

Appeal 2005



BURKINA FASO

Appeal no. 05AA026

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

	2005 in CHF
Programme title	
Strengthening the national society	
Health and care	197,508
Organizational development	117,879
Total	315,387¹

¹ USD 250,500 or EUR 203,100.

National Context

According to the World Bank's 2002 World Development Report, Burkina Faso is the world's 12th poorest country, with a gross national income of USD 230. In 2001, an estimated 45% of the population lived below the poverty line, reflecting mainly worsening poverty in urban areas. Burkina Faso is located in the Sahel-Sahara Zone which is mainly characterised by a very low precipitation and frequent drought periods. The country is also continually hit by floods. Despite the lack in resources, water and fertile soil, agriculture represents half the country's export earnings and employs 84% of the nation's workforce. Up to three million Burkinabé live and work in Côte d'Ivoire where large cocoa and coffee plantations exist. However, almost half a million of them returned home in 2003/2004 to flee fighting in their adopted country.



National health care remains very poor. Under-five mortality is at 107 deaths per 1,000 live births in 2002. The main diseases affecting the predominantly rural population are malaria and HIV/AIDS. Burkina Faso has the second highest rate of infection in West Africa just after Côte d'Ivoire. In 2001, meningitis also swept through the nation killing over 1,500 people, and recurring in 2002 and 2003. In 1998, the country had only three doctors for every 100,000 people (UNDP). Public expenditure on health amounts to about only 2.0% of the GDP.

Human Development Indicators at a Glance

Category	Burkina Faso	Sub-Saharan Africa	World
Total population (millions)	12.6	641.0	6,225.0
GDP per capita (USD)	264	469	5,174
Life expectancy at birth (years): Female - Male	46.3 - 45.1	n.a.	n.a.
Infant mortality rate, per 1,000 live births	107	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)	42	57	82
HIV prevalence (% , ages 15-49) (2003)	4.2	7.7	01.1
Adult literacy rate (% , ages 15 and above) Female - Male	8.1 - 18.5	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.

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

CAS – Cooperation Agreement Strategies	PLWHA - Persons living with HIV/AIDS
CBF – Federation Capacity Building Fund	PNS - Partner National Society(ies)
CBFA – Community-based first aid	RDRT – Regional Disaster Response Team(s)
IHL – International Humanitarian Law	STI/ STD - Sexually-transmitted infections / diseases
Movement - International Red Cross and Red Crescent Movement.	
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	

Red Cross and Red Crescent Priorities

National Society Strategy/Programme Priorities:

The Burkinabe Red Cross Society² has had a hard time maintaining numerous bilateral partnerships in recent past. These partners helped to keep it active in relief, health, and small community-based projects. A change of its statutes has also made for clearer management with the recruitment of a national director in the October 2003. The statutes however weakened the Burkinabe Red Cross in part because they created posts that needed to be funded whereas the national society has not been quite successful in resource development. The regional office has thus supported a finance/resource development programme aimed at revamping all income-generating projects and promoting a coherent approach of its partners to overall development and sustainability. Major progress has been made over the past two years in engaging qualified finance staff and introducing tighter financial management systems. A partners’ “round table” meeting was held in February 2004 to establish a consensus on how to proceed together.

Burkinabe Red Cross at a glance

	YEAR	COMMENT
Statutes	2001	Revised statutes, separation of governance and management
National Disaster Plan	in draft form	Burkinabe Red Cross is part of national committee responsible for developing National Development Plan
National Development Plan	2004-2007	
Cooperation Agreement Strategy	2005	
Self Assessment	2003	
Elections	2001	
Yearly audit	2004	

Strengths

- ÿ Good national coverage
- ÿ Ability to mobilize volunteers
- ÿ Strong participation in some national health activities (epidemics among others).
- ÿ Ability to engage bilateral partnerships

Challenges

- ÿ Resource development
- ÿ Managing, coordinating and maintaining bilateral partnerships

² Burkinabe Red Cross Society - <http://www.ifrc.org/where/country/check.asp?countryid=181>

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Movement Context:

