster interventions and has gained valuable experience and capacity. These interventions include fire, floods and extreme weather conditions that occur on a regular basis in the large squatter camp townships prevalent in South Africa, Cyclone Eline in 2000, the cholera

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outbreak in KwaZulu Natal in 2001 and the contingency planning for the possibility of an influx of refugees from Zimbabwe and refugee camp management 2002-2003. In 2003 the government appointed South African Red Cross to distribute emergency relief and train community members in the provinces of Mpumalanga, Limpopo and the Eastern Cape. In 2004 the Western Cape Province office was appointed to do the same in the Cape Town area.

The South African Red Cross works closely with government, mostly at district level, and is included in the disaster response plans in some districts. This cooperation needs to be expanded to other districts and to provincial and national levels. The new disaster management act is gradually being implemented throughout the government structures and it defines various roles and responsibilities of government and partners and recognizes the importance volunteers. The South African Red Cross therefore is challenged to ensure that it is included as a partner to government in line with the Act.

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

- Six staff and volunteers participated in RDRT training;
- A staff member participated in FACT training and FACT management training;
- Four staff members participated in HELP training;
- Three staff members participated in VCA training;
- 26 staff and volunteers attended basic disaster management training in Gauteng province, South Africa, held by the Federation in 2003; and,
- In 2004 the ICRC funded a disaster management and conflict preparedness training conducted at branch level in KwaZulu Natal and Gauteng with further training to take place in the Western Cape.

In 2005 the disaster preparedness and response department focuses on conducting VCA in all branches, build capacity at branches, establish disaster response plans and teams at branch, provincial and national levels, integrating with the government's local, provincial and national disaster response plans, train additional staff and volunteers in basic and community-based disaster management and conducting community-based disaster awareness campaign.

In addition to the traditional disaster management programming, the tracing service has been integrated into the core area. A tracing officer at the national office coordinates the tracing function and a number of staff and volunteers have been trained in the provinces to assist with tracing activities. The ICRC has funded these activities but additional funding is needed to integrate the service to the grassroots level structures.

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

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

### **Expected Results:**

- An effective infrastructure to coordinate, implement, manage, monitor and administer the project is in place at all levels.
- The vulnerability of communities is reduced and their capacity to deal with disasters increased.
- South African Red Cross staff and volunteers are trained in disaster management and conflict preparedness.
- The capacity of South African Red Cross to respond to disasters is strengthened.
- South African Red Cross is able to respond to disasters in minimum time.

*<Refer to the Logical Framework Planning Matrix: South Africa Disaster Management>*  
[http://www.ifrc.org/cgi/pdf\\_appeals.pl?/annual05/logframes/africa/05AA014DM.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?/annual05/logframes/africa/05AA014DM.pdf)

## Humanitarian Values

### Dissemination and communications

#### Background and Achievements

Humanitarian values for the South African Red Cross were established through a cooperation agreement with ICRC. The programme is responsible for disseminating information on the IHL and Fundamental Principles of the Movement to volunteers, staff and the public in line with Strategy 2010.

A five-year dissemination plan was produced focusing on the development of provincial programmes. The provincial facilitators, under the management of the provincial managers, coordinate the training-of-trainers at branch level and to integrate information into all the training programmes. In April 2003, eight provincial facilitators were trained and they further trained staff and volunteers at branch levels. These are responsible for managing the resource centres at the national and provincial offices.

However there is still need to train more volunteers to assist in the promotion of humanitarian values at grass roots level. The current numbers are not enough to cover all the areas and lack of transport has been a challenge in achieving the overall goal of the humanitarian values as most of the activities are confined to accessible areas.

Local media has been used to improve the visibility of South African Red Cross at community, district, provincial and national level. It played an integral role in creating awareness on the Fundamental principles and the national society activities in the country.

Six issues of South African Red Cross' bi-monthly newsletter 'SCOOP' were published and circulated to regional and branch offices, whilst others were sent to other partners such as government ministries and the private sectors. The newsletter provides a platform for sharing information with its stakeholders, especially on the activities of Red Cross in South Africa.

**Goal: The South African Red Cross is able to implement its humanitarian work in the spirit of the Red Cross Movement.**

**Objective: The capacity of the South African Red Cross to implement its humanitarian work in the spirit of the Red Cross Movement is improved.**

#### Expected Results:

- The visibility of the Movement's identity and image is improved through promotion of knowledge and understanding of fundamental principles, humanitarian values and activities by staff, volunteers, members and the public at large.
- Knowledge of the Fundamental Principles, the Geneva Conventions, IHL, the Red Cross emblem and Red Cross activities is disseminated to the community/external audience.
- A dissemination and information centre in each region.

## Organizational Development

### Background and Achievements

The Federation established a country office in South Africa in August 2002 at the request of the national society. The Federation representative ends the mission in July 2005 and further assistance to the national society will be channeled through the Federation regional delegation in Harare. The Federation supports the national society governance and management by providing guidance and advice on strategic direction and on Red Cross policy formulation and implementation. Special emphasis has been placed on supporting the South African Red Cross through its transition towards a well-functioning national society to deliver services to vulnerable people in accordance with the Movement's principles.

The change process has progressed step-by-step and the priority needs of the national society are being addressed. The new leadership and management have brought hope to the national society, which has been struggling with governance and management issues for the past few years. Tangible achievements have resulted in a positive

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change in attitude and mindset of both staff and volunteers. The new management has chosen a systematic, well planned step-by-step approach in implementing the change process. The national society aims to put systems and procedures in place throughout the national structures in order to effectively implement the change process. Current partners have remained supportive of the transformation process and the government has demonstrated their interest in supporting the development and role as an auxiliary to the government.

The OD programme addresses all these challenges through projects based on thorough assessment process. The main focus during the past two years has been to analyse the overall situation and status of the national society by continuing the self-assessment process. Five in-depth assessments were conducted on the development of the organization and plans were developed to address the findings.

The challenges are still immense and cannot be addressed in a span space of time and the national society continues being challenged by time, capacity and resources constraints. The secretary general and his team have limited time to address all priority areas due to limited human resources.

The national society continues strengthening governance and management to ensure that core competencies are in place and are sustainable. The South African Red Cross calls on partners and donors to continue supporting its OD interventions to address the need of internal capacity building. The key for success is investing in human resources of the national society, effective planning and systematic, step-by-step implementation, monitoring and evaluation of the ongoing transformation process. The components of the OD programme for the South African Red Cross are; governance and management development, external relations and resource mobilization, volunteer management and branch development, and empowerment of youth.

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

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

*<Refer to the Logical Framework Planning Matrix: South Africa Organizational Development>*  
[http://www.ifrc.org/cgi/pdf\\_appeals.pl?annual05/logframes/africa/05AA014OD.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/logframes/africa/05AA014OD.pdf)

### **Governance and Management Development**

**Objective: The capacity of South African Red Cross governance and management is developed for better practice of their role and responsibilities.**

#### **Expected Results:**

- South African Red Cross governance and management is familiar with the Movement policies, strategies and requirements and apply them in their own planning.
- The role and mandate of the Red Cross is clearly understood by the governance and management, especially in relation to the role and mandate of the national society management
- The national society has revised and adopted statutes.
- The national society processes the Red Cross Acts with the government. The national society has adopted a minimum of nine South African Red Cross policies for intervention in line with the Federation policies.
- The national society has established partnerships with the government, the Movement partners, foreign missions, EU, UN and other international organizations, NGOs and local corporate sector.
- National level partnership agreement is concluded with the government covering disaster management, HIV/AIDS and other humanitarian issues. The national society has further decreased the debt and paid the arrears of its statutory contributions to the Federation.
- Long-term development plan is regularly updated responding to the changing needs of the national society and the country.
- CAS 2005-2009 is produced and adopted, implemented, monitored and evaluated.

*<Refer to the Logical Framework Planning Matrix: South Africa Governance and Management>*  
[http://www.ifrc.org/cgi/pdf\\_appeals.pl?annual05/logframes/africa/05AA014GM.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/logframes/africa/05AA014GM.pdf)

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### **External Relations and Resource Mobilization**

**Objective: The ability of South African Red Cross to advocate and market their programming and to mobilize their own resources is developed.**

#### **Expected Results:**

- External relations, marketing and resource mobilization strategies and policies are in place and implemented.
- Resource mobilization targets are agreed on and met at the national, provincial and branch level.
- External relations, resource mobilization and fundraising materials are produced.
- A voluntary committee with skilled and committed people is in place for resource mobilization and fundraising.

*<Refer to the Logical Framework Planning Matrix: South Africa Resource Mobilization>*  
[http://www.ifrc.org/cgi/pdf\\_appeals.pl?annual05/logframes/africa/05AA014RM.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/logframes/africa/05AA014RM.pdf)

### **Volunteer Management and Branch Development**

**Objective: South African Red Cross branch structure and its management capacity is developed ensuring improved service delivery and the ability of South African Red Cross to recruit, develop, manage and retain volunteers is improved.**

#### **Expected Results:**

- Volunteering and development policies, structures and systems finalized, adopted, disseminated and implemented throughout South African Red Cross structures.
- Volunteer management system defined and approved at the national level and disseminated throughout the structures.
- Database for volunteer recruitment and maintenance established at the national level.
- Leadership and management skills, including skills in programme cycle management, developed at the branch level.
- Needs assessment and exchange visits are carried out in 25 branches.

*<Refer to the Logical Framework Planning Matrix:  
South Africa Volunteer Management and Branch Development>*  
[http://www.ifrc.org/cgi/pdf\\_appeals.pl?annual05/logframes/africa/05AA014VM.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/logframes/africa/05AA014VM.pdf)

### **Empowerment of youth, focus on young women in development**

**Objective: South African Red Cross youth programming is developed, focus on leadership, life skills, and self-development and gender issues.**

#### **Expected Results:**

- 1,000 youth members are recruited, trained and retained.
- 90 youth groups and social clubs formed and disseminated on Fundamental Principles and ideals per province in nine provinces.
- Youth participation is increased in the programme management cycle.
- Youth exchange is facilitated at the global, regional and national level.
- A survey on young women in Red Cross conducted.
- 20 facilitators and 450 young women trained in leadership, life skills and self-development and gender issues.
- Young Women in Development (YWID) camps held in South Africa (nine provincial and one national).

*<Refer to the Logical Framework Planning Matrix: South Africa Youth>*  
[http://www.ifrc.org/cgi/pdf\\_appeals.pl?annual05/logframes/africa/05AA014YO.pdf](http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/logframes/africa/05AA014YO.pdf)

## **Coordination, Cooperation, and Strategic Partnerships Representation, Implementation and Management**

**Government of the Republic of South Africa:** Prior to the statutory meetings held in Geneva in November-December 2003, the national society organized a coordination meeting with the government and invited Movement partners. The meeting provided a forum for the Red Cross and government to prepare for the statutory meetings. The co-ordination meeting will be organized bi-annually to exchange information and discuss common concerns.

The government continued to pledge their support to the national society in the 28<sup>th</sup> International Conference in 2004. The sustainability of the South African Red Cross lies on close cooperation with the government for programming support. The national society will make follow ups on the development of a partnership agreement with the government. The drafting process of Red Cross Acts for “Recognition of the National Society” (process commenced in 2002) and the “Use and Protection of the Emblem” (process commenced in 1999) are still ongoing. The national society has made substantial efforts, since the appointment of the new secretary general in January 2003, to meet various government authorities especially at the provincial government level. As a result, several service agreement contracts in health and disaster management sectors at the provincial level have already been signed. Negotiations are at the final stage for an agreement for HIV/AIDS programme support at the national level.

**ICRC:** Cooperation and working relationship with the ICRC continues in a professional and supportive manner. At the beginning of 2004, the president of the South African Red Cross was invited by the standing commission as one of the two representatives from Africa for the *ad hoc* working group established to strengthen the implementation of the Movement strategy. The implementation of the strategy in South Africa has been summarized and regular meetings are being held with other Movement partners.

**Partner National Societies (PNS):** Since end of 2003 there have not been any PNS representatives in the country and bilateral financial support is channelled directly to the national society. The South African Red Cross long-term development plan and their priority areas are supported by all partner national societies (PNS). There are no major challenges for donor-driven approaches outside the South African Red Cross five-year development plan.

**Foreign missions, international organizations, NGOs and corporate sector:** Due to the location of the Federation office in Cape Town, it has been difficult to establish strong links with Pretoria based government offices, foreign missions, international organizations and NGOs. It is a time-consuming exercise to try to establish a network through meetings and discussions with various important structures such as the New Partnership for African Development (NEPAD) or Southern Africa Development Community (SADC). The Federation has therefore strongly supported the establishment of South African Red Cross external relations, marketing and resource mobilization function in Johannesburg or Pretoria. In 2004 the funding was secured for the project and the foundation is being built up for such a function through Charisma Consultants, who did the assessment at South African Red Cross in March 2003.

**Regional and global coordination and networking:** The president of the South African Red Cross is regularly invited as a guest speaker for various local and international events involving humanitarian organizations. With the support of the Federation, South African Red Cross has successfully hosted several regional and international events given that Johannesburg is central in term of logistics and facilities. The South African Red Cross is expected to have the chairmanship of SAPRCS coordination from November 2004 onwards for the next two years.

**Country Office Management:** The Federation country office remains small with only two local part time assistants for finance and administration supporting the South African Red Cross. The Federation representative currently supporting the South African Red Cross end mission mid 2005 and the regional delegation in Harare will enhance support for the national society. During the first six month the national society plans intensify activities related to cooperation, coordination and strategic partnerships. One of the most important facilitation activities is the negotiation process for the CAS and its production.

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

**South Africa; Annual Appeal no. 05AA014**

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# BUDGET 2005

## PROGRAMME BUDGETS SUMMARY

Appeal no.: 05AA014

Name: SOUTH AFRICA

PROGRAMME:	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	Emergency	Total
	CHF	CHF	CHF	CHF	CHF	CHF	CHF
Shelter & construction	0	0	0	0	0	0	0
Clothing & textiles	35,272	0	0	0	0	0	35,272
Food	30,210	0	0	0	0	0	30,210
Seeds & plants	0	0	0	0	0	0	0
Water & Sanitation	0	0	0	0	0	0	0
Medical & first aid	30,200	0	0	0	0	0	30,200
Teaching materials	45,300	0	0	0	0	0	45,300
Utensils & tools	0	0	0	0	0	0	0
Other relief supplies	18,118	0	0	0	0	0	18,118
<b>SUPPLIES</b>	<b>159,100</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>159,100</b>
Land & Buildings	0	0	0	0	0	0	0
Vehicles	0	0	0	0	0	0	0
Computers & telecom	0	0	0	1,600	0	0	1,600
Medical equipment	0	0	0	0	0	0	0
Other capital exp.	0	0	0	0	0	0	0
<b>CAPITAL EXPENSES</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1,600</b>	<b>0</b>	<b>0</b>	<b>1,600</b>
Warehouse & Distribution	0	0	0	0	0	0	0
Transport & Vehicules	17,437	0	0	8,730	0	0	26,166
<b>TRANSPORT &amp; STORAGE</b>	<b>17,437</b>	<b>0</b>	<b>0</b>	<b>8,730</b>	<b>0</b>	<b>0</b>	<b>26,166</b>
Programme Support	30,656	10,012	0	23,410	0	0	64,078
<b>PROGRAMME SUPPORT</b>	<b>30,656</b>	<b>10,012</b>	<b>0</b>	<b>23,410</b>	<b>0</b>	<b>0</b>	<b>64,078</b>
Personnel-delegates	0	0	0	80,906	0	0	80,906
Personnel-national staff	146,111	40,814	0	7,056	0	0	193,981
Consultants	3,020	0	0	25,056	0	0	28,076
<b>PERSONNEL</b>	<b>149,131</b>	<b>40,814</b>	<b>0</b>	<b>113,018</b>	<b>0</b>	<b>0</b>	<b>302,963</b>
W/shops & Training	44,794	71,984	0	55,815	0	0	172,592
<b>WORKSHOPS &amp; TRAINING</b>	<b>44,794</b>	<b>71,984</b>	<b>0</b>	<b>55,815</b>	<b>0</b>	<b>0</b>	<b>172,592</b>
Travel & related expenses	18,551	6,800	0	84,874	0	0	110,225
Information	18,123	0	0	33,929	0	0	52,052
Other General costs	33,840	24,419	0	38,779	0	0	97,038
<b>GENERAL EXPENSES</b>	<b>70,514</b>	<b>31,219</b>	<b>0</b>	<b>157,582</b>	<b>0</b>	<b>0</b>	<b>259,315</b>
<b>TOTAL BUDGET:</b>	<b>471,632</b>	<b>154,029</b>	<b>0</b>	<b>360,155</b>	<b>0</b>	<b>0</b>	<b>985,817</b>