

Programme Update



International Federation
of Red Cross and Red Crescent Societies

Swaziland

Appeal No. MAASZ002

31 August 2009

This report covers the period
01 January 2009 to 30 June
2009



Participants at the regional community-based health and First Aid Workshop held in Swaziland

In brief

Programme purpose:

Baphalali Swaziland Red Cross Society (BSRCS) programmes are aligned to the mission and vision of the International Federation of Red Cross and Red Crescent (IFRC)'s Global Agenda, and are designed to contribute towards reducing the impact of disasters and public health emergencies among the vulnerable people.

Programme summary:

The key focus for the period has been the finalization of the long pending five divisional elections leading to the Annual General Meeting (AGM) and national elections. The controversial election re-run in Manzini Division was finally concluded in May, putting an end to the long running divisional conflicts, leading to the preparation for an AGM held in July 2009.

The National Society, therefore, has drafted a 'Recovery Plan' to get partners support to address its crucial issues, including the election and induction of its new leadership (National Executive Committee), settlement of long outstanding income tax debt (running over Euro 100,000) and human resources restructuring. The process has been supported by the IFRC Southern Africa Zone office organisational development unit and some key partners.

With the support of the IFRC, BSRCS focused its efforts on increasing the impact of the integrated HIV and AIDS, livelihood and food security programme, and on developing the capacity of its branches in programme implementation. As such a joint baseline study was conducted in four regions to inform the development of programmes that are responsive to the needs on the ground. There were consistent training and orientation activities for the management and staff members at all levels in order to ensure effectiveness in implementation.

Financial situation: The total budget for 2009 was CHF 702,625, of which 49 percent was covered. The majority of funds have been earmarked for disaster management and organisational development programmes. With this support, the National Society has been involved in implementing disaster risk reduction (DRR) activities and capacity building initiatives. Donors under this plan thus far include the Finnish and Swedish Red Cross Societies.

[Click here to go directly to the attached financial report.](#)

No. of people we help:

BSRCS reached 1,500 people with disaster risk reduction (DRR) activities supported through the integrated food security programme; 85,500 people through community health and care initiatives; 4,300 people with various capacity development initiatives; and 515,000 people through the dissemination of Fundamental Principles and Humanitarian Values.

Our partners: This plan has so far been supported by the Finnish and Swedish Red Cross, whilst the implementation received technical support from the IFRC. The National Society has also partnered with UN agencies (UNICEF, WFP and WHO), government ministries (Ministry of Health and Social Welfare [MoHSW]), as well as national organizations (the Alliance of Mayors Initiative on Community Action on AIDS at the Local Level [AMICAALL], the National Emergency Response Council on HIV and AIDS [NERCHA], and the National Children's Coordination Unit [NCCU]).

Context

The BSRCS operates in an environment awash with humanitarian challenges. Despite Swaziland's predominantly sub-tropical climate and access to water, drought is an increasing challenge for communities in the lowveld. The country also faces large income disparities, declines in economic growth and availability of food, and increasing socio-political tensions.

The global climate change has adversely affected Swaziland, which has experienced its worst drought, since 1991/1992. An assessment conducted by a joint team from the FAO, WFP and the local Vulnerability Assessment Committee (VAC) revealed that 410,000 people require humanitarian assistance such as food, agricultural inputs, water and sanitation, health and nutritional support, and livelihood recovery in 2009. Prices of agricultural inputs and other basic household necessities have dramatically increased and are beyond the reach of most vulnerable households. According to the VAC and the WFP/FAO joint assessment teams, the country's maize deficit is at 41 percent, and the most vulnerable subsistence farmers will require external assistance in order to produce an adequate amount of food for the next season.

Although the UNDP statistics show that Swaziland's adult literacy rose from 72 percent in 1990 to 79.6 percent in 2005, its ranking has fallen in recent years because of the high incidence of HIV and AIDS. HIV prevalence among 15 to 49 year olds was estimated at 26.1 percent in 2007 according to the Swaziland Department of Health survey. Life expectancy at birth has fallen from 49.6 years between 1970 and 1975 to 40.9 years in 2005. According to the *Economist Intelligence Unit*, the probability of a Swazi aged 15 years today reaching the age of 40 is now only 26 percent.