The Federation

The Burkinabe Red Cross has been working with Federation support on community-based first aid (CBFA) as well as on emergency operations during health epidemics (meningitis, polio, and yellow fever), population movements and floods. At the request of the Burkinabe Red Cross, the Federation is supporting the national society to co-ordinate relations with partners and develop and revitalize income generation possibilities. In 2004, the regional office assisted the national society to revise its strategic development plan - select projects of which are found in this appeal. It should be noted the national society is still in a transitional phase; while it has improved its overall management and planning capacity, the national society still needs to identify partners both within and outside of the Movement to support its recently developed strategic plan and associated projects in order to truly scale up health/HIV programming and disaster preparedness/response according to needs and expectations. Complete strategic development plans with project log frames and detailed budgets are available upon request.

ICRC

Supported through its office in Côte d'Ivoire, the ICRC helps the Burkinabe Red Cross prepare for and respond to emergency situations, to provide effective and efficient tracing services and in dissemination activities promoting the Fundamental Principles and raise awareness of IHL³ in the community.

Bilateral Partner National Societies

The Spanish Red Cross assists the national society with women in development activities and support for the national society's national director, finance director and assistant. The French Red Cross has also contributed to the Burkinabe Red Cross's medico-social centre and relief activities, in addition to supporting the HIV/AIDS walk-in clinics in Ouagadougou and Bobo-Dialasso. The national society continues its youth exchange with the Westphalia branch of the German Red Cross, in which they carry out small projects on reforestation, drilling and accommodation infrastructure. The Burkinabe Red Cross centre for street children receives support from the Belgian Red Cross. Significant support was received in 2003 for relief operations for Burkinabe returnees from Côte d'Ivoire through several sister national societies, both bilaterally and through the Federation, as well as in 2003/2004 for flood relief operations. The national society also co-manages, with the Norwegian "Better Life Foundation" a day centre to assist destitute persons with health, hygiene, food and vocational training and provides medical treatment for children suffering from clubfoot, cleft palates and noma, a preventable disease, which severely disfigures its victims.

Primary support to the Burkinabe Red Cross from the Movement in 2004

Partner	Health	Relief	Disaster Management	Humanitarian Values	Organizational Development	Other
ICRC			xx	xx		xx
Federation*	xx	xx			xx	
Danish Red Cross		xx			xx	
Belgian Red Cross		xx				xx
Spanish Red Cross		xx	xx		xx	xx
French Red Cross		xx				
Austrian Red Cross						xx
Westphalia/ German Red Cross						xx

*Federation support comes from Danish Red Cross, Government of Ireland, Government of U.K and CBF.

³ IHL – International Humanitarian Law

Strengthening the National Society

Health and Care

Background

- High child morbidity and mortality rates
- Poverty, high illiteracy rates, persistent harmful cultural practices (female genital mutilation)
- Illnesses linked to water and poor sanitation/hygiene (low access to safe water and adequate sanitation)
- Persistent endemic and epidemic illnesses (measles, cholera, meningitis)
- Low vaccination coverage
- Increasing HIV/AIDS problem (second highest ranked country in West Africa)

Achievements

- ÿ Well-organized and motivated local committees in a number of health districts
- ÿ Ability to mobilize volunteers/good experience in social mobilization (Measles and meningitis vaccination campaigns)
- ÿ Good collaboration with partners/government
- ÿ Experience in community surveillance of epidemic diseases (Meningitis 2001, 2002, 2003; yellow fever 2004; polio 2004)
- ÿ Trained volunteers in first aid and communicable diseases
- ÿ Major successes in addressing relevant public health problems with support only from experienced generalists within the national society

Lessons learned

- ÿ Need to reinforce technical capacity of headquarters health department.
- ÿ Need to ensure sustainability of community-based health activities
- ÿ Need to develop a coherent programme linking diverse health activities (vaccinations, emergency health, HIV/AIDS, female genital mutilation)

Goal: To contribute to the reduction of infant and maternal morbidity and mortality and to the reduction of vulnerability of target groups and PLWHA through social and community mobilisation activities.

Objective 1: To increase the number of children aged 0-11 months who receive full standard vaccination, as well as the number of pregnant women correctly vaccinated against tetanus.

