

Appeal 2005



International Federation
of Red Cross and Red Crescent Societies

SENEGAL

Appeal no. 05AA032

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 |
|---|----------------------------|
| Strengthening the national society | |
| Health and care | 50,204 |
| Disaster management | 77,728 |
| Organizational development | 73,993 |
| Coordination and implementation | 169,884 |
| Total | 371,809¹ |

¹ USD 295,300 or EUR 239,500.

National Context

The majority of the Senegalese population lives in rural areas but that is rapidly changing. About 48% of the population is estimated to live in urban areas, well above the regional average. The urban formal unemployment rate is at 23%. Agriculture employs about three-quarters of the workforce. About 40% of the farmland is taken up by groundnut cultivation, while fish is the main export commodity. More than 56% of the country's population of 9.9 million is under 20 years of age.

In the southern part of Senegal, a group has been fighting for independence for Casamance since 1982, resulting in an influx of displaced persons towards more secure areas, although 2004 saw major advances in the peace process. Relations with Guinea-Bissau have been complicated by the presence of many refugees from Senegal's Casamance region, and by the separatists' use of Guinea-Bissau as a rear base. Relations with Mauritania are also complicated due to ongoing tensions over land and water. Potential disasters include drought, floods, epidemics and population movement. Over three quarters of Senegal's territory is in the Sahel zone, which subjects the country to ongoing cycle of drought and floods.



Although social indicators are relatively good (more than three-quarters of the population has access to potable water and adequate sanitation facilities, and life expectancy has improved), health care is deteriorating (EIU). Under-five mortality is 138 per 1,000 live births. Only 40% of the population has access to health services; 23% of the population suffer from chronic malnutrition (UNDP). The health care system has been put under further strain by a lack of investment in social infrastructure. The government should be credited however with successfully maintaining a low prevalence of HIV/AIDS through education.

Human Development Indicators at a Glance

| Category | Senegal | Sub-Saharan Africa | World |
|---|-------------|--------------------|---------|
| Total population (millions) | 9.9 | 641.0 | 6,225.0 |
| GDP per capita (USD) | 503 | 469 | 5,174 |
| Life expectancy at birth (years): Female - Male | 54.9 - 50.6 | n.a. | n.a. |
| Infant mortality rate, per 1,000 live births | 79 | 108 | 56 |
| Maternal mortality per 100,000 live births (adjusted ratio)(2000) | 690 | n.a | n.a |
| Population (%) with sustainable access to an improved water source (2000) | 78 | 57 | 82 |
| HIV prevalence (% , ages 15-49) (2003) | 0.8 | 7.7 | 01.1 |
| Adult literacy rate (% , ages 15 and above) Female - Male | 29.7 - 49.0 | 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.

| | |
|--|---|
| BCC – Behavioural Change Communication | Movement - International Red Cross and Red Crescent |
| CAS – Cooperation Agreement Strategy(ies) | Movement. |
| IEC – Information, education, communication | PLWHA – Persons living with HIV/AIDS |
| IHL – International Humanitarian Law | PNS - Partner National Society(ies) |
| MoH – Ministry of Health | STI/ STD - Sexually-transmitted infections / diseases |
| 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 Senegalese Red Cross Society¹ has a close relationship with the government, which seconded numerous personnel to the national society, paying a third of their salaries. The national society has an agreement with the government providing for co-operation in the fields of health, disaster preparedness and relief.

Recognizing the need to further address high maternal and child mortality rates, the Senegalese Red Cross launched a programme in 2003 to fight preventable infant and child-related diseases in Mbour and Thiès health districts with Federation support. This programme complements the national society's other health projects (Danish funded community based health in 11 districts, World Bank funded nutrition project in Touba, and *Enda Tier Monde* (ENDA) supported HIV/AIDS project in four urban departments) which all rely heavily on a community based approach to health involving Senegalese Red Cross volunteers who work directly in communities and with local health structures.