In response to the socio-economic and humanitarian issues, BSRCS programmes have been strong in health and care services, thus enhancing psychosocial support, building safer and healthier communities through community-based First Aid, safe water, adequate sanitation and hygiene promotion. BSRCS is also focusing on food security, disaster response and increased resilience through disaster risk reduction initiatives. The programmes are implemented across Swaziland's five divisions, covering 10,750 households and driven by 114 staff with the assistance of 1,975 volunteers. In order to accomplish its goals, BSRCS utilizes the combined efforts and participation of all stakeholders, particularly with regards to strengthening its institutional capacities.

BSRCS will also continue implementing the five-year integrated HIV and AIDS programme (2006-2010) which is part of the Southern Africa Regional HIV and AIDS programme and a component of the IFRC Global Alliance on HIV. For a report on this programme please see the Southern Africa Regional HIV and AIDS programme update ([MAA63003](#)).

Progress towards outcomes

Disaster Management

Expected results

- Capacity is increased in skilled human, financial and material resources for effective disaster management.
- BSRCS capacity and ability in disaster management is strengthened and exhibiting standards stipulated in the Disaster Policy by 2010.
- Nutritional condition of the most vulnerable population is improved with special attention to women and child-headed households.
- Vulnerability of communities in disaster prone areas is reduced through timely information, capacity building and resilience to disaster risks.
- BSRCS designs appropriate programmes and activities and engages communities in preparing for disasters.

Achievements

In building capacity in disaster management, a staff member and 19 volunteers were trained on basic disaster management and how to conduct vulnerability needs assessment, with support of the IFRC. At divisional level, 95 volunteers and staff were trained on commercial First Aid, in preparedness in case of emergencies such as occupational hazards or road accidents. Five volunteers also travelled to Botswana for a two weeks' First Aid Instructors course held in April 2009.

The IFRC Southern Africa Zone office provided technical support in the design and implementation of a joint baseline survey for the integrated health and care, HIV and AIDS, livelihood and food security programme. The survey was conducted in the four regions where BSRCS is active. The IFRC facilitated the training of data collectors, whilst the National Society led the orientation of management and staff, specifically regional coordinators and head nurses.

BSRCS also established a small livestock project, thus goat-rearing under the food security programme in the Lubombo region. The project is envisaged to benefit the beneficiaries with food source and income generation from selling the goats.

During the reporting period, 165 families were affected by a fire, and received relief assistance from BSRCS. The volunteers helped with relief distribution and construction of temporary shelters for those whose houses were completely destroyed.

Challenges

- Swaziland is partly mountainous and it is a challenge to reach some of the remote projects sites without the convenient mode of transport, such a 4X4 truck. It became a major set-back in the reporting period and some inaccessible project areas remained without adequate monitoring.

Health and Care

Expected results

- The level of communities` knowledge of health issues is increased through the development and distribution of health related information, education and communication (IEC) material.
- Access to safe water and sanitation facilities is improved among the target population, according to the Sphere minimum standards.
- Blood donation awareness and a pool of voluntary non-remunerated blood donors (VNRBD) increased through the Club 25 Methodology.
- Communities are increasingly able to cope with health hazards and risks in their environment through engagement in integrated community-based health and First Aid activities.

Achievements

BSRCS engaged in the integrated measles follow-up campaign, which involved administering of Vitamin A, measles vaccine, and Albendazole tablet, as required by the government. From its pool of 1,975 volunteers, of which 295 are home-based care (HBC) facilitators and 265 youth peer educators, BSRCS actively participated in the campaign by volunteering services in registration and administration.

The Ministry of Health organized an Integrated Management of Childhood Illnesses (IMCI) workshop with guidelines on monitoring the behaviour of nurses in IMCI. Members of the nursing profession within the Red Cross clinics attended the workshop.

HIV and AIDS prevention activities included peer education, which reached 16,625 beneficiaries; and the promotion of VCT and PPTCT services, which reached 675 beneficiaries. The report for the HIV and AIDS programme can be found in [MAA63003](#).

The National society is moving forward with the Silele community water and sanitation project, whilst the Nhlanguano Division is getting quotations from suppliers for the items required for the project. The earmarked funds should be used by September 2009, thus within the planned implementation timeframe.