- **To reduce mortality related to diarrhoea diseases by 80% in children from 0-5 years.**

Expected Results:

- 80% of 0-11 month old children receive full vaccinations and 70% of pregnant women are correctly vaccinated against tetanus.
- Preventive measures to fight against diarrhoea diseases are known and applied in the target communities.
- Communities undertake responsibility for treatment of diarrhoea cases.
- The ability of Burkinabe Red Cross to manage and monitor social mobilization during vaccination campaigns is reinforced.

<Refer to the Logical Framework Planning Matrix (in French): Burkina Faso Community Health>
http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/logframes/africa/05AA026HC.pdf

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Objective 2: To reduce vulnerability related to HIV/AIDS in 0 to 40 year olds in the four provinces of Poni, Comoé, Banwa, and Boulkiemdé.

Expected Results:

- Knowledge of HIV/AIDS/STI and methods of prevention is reinforced amongst the target populations.
- PLWHA and AIDS orphans are supported by their communities.
- The health programme management capacity of the Burkinabe Red Cross is strengthened.

<Refer to the Logical Framework Planning Matrix (in French): Burkina Faso Health-HIV/AIDS >
http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/logframes/africa/05AA026HH.pdf

Disaster Management

Background and Achievements

Burkina Faso is often affected by heavy rains resulting in serious flooding and the national society often is obliged to respond without being sufficiently prepared. The national society's interventions are limited because of lack of a real disaster preparedness program. The country, due to its geographical position (Sahel), is exposed to the risk of drought, bush fires and locust invasions. These last years the country also suffered from the political situation in Ivory Coast which led to thousands of repatriates and refugees to Burkina Faso.

The national society's strategic plan 2005-2008 elaborated in 2004, has set up orientations related to disaster management and focuses on reduction of risks and building response capacities. Through its program of disaster risk reduction, the national society would like to address food security, as well as focusing on preparation for floods and drought. Pending identification of partners for the disaster management programme, the current appeal has omitted disaster related projects. However, full programme plans developed within the national society's strategic development plan, log frames and budgets are available upon request.

Organizational Development

Background and Achievements

In February 2004, the national society held a round table meeting with its partners to explain the achievements of its institutional development process to date and discuss the way forward. At the end of the meeting they agreed on a framework for a planning process to support the national society to prepare its strategic plan for the coming years. The first step of the planning process was an evaluation of the national society for the last three years. Four objectives were assigned to this exercise:

- To improve the national society's project planning process in order to have a better formulation of objectives and indicators;
- To facilitate coordination by introducing synergy between programs ;
- To have a better clarification of governance and management roles;
- To assure conformity of programs to the Movement's policies.

The recommendations of the evaluation were as follows

- Each project must be based on a thorough analysis of problems before setting up objectives. That shows the necessity to train the management team in PPP;
- Each project should include an evaluation at the end of the project and define a mechanism to facilitate governance control on activities and objectives;
- Reporting formats that show the achievement of the objectives should be adopted;
- Full time staff to professionalize the health and disaster management departments should be employed instead of relying on volunteers;
- A long term planning culture with synergy between programs should be promoted;

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- Roles of governance and management should be clarified with emphasis on the need for management at the beginning and the end of decision making process;
- A volunteering policy for the national society in conformity with the Federation policy should be elaborated and adopted.

After the evaluation a strategic planning workshop was organized and a four-year strategic plan was set up for 2005-2008 focusing on the various areas of intervention. Strategy 2010, ARCHI 2010 and the global Strategy for the Movement were the reference documents for this strategic plan. The regional office supported the national society for drafting project proposals which form the basis of this appeal. Support for 2005 will focus essentially on elements needed to help the national society conduct effective programming strengthened by addressing the efficiency of governance and management at all level, volunteer management and public image.

With reference to financial and resource development, in 2003/2004, funds from the CBF supported the strengthening of management of income-generating units' management for better sustainability of the Burkinabe Red Cross. This program provided an ideal stepping stone to the elaboration and clarification of finance and resource development structures. The regional office seeks to assist the national society to pursue more effective management systems/procedures and the application of its income generation plans at national and local levels to decentralize sound management principles to income-generating units within the branches.