As part of the Federation's regional plan to assist at-risk communities faced with food security crises/disasters, there is special emphasis on collaborating with the national societies of the Sahel sub-region, particularly with Senegalese Red Cross to address this regional threat; a food security project was launched in late 2003 in the newly recognized administrative district of Matam, which continued in 2004.

The national society also works with WHO, UNICEF, ICRC, and USAID on activities including assistance to victims of drought, the Casamance conflict, and victims of floods. The national society runs first aid training, health care centres, and emergency relief teams. The national society also runs community projects that focus on income generation for women and youth groups.

The Senegalese Red Cross has few partnerships, but enjoys relatively strong relationships with those it does maintain. The national society is conducting good work in a quiet manner, however, much needs to be done to promote and publicize the national society's activities.

Senegalese Red Cross At a Glance

| | YEAR | COMMENT |
|---------------------------|-----------|---|
| Statutes | 1997 | Require additional revision to reflect model statutes. |
| National disaster plan | | Food security monitoring with government and other partners; auxiliary in disasters. |
| National development plan | 2001-2006 | |
| CAS | 2005 | |
| Self assessment | 2002 | Spring |
| Elections | 2003 | December 2003 |
| Yearly audit | | Senegalese Red Cross submits a budget and financial plan to government; 1998 government inspection. |

¹ Senegalese Red Cross Society - <http://www.ifrc.org/where/country/check.asp?countryid=150>

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Main Strengths

- Resource development (kindergartens, medical and training centre and various small projects).
- Relationship with the government.
- Positive, albeit under-utilized public image.
- The national society has provided personnel for various Federation operations, exchanges, and committees.

Main Challenges

- Branch development.
- Communication in emergencies.
- Reporting and development of public image.
- Clarifying internal organization for greater coherence and capacity.

Based on the national society's development plan of 2001-2006, the national society has prioritized the following for further development.

- Food security monitoring.
- Disaster response and prevention.
- Promotion of primary health care through integrated mother/child health through fight against HIV/AIDS, diarrhoeal diseases, malaria, malnutrition, and respiratory infections.
- Strengthening organizational capacity.

Movement Context:

Federation

The Senegalese Red Cross has taken part in the Federation's food security programme for the region. The Federation support to the national society has been in financial systems development, primary health, food security, and flood relief.

The Federation has assisted the Senegalese Red Cross to improve its financial management systems and its resource development capacities. Finally, in order to assist the national society to build capacity and to attract the necessary donor support required, the Secretariat has prioritized the CAS process, although progress towards this goal in 2004 was minimal due largely to internal delays and changes within the national society.

ICRC

National society co-operation with the ICRC includes dissemination of humanitarian principles; conflict-preparedness - developing first aid and response teams, a malaria reduction programme in Casamance as part of the peace-building and recovery process, and support for construction of the new Matam branch office in 2004.

Bilateral Partner National Societies:

The Danish Red Cross finances a large community health programme that has been operating for five years and which is scheduled to be evaluated in the last quarter of 2004. The Spanish Red Cross has supported community projects at branch level in the past.

Primary support from the movement in 2004

| Partner | Health | Relief | Disaster Management | Humanitarian Values | Organizational Development | Other |
|------------------|--------|--------|---------------------|---------------------|----------------------------|-------|
| ICRC | XX | XX | XX | XX | XX | |
| Federation | XX | XX | XX | | XX | |
| Danish Red Cross | XX | | | | XX | |

The Federation support has been through contributions of Republic of Ireland, DFID, and relief from German Red Cross and Danish Red Cross.

Strengthening the National Society Health and Care

Background:

- Long dry season (eight to nine months), favouring droughts.
- Potential for epidemics such as cholera.
- High maternal and child mortality rates (due to diarrhoeal diseases, acute respiratory infections, malaria, measles, and malnutrition).
- High rates of water-borne diseases attributable to low access to potable water.
- Low HIV/AIDS prevalence rates, with one of the lowest in the region, due to effective HIV/AIDS prevention campaigns and strong political commitment.
- Insufficient health infrastructures and staffing, with poor geographical coverage

Achievements:

- Good/wide network of community-based first aid volunteers, covering the whole territory.
- Community-based health programme in 11 districts since 1998 with established and well-functioning health centres, plus related projects in nutrition and HIV/AIDS in other zones.
- Good collaboration with government and other partners.
- Strong social mobilization during vaccination campaigns (polio, measles, yellow fever, etc.)
- Work begun in 2003 has established a sound basis for continuing and expanding.

Lessons learned:

- Need for the participatory approach adopted during the identification of needs and project formulation stages to continue throughout the programme.
- Need to re-enforce the organizational and management capacities of local branches to ensure sustainability of programme, including development of strong volunteer management systems and coherent incentive policy/practices.

In 2005, the community health project will continue in the medical districts of Thiès and Mbour. Stress will be laid on the consolidation of the project which began in 2003 and on the extension of the project in the zones surrounding the village of Ndéy (four village centres: Talal, Gat, Sagnasil, Léo and Seun) which are covered by the Pout health post. This will make it possible to cover the entire health post zone of 27 villages. With regard to Malicounda zone in the district of health of Mbour, activities will be mainly activities of consolidation through “Behavioural Communication for Change” (BCC).

Also contained in this year’s Appeal is a new project for reducing vulnerability to HIV/AIDS. Senegal established since 1986 an HIV/AIDS prevention framework which has enabled the country to maintain a relatively low prevalence rate of 1.4%. However, the struggle is not over and actions must be carried out to maintain this rate and not exceed the 3% recommended in the national HIV/AIDS strategy. The Senegalese Red Cross Society, as an auxiliary to health authorities, intends to contribute to efforts carried out by the Ministry for Health, Hygiene and Prevention through prevention and the accompaniment of people infected and affected by HIV/AIDS. Indeed, this last component is not yet well developed within the country due to the complexity of community and home-based care, as well as a policy which for a long time stressed only prevention.

Most recent statistics estimate there are 120,000 people living with the virus that causes AIDS, 20,000+ cases of AIDS, and 80,000 orphans, from whence the need to develop community based responses. The interventions are designed to complement the medical framework and take into account the family dimension. This project will be carried out in Kaolack, where the proportion of women ignorant of any means of HIV/AIDS prevention is 53.3% in urban areas and higher in rural areas.

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Goal: To contribute to the reduction of infant and maternal morbidity and mortality, and to the reduction of vulnerability of target groups and Persons Living With HIV/AIDS (PLWHA) through social and community mobilisation activities.

Objective 1: The capacity of communities, families, and Red Cross branches is strengthened to fight preventable infant and child-related diseases in Mbour and Thiès health districts in Senegal.

Expected Results:

- Mothers practice correct feeding habits for their children less than five years.
- Children less than five years of age sleep under insecticide treated mosquito nets.
- Mothers know and adhere to vaccination schedules for their children.
- Mothers take appropriate measures to care for children suffering from fever.
- Project health structures offer the community health service package to mothers and children (i.e. prenatal care, micro-nutrients, vaccinations, etc.).
- The Senegalese Red Cross health programme capacity is strengthened in the target zones through the development of local branches, the volunteer network, and community participation.

<Refer to the Logical Framework Planning Matrix (in French): Senegal Health and Care>
http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/logframes/africa/05AA032HC.pdf

Objective 2: To reduce risky behaviour in the targeted populations by improving IEC/BCC at the community level and improve conditions of PLWHA, AIDS orphans and widows.

Expected Results:

- PLWHA are visited regularly by Senegal Red Cross volunteers
- Persons affected and living with HIV/AIDS receive psycho-social support
- AIDS orphans receive appropriate nutrition
- Families and PLWHA know how to prevent the virus from spreading and populations are motivated to seek out VCT
- Families and PLWHA conduct income generating activities.

<Refer to the Logical Framework Planning Matrix (in French): Senegal Health-HIV/AIDS>
http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/logframes/africa/05AA032HH.pdf

Disaster Management

Background and Achievements

The Senegalese Red Cross is a member of the country's national emergency plan (ORSEC). The national society has carried out disaster preparedness work through its network of volunteers involving first aid training and the establishment of ten emergency relief brigades at regional level. Since the late 80s the national society has accorded a large priority in its development plans to food security. The national society prepared a plan of action to be effectively involved in food security monitoring in concert with the government and other partners to determine the level of food security need and response appropriately. The multiple partnerships and actions have re-enforced the national society's planning capacities, although challenges still exist linked to delays in accessing emergency relief funds and weak capacity at community level. As a result, Senegalese Red Cross has learned to plan sufficiently long periods of sensitization and coaching when working with communities on food security issues.

In late 2003, the Senegalese Red Cross launched a food security and branch development programme in Ranerou, Matam district in northeast Senegal, a district which has recently been created and is vastly underserved. The programme takes a participatory approach which allows vulnerable persons to assume ownership for activities aimed at bolstering their food security and simultaneously develops branch capacity and visibility in this underserved area through volunteer training, IEC programmes for disaster prevention and preparedness, and basic equipment. Subject to funding availability and institutional capacity, the Senegalese Red Cross will extend the project to the regions of Kanel, Podor, and Linguère between 2004 and 2007 as it consolidates its experiences and builds further capacities.

Goal: The Senegalese Red Cross develops in its committees activities in disaster prevention and preparedness to improve the life of vulnerable target communities.

Objective: Vulnerable target communities strengthen their capacities in disaster prevention and preparedness through small-scale projects related to food security.

Expected Results:

- The capacity of the targeted communities is built when they are helped to assume responsibility for preventing food insecurity after a disaster.
- Kanel branch improves its public image as activities and interventions are disseminated actively and effectively
- Vulnerable targeted communities improve their financial management skills through small-scale projects and generate incomes to prevent food insecurity.

<Refer to the Logical Framework Planning Matrix (in French): Senegal Disaster Management>
<http://www.ifrc.org/cgi/pdf_appeals.pl?/annual05/logframes/africa/05AA032DM.pdf>

Organizational Development

Background and Achievements

Based on the evaluation of the national society's previous development plan (1994-1998), the Senegalese Red Cross developed a new five-year plan for the period 2001-2006. The main programmes covered by the plan are: capacity building; promotion of humanitarian values and IHL; emergency relief and disaster preparedness; community health and resource development. The national society actively uses its development plan as a tool and guide during management meetings and assessments with partners. While the national society is relatively well-functioning at headquarters level, further refinement of the roles of governance and management would improve its ability to operate effectively. The capacity of branches varies widely from quite strong to newly formed and developing. Further decentralization of activities and accountabilities out to regional branches will require greater development of these structures.

Regarding financial management, Senegalese Red Cross made limited progress in 2004 due to delays in the implementation of new computerized systems and the financial procedures manual. Thus, the regional finance and resource development program focussed on improving financial reporting with specific exchange of skills missions with the Federation regional office for Western Africa which enabled the regional office to improve its knowledge of the management systems and procedures within the national society and propose better support related to the quality of the national society's financial reporting. The main challenge for the national society in 2005 is to develop sound financial management systems. Assistance through active participation of Dakar Office Finance Officer is envisaged. Additionally, the national society wishes to enhance its communication and networking strategy. Linked to efforts to move toward sustainable development, the national society seeks greater diversification of its revenue sources through increased participation of the local funding base, and reduced dependency on limited external funding. Therefore, plans to strengthen financial management systems are also linked to the increased capacity for branch and community level fundraising. Two workshops were held for six branches in 2004 to take advantage of the National Committee's experience and documentation in resource mobilization and in 2005 the Federation will assist the Senegalese Red Cross to create more active and self sustaining branches.

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Goal: To decrease vulnerability of people living in Senegal through improved service delivery by the Senegalese Red Cross Society.

Objective 1: The organizational and operational capacities of Senegalese Red Cross improve through better functioning of governance and management bodies and re-enforced branches.

Expected Results:

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

<Refer to the Logical Framework Planning Matrix: Senegal Organizational Development>

<http://www.ifrc.org/cgi/pdf_appeals.pl?/annual05/logframes/africa/05AA032OD.pdf>

Objective 2: Senegalese Red Cross increases its financial management skills and develop its ability to advocate and market their programming

Expected Results:

- Financial reports demonstrate improved quality and meet standard requirements.
- Finance staff develop their understanding of the program budgeting cycle process
- The national society is decentralized, having strong branches with the capacity to carry out the mission of the national society.
- Senegalese Red Cross activities and interventions are disseminated actively and effectively through mass media country wide.
- A resource mobilization-fundraising plan and guidelines are developed, approved and disseminated throughout the structures.

<Refer to the Logical Framework Planning Matrix: Senegal Finance Development>

<http://www.ifrc.org/cgi/pdf_appeals.pl?/annual05/logframes/africa/05AA032FD.pdf>

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BUDGET 2005

PROGRAMME BUDGETS SUMMARY

Appeal no.: 05AA032

Name: SENEGAL

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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Food | 14,766 | 28,395 | 0 | 0 | 0 | 0 | 43,161 |
| Seeds & plants | 0 | 2,065 | 0 | 0 | 0 | 0 | 2,065 |
| Water & Sanitation | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Medical & first aid | 9,890 | 0 | 0 | 0 | 0 | 0 | 9,890 |
| Teaching materials | 2,300 | 0 | 0 | 0 | 0 | 0 | 2,300 |
| Utensils & tools | 20,951 | 0 | 0 | 0 | 0 | 0 | 20,950 |
| Other relief supplies | 2,208 | 0 | 0 | 0 | 0 | 0 | 2,208 |
| SUPPLIES | 50,115 | 30,460 | 0 | 0 | 0 | 0 | 80,574 |
| Land & Buildings | 3,910 | 4,440 | 0 | 0 | 0 | 0 | 8,350 |
| Vehicles | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 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 | 3,910 | 4,440 | 0 | 0 | 0 | 0 | 8,350 |
| Warehouse & Distribution | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Transport & Vehicules | 11,941 | 2,482 | 0 | 308 | 0 | 0 | 14,731 |
| TRANSPORT & STORAGE | 11,941 | 2,482 | 0 | 308 | 0 | 0 | 14,731 |
| Programme Support | 14,362 | 5,052 | 0 | 4,810 | 0 | 0 | 24,223 |
| PROGRAMME SUPPORT | 14,362 | 5,052 | 0 | 4,810 | 0 | 0 | 24,223 |
| Personnel-delegates | 7,960 | 2,213 | 0 | 11,191 | 0 | 0 | 21,363 |
| Personnel-national staff | 68,266 | 15,962 | 0 | 14,647 | 0 | 0 | 98,874 |
| Consultants | 0 | 0 | 0 | 8,300 | 0 | 0 | 8,300 |
| PERSONNEL | 76,226 | 18,175 | 0 | 34,138 | 0 | 0 | 128,538 |
| W/shops & Training | 51,307 | 9,900 | 0 | 22,823 | 0 | 0 | 84,029 |
| WORKSHOPS & TRAINING | 51,307 | 9,900 | 0 | 22,823 | 0 | 0 | 84,029 |
| Travel & related expenses | 1,016 | 4,180 | 0 | 10,707 | 0 | 0 | 15,902 |
| Information | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Other General costs | 11,212 | 3,040 | 0 | 1,207 | 0 | 0 | 15,459 |
| GENERAL EXPENSES | 12,228 | 7,220 | 0 | 11,914 | 0 | 0 | 31,361 |
| TOTAL BUDGET: | 220,089 | 77,729 | 0 | 73,993 | 0 | 0 | 371,809 |