

PROGRAMME UPDATE



International Federation of Red Cross and Red Crescent Societies
Fédération Internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

SOUTHERN AFRICA: HIV AND AIDS CONSORTIUM

Appeal No. MAA63002
18 December 2006

APPEAL CLOSURE

The Federation's vision is to strive, through voluntary action, for a world of empowered communities, better able to address human suffering and crises with hope, respect for dignity and a concern for equity. Its mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world's largest humanitarian organization and its millions of volunteers are active in over 185 countries.

In Brief

Programme Update no. 2; Period covered: July to November 2006

Appeal target: CHF 12,444,000 (USD9, 485,000 or EUR 8,042,000). This Programme Update closes Appeal MAA63002; a final financial report will be issued once all projects have been closed.

Appeal 2006-2007: <http://www.ifrc.org/docs/appeals/annual06/MAA63002.pdf>

Programme Update no. 1: <http://www.ifrc.org/docs/appeals/annual06/MAA6300201.pdf>

The programmes herein are aligned with the Federation's 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":

- *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.*

Programme summary: The 2006 activities of the HIV and AIDS Consortium Appeal were fully funded by a Consortium of donors, namely the Royal Netherlands Embassy (RNE), the Swedish International Development Agency (SIDA)/Swedish Red Cross and Development Cooperation Ireland (DCI). 70% of the funding for the period ending in June 2006 came from the RNE. The RNE granted an extension to September 2006 to ensure that the activities of national societies and the regional delegation in Harare are covered to the end of the year. SIDA funding goes up to 2007.

The Southern Africa HIV and AIDS Consortium project has been running since 2002. However, with the issuance of this Programme Update, it has now been closed. After consultation with the involved donors, the remaining funds have been transferred to the new Southern Africa Regional HIV and AIDS Programme 2006-2010. The new Appeal ([MAA63003](#)), launched on 1 November 2006, is seeking CHF 317.2 million (towards a total budget of CHF 384.9 million) to cover the needs of Red Cross societies of Angola, Botswana, Lesotho, Malawi, Mozambique, Namibia, South Africa, Swaziland, Zambia and Zimbabwe as well as the support requirements of the Federation Secretariat.

The already-funded part of the Appeal (17.6% of the total budget) comes from funds that have been carried over from the HIV and AIDS consortium Appeal. This enabled the new regional programme to start. Additional funding has also been obtained from RNE to cover some activities in support of orphans and vulnerable children (OVC) until February 2007.

Operational developments

The HIV and AIDS Consortium programme was planned to be in operation from 2002 to 2007 and has now been merged with the new HIV and AIDS programme (2006-2010). The programme's focus was HBC, orphan care, HIV prevention and advocacy. It intended to reach 100,000 people living with HIV (PLWHIV) and 250,000 orphans and vulnerable children (OVC) by 2007. The development of a new HIV and AIDS programme was necessitated by the recommendations of the mid-term evaluation that was conducted in February 2005. In addition, the major donor funding was coming to an end in September 2006 hence there was need to develop a new plan to include the remaining funding from SIDA/Swedish Red Cross.

The programme has achieved most of its targets. Cumulatively the number of clients who have been provided with care and support within the programme has reached over 100,000, although some of these have died and others have been weaned because of improved health. Over 250,000 OVC have been provided with educational, material, psychological and social support. Prevention activities have reached more than five million people including youths, soldiers, truck drivers, commercial sex workers and the general public.

Through the RNE, EUR 5,000,000 has been secured to provide support to OVC in seven countries from 1 September 2006 to February 2007. The funding will enable the national societies (NSs) to support a total of 32,450 OVC directly and 165,600 indirectly. Prevention activities will reach 681,500 and, through advocacy, 1,094,000 people will be reached with anti-stigma interventions. This component of the project is part of the long-term five-year programme and falls directly under the following objectives:

- Provision of care and support to PLWHIV and OVC through effective home-based care (HBC), food security and access to anti-retroviral treatment (ART);
- Promotion of behaviour change and access to voluntary counselling and testing (VCT), prevention of parent-to-child transmission (PPTCT) and ART services;
- Reduction of stigma and discrimination and promotion of rights, policies and access to services for staff and volunteers, PLWHIV and OVC.