Challenges

- Most of the health and care activities remained underfunded, thus affecting progress in the operationalization of the plan.
- The work at the BSRCS clinics are also crippled by high staff turnover, especially in nursing as exacerbated by the low salary scales.
- The unavailability of a database for OVC is a challenge as the possibility of double counting is inevitable.

Organizational Development

Expected results

- BSRCS has sound and functional structures and systems at all levels, governance, management and local volunteer networks for optimal organisational performance and accountability.
- BSRCS has well defined policies and guidelines in programming, finance, logistics and human resources development.
- BSRCS has viable governance, management, branch and volunteer network structures conducive to optimal organisational performance in service delivery.
- BSRCS has the capacity for planning, monitoring, evaluation and reporting (PMER) and these functions are executed in an effective manner and according to laid down standards.
- BSRCS has a well-functioning internal and external communication system, supported with a reliable information technology infrastructure.
- BSRCS has vibrant branches and local units delivering quality services through their local volunteer and youth networks.
- BSRCS has well established systems and procedures for the systematic provision of technical support for branch development and volunteer management by the headquarters.
- BSRCS is able to meet at least 25 percent of core costs by end of 2009 and 50 percent by end of 2010 through local resource mobilisation.
- Effective financial management system, procedure and tools are in place and systematically used.

Achievements

BSRCS held the AGM and election from 3 to 4 July 2009. The National Executive Committee (NEC) was elected after having gone through repeated controversies around division level elections. The AGM followed divisional elections which were conducted during January to February in five areas. Throughout the process, The IFRC Zone office provided technical assistance, advice and an SOS funding (CHF 25,000) for divisional and national elections.

The National Society, during the reporting period, discussed with its partners on its draft Recovery Plan, the process supported by the Zone OD. The Southern Africa Partnership of Red Cross Societies (SAPRCS) meeting held in June 2009 discussed the draft plan with active partners including the Finnish and Danish Red Cross and the ICRC, who pledged to support the final plan.

One of the key tasks under the recovery plan has been the determination of the National Society's core structure and assessment of the core expenses for its sustainability. This is expected to be finalised soon given the consistent IFRC technical support. Primarily, the National Society had engaged a country level financial consultancy firm, which proposed a human resources structure and recommended a market level salary scale. Although the significance of the recommendation of the consultancy is not ruled out totally, the consultancy has not been able to suggest a strategy to address the financial difficulties and a way forward. It is envisaged to use in-house expertise to advise and determine NS-structure cost to help put together a sustainability plan. The new remuneration structure should without prejudice be motivational in order to retain staff, thus ensuring stability, consistency and continuation in programming. In addition, there is need to implement a Volunteer Management Policy and to create a database to monitor the activities of the volunteers.

Challenges

- Division level elections had long been delayed due to inter-division election related conflicts that were even taken to courts for arbitration. The fact that the National Society has not had an internal procedure or bylaws to deal with the conflicts, delayed the national level meeting and elections.
- The lack of Staff Development Policy (including training) is a challenge as the National Society repeatedly becomes a training ground as employees move to greener pastures after being trained.

Fundamental Principles and Values

Expected results

- Knowledge, understanding and application of the Fundamental Principles and Humanitarian Values are enhanced at all levels of the organisation (including non-discrimination, non-violence, tolerance and respect for diversity).
- Target population internalised Fundamental Principles and Humanitarian Values leading to positive change in behaviour.
- BSRCS increased visibility and image as champion of the humanitarian cause.
- BSRCS has mainstreamed gender issues in all its programmes.
- The dissemination of Fundamental Principles and Humanitarian Values is an integral part of all programmes and activities.

Achievements

A variety of information, education and communication (IEC) materials were produced and distributed, including 500 copies of Umphalali newsletter and three banners. The Red Cross Day commemoration reached 3,790 beneficiaries and radio programming raised awareness among approximately 500,000 people. The Red Cross youth clubs situated in 14 schools have motivated 11,200 youth through peer education on life skills development.

Challenges

- Communication needs to be mainstreamed, with a particular focus on internal communication.
- During the production of the newsletter, delays were caused by the procrastination of programme officers in submitting their implemented activities for publication.

Working in partnership

BSRCS has bilateral relations with several Movement partners, including the Finnish, Swiss, German, Spanish and Italian Red Cross Societies and the ICRC. The IFRC through the Southern Africa Zone office continued to provide technical support in programme, management and governance, performance measurement and tracking and in financial management. Other bilateral partners include UN agencies (WFP, WHO and FAO), government ministries (Ministry of Development and Youth Affairs and Ministry of Health and Social Welfare) and national organizations (the Coordinating Assembly of NGOs, AMICAALL, NERCHA and NCCU).

The National Society's multilateral relations continued with the Royal Netherlands Embassy (RNE), and the Norwegian and Finnish Red Cross Societies through the IFRC for the health and care programme. Private sector donors for small projects included the Swaziland Post and Telecommunications Corporation and Swaki Industries.

Contributing to longer-term impact

The HIV and AIDS programme is synchronized with the Local National Strategic Plan (NSP), which is also aligned to the National Poverty Reduction Strategy and Action Plan (PRSAP). The same is true for the food security programme, which is aligned to the National Food Security Strategy, which is implemented in partnership with members of the National Food Security Consortium, which subscribed to the food security goal in the PRSAP and the MDGs. The human resources office has finalised plans to mainstream gender and advocacy in the BSRCS programming.

Looking ahead

- A focus is required on volunteer management as the number of vulnerable people increases.
- The projects that are either too costly or not viable for the organization will have to be discontinued. This will ensure the National Society remains focused and realistic in its endeavours.

How we work

The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity."

Global Agenda Goals:

- Reduce the numbers of deaths, injuries and impact from disasters.
- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

Contact information

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International Federation of Red Cross and Red Crescent Societies

MAASZ002 - Swaziland

Mid-year report 2009

| Selected Parameters | |
|---------------------|----------------|
| Reporting Timeframe | 2009/1-2009/6 |
| Budget Timeframe | 2009/1-2009/12 |
| Appeal | MAASZ002 |
| Budget | APPEAL |

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

| | Goal 1: Disaster Management | Goal 2: Health and Care | Goal 3: Capacity Building | Goal 4: Principles and Values | Coordination | TOTAL |
|--|-----------------------------|-------------------------|---------------------------|-------------------------------|--------------|----------------|
| A. Budget | 352,790 | 170,070 | 149,412 | 30,353 | | 702,625 |
| B. Opening Balance | 0 | 0 | 0 | 0 | | 0 |
| Income | | | | | | |
| <u>Cash contributions</u> | | | | | | |
| <i>Capacity Building Fund</i> | | | 24,937 | | | 24,937 |
| <i>Finnish Red Cross</i> | 9,952 | | 5,366 | | | 15,318 |
| <i>Finnish Red Cross (from Finnish Government)</i> | 56,396 | | 30,408 | | | 86,803 |
| <i>Sweden Red Cross</i> | 143,711 | | | | | 143,711 |
| C1. Cash contributions | 210,058 | | 60,711 | | | 270,769 |
| <u>Outstanding pledges (Revalued)</u> | | | | | | |
| <i>Finnish Red Cross</i> | 10,969 | | | | | 10,969 |
| <i>Finnish Red Cross (from Finnish Government)</i> | 62,157 | | | | | 62,157 |
| C2. Outstanding pledges (Revalued) | 73,126 | | | | | 73,126 |
| C. Total Income = SUM(C1..C5) | 283,185 | 0 | 60,711 | 0 | | 343,895 |
| D. Total Funding = B + C | 283,185 | 0 | 60,711 | 0 | | 343,895 |
| Appeal Coverage | 80% | 0% | 41% | 0% | | 49% |

II. Balance of Funds

| | Goal 1: Disaster Management | Goal 2: Health and Care | Goal 3: Capacity Building | Goal 4: Principles and Values | Coordination | TOTAL |
|---|-----------------------------|-------------------------|---------------------------|-------------------------------|--------------|----------------|
| B. Opening Balance | 0 | 0 | 0 | 0 | | 0 |
| C. Income | 283,185 | 0 | 60,711 | 0 | | 343,895 |
| E. Expenditure | -103,850 | | -60,082 | | | -163,932 |
| F. Closing Balance = (B + C + E) | 179,335 | 0 | 628 | 0 | | 179,963 |

International Federation of Red Cross and Red Crescent Societies

MAASZ002 - Swaziland

Mid-year report 2009

| Selected Parameters | |
|---------------------|----------------|
| Reporting Timeframe | 2009/1-2009/6 |
| Budget Timeframe | 2009/1-2009/12 |
| Appeal | MAASZ002 |
| Budget | APPEAL |

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

| Account Groups | Budget | Expenditure | | | | | TOTAL | Variance |
|---|----------------|-----------------------------|-------------------------|---------------------------|-------------------------------|--------------|----------------|----------------|
| | | Goal 1: Disaster Management | Goal 2: Health and Care | Goal 3: Capacity Building | Goal 4: Principles and Values | Coordination | | |
| A | | B | | | | | A - B | |
| BUDGET (C) | | 352,790 | 170,070 | 149,412 | 30,353 | | 702,625 | |
| Supplies | | | | | | | | |
| Construction Materials | | 17,926 | | | | | 17,926 | -17,926 |
| Seeds,Plants | 22,476 | | | | | | | 22,476 |
| Water & Sanitation | 72,752 | | | | | | | 72,752 |
| Medical & First Aid | 256 | | | | | | | 256 |
| Other Supplies & Services | 12,093 | | | | | | | 12,093 |
| Total Supplies | 107,577 | 17,926 | | | | | 17,926 | 89,652 |
| Land, vehicles & equipment | | | | | | | | |
| Medical Equipment | 30,005 | | | | | | | 30,005 |
| Total Land, vehicles & equipment | 30,005 | | | | | | | 30,005 |
| Transport & Storage | | | | | | | | |
| Storage | 12,003 | | | 1,190 | | | 1,190 | 10,813 |
| Transport & Vehicle Costs | 65,422 | | | 215 | | | 215 | 65,206 |
| Total Transport & Storage | 77,425 | | | 1,405 | | | 1,405 | 76,020 |
| Personnel | | | | | | | | |
| International Staff | | | | 415 | | | 415 | -415 |
| National Staff | | | | 1,588 | | | 1,588 | -1,588 |
| National Society Staff | 143,735 | | | 13,836 | | | 13,836 | 129,898 |
| Consultants | | | | 11,837 | | | 11,837 | -11,837 |
| Total Personnel | 143,735 | | | 27,677 | | | 27,677 | 116,058 |
| Workshops & Training | | | | | | | | |
| Workshops & Training | 196,547 | | | 8,626 | | | 8,626 | 187,921 |
| Total Workshops & Training | 196,547 | | | 8,626 | | | 8,626 | 187,921 |
| General Expenditure | | | | | | | | |
| Travel | | 335 | | 7 | | | 342 | -342 |
| Information & Public Relation | 7,000 | | | | | | | 7,000 |
| Office Costs | 45,271 | | | 4,701 | | | 4,701 | 40,570 |
| Communications | 13,639 | | | 204 | | | 204 | 13,435 |
| Professional Fees | | | | 89 | | | 89 | -89 |
| Financial Charges | | 2,030 | | -456 | | | 1,575 | -1,575 |
| Other General Expenses | 35,756 | 4,916 | | | | | 4,916 | 30,840 |
| Total General Expenditure | 101,666 | 7,281 | | 4,545 | | | 11,827 | 89,839 |
| Programme Support | | | | | | | | |
| Program Support | 45,671 | 7,344 | | 4,222 | | | 11,565 | 34,105 |
| Total Programme Support | 45,671 | 7,344 | | 4,222 | | | 11,565 | 34,105 |
| Operational Provisions | | | | | | | | |
| Operational Provisions | | 71,299 | | 13,607 | | | 84,906 | -84,906 |
| Total Operational Provisions | | 71,299 | | 13,607 | | | 84,906 | -84,906 |
| TOTAL EXPENDITURE (D) | 702,625 | 103,850 | | 60,082 | | | 163,932 | 538,693 |
| VARIANCE (C - D) | | 248,941 | 170,070 | 89,329 | 30,353 | | 538,693 | |