Select elements of the organizational change support solicited by the national society are included in this appeal, while awaiting the identification of new partners to accompany the national society in the expansion of its health and disaster programmes and in its process of organizational development. The full strategic development plan and details for additional elements of organizational development are available upon request.

Goal: The Burkinabe Red Cross improved its service delivery to vulnerable people.

Objective 1: The Burkinabe Red Cross capacity to conduct effective health and disaster programmes is strengthened.

Expected Results:

- The functioning and efficiency of the governance and management at all levels have improved.
- Management staff at headquarters and in project areas is reinforced.
- The ability of the national society to develop, manage and retain volunteers is developed.
- Motivated volunteers are engaged at community level in the health and disaster management programs.

<Refer to the Logical Framework Planning Matrix: Burkina Faso Organizational Development >
http://www.ifrc.org/cgi/pdf_appeals.pl?/annual05/logframes/africa/05AA026OD.pdf

Objective 2: The management capacities of the Burkinabe Red Cross at both headquarters and regional branch levels are strengthened.

Expected Results:

- Financial reports are demonstrating improved quality.
- Finance staff develops their understanding of program budgeting cycle from appeal launch phase through final narrative and financial reporting.
- External consolidated audits are conducted on annual basis.
- Board members and managers clearly understand governance and management functions within ten branches: Koupela, Ziniaré, Tenkodogo, Kombissili, Manga, Po, Réo, Bobo, Banfora and Djibo.
- Burkinabe Red Cross activities and interventions are disseminated actively and effectively through mass media country wide.

<Refer to the Logical Framework Planning Matrix: Burkina Faso Finance Development>
http://www.ifrc.org/cgi/pdf_appeals.pl?/annual05/logframes/africa/05AA026FD.pdf

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BUDGET 2005

PROGRAMME BUDGETS SUMMARY

Appeal no.: 05AA026

Name: BURKINA FASO

PROGRAMME:

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	Emergency	Total
	CHF	CHF	CHF	CHF	CHF	CHF	CHF
Shelter & construction	0	0	0	0	0	0	0
Clothing & textiles	10,581	0	0	0	0	0	10,580
Food	460	0	0	0	0	0	460
Seeds & plants	0	0	0	0	0	0	0
Water & Sanitation	0	0	0	0	0	0	0
Medical & first aid	920	0	0	0	0	0	920
Teaching materials	0	0	0	0	0	0	0
Utensils & tools	0	0	0	0	0	0	0
Other relief supplies	0	0	0	0	0	0	0
SUPPLIES	11,961	0	0	0	0	0	11,960
Land & Buildings	0	0	0	0	0	0	0
Vehicles	7,820	0	0	0	0	0	7,820
Computers & telecom	0	0	0	0	0	0	0
Medical equipment	0	0	0	0	0	0	0
Other capital exp.	0	0	0	0	0	0	0
CAPITAL EXPENSES	7,820	0	0	0	0	0	7,820
Warehouse & Distribution	0	0	0	0	0	0	0
Transport & Vehicules	22,824	0	0	640	0	0	23,464
TRANSPORT & STORAGE	22,824	0	0	640	0	0	23,464
Programme Support	12,838	0	0	7,662	0	0	20,500
PROGRAMME SUPPORT	12,838	0	0	7,662	0	0	20,500
Personnel-delegates	6,165	0	0	14,550	0	0	20,715
Personnel-national staff	91,053	0	0	29,787	0	0	120,839
Consultants	0	0	0	13,930	0	0	13,930
PERSONNEL	97,218	0	0	58,267	0	0	155,484
W/shops & Training	23,735	0	0	27,132	0	0	50,866
WORKSHOPS & TRAINING	23,735	0	0	27,132	0	0	50,866
Travel & related expenses	500	0	0	16,704	0	0	17,203
Information	11,955	0	0	0	0	0	11,955
Other General costs	8,656	0	0	7,474	0	0	16,130
GENERAL EXPENSES	21,111	0	0	24,178	0	0	45,289
TOTAL BUDGET:	197,507	0	0	117,879	0	0	315,387