The Integrated HIV and AIDS programme Appeal was launched on 1 November 2006, an event attended by media agencies based in Johannesburg. The Special Representative of the Secretary General for HIV and AIDS graced the launch and issued a statement confirming the Red Cross commitment in fighting the spread and mitigating the effects of HIV and AIDS.

Federation achievements

The regional delegation Harare initiated the development of a new integrated long-term HIV and AIDS strategy and plan in 2005, taking into consideration the lessons learned since 2001 as well as the changing nature of the pandemic. The basis for forward programme development has been a highly consultative process involving NS leadership, technical staff and management as well as the Federation Secretariat, partner national societies (PNSs) and other regional stakeholders.

The Federation has developed a strong communication and promotion plan to support the new Appeal within a framework of international cooperation and co-ordination. This includes working closely with like-minded non-governmental societies (NGOs) and civil society groups as well as international agencies and governments (at regional, country, and community levels).

Technical support visits have been conducted in **Lesotho, Namibia, Botswana, South Africa, Angola, Malawi, Mozambique** and **Swaziland** to monitor implementation of HIV and AIDS interventions. Regional technical staff focused on various issues such as finance management and development, resource mobilization, partnerships with PLWHIV, OVC situation analysis, organizational development and general monitoring of the programme.

NS were provided with technical support in developing HIV and AIDS programme plans which reflect a shared integrated approach to mitigate the impact of the HIV and AIDS pandemic. The key interventions are: prevention, care and support; OVC support; psychological and social support; advocacy; food security; ART and institutional development. The integrative approach is consistent with the current global strategies towards providing universal access to prevention, treatment, care and support. Through these plans, the Red Cross societies continue contributing to their governments' efforts to achieve the [Millennium Development Goals](#) and to progress the

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declaration of commitment made at the 2001 United Nations General Assembly Special Session (UNGASS) on HIV and AIDS. The Federation Secretariat, through its regional delegation, and PNSs continued to provide technical and financial assistance to NSs in the implementation of these country programmes.

The Federation developed partnership in the region between the network of associations of PLWHIV and Red Cross societies, starting with **Namibia** and **Zambia**. This is part of the agreement between the Global Network of People Living with HIV (GNP+), the Federation and the Networks of African People Living with HIV (NAP+) to collaborate on empowering PLWHIV through their meaningful involvement in capacity building, advocacy, care and support.

In 2006, seven good practice documents for **Angola, Malawi, Mozambique, Namibia, South Africa, Zimbabwe** and **Zambia** were produced. These were compiled with the assistance of Southern Africa AIDS Dissemination Service (SAfAIDS). The documentation process of good practices will continue in 2007 and beyond.

Prevention activities are once again being placed high on the agenda of the HIV and AIDS activities in the region. It has been realized that for the Red Cross to make an impact on the devastating epidemic, there is need for the NSs to increase evidence-based and specific context of the targeted prevention activities. At the Southern Africa Regional Aids Network (SARAN) meeting held in Harare, Zimbabwe on 28 and 29 September 2006, NSs and PNSs agreed to scale up implementation of the regional prevention strategy.

A training package on HIV prevention, care, treatment and support for community-based volunteers was launched on 2 October 2006 in Harare. The training package was developed by the Federation, in conjunction with the World Health Organization (WHO) and SAfAIDS. The training will empower volunteers with adequate and accurate information on treatment literacy, preparedness, basic facts on HIV and ARVs, nutrition, palliative care, counselling and care for carers. The launch was presided over by the Zimbabwean Minister of Health and the special representative on HIV and AIDS for the Federation Secretary General gave a keynote address. Also in attendance were UN officials and representatives of PLWHIV. A total of 250 people attended the launch.

Orientation training on the training package was also held from 3-6 October for HIV technical programme officers from Africa, Asia and Europe. The purpose was to familiarize the participants on the training package which they found very useful and providing valuable information that would empower the volunteers with skills and knowledge. During the orientation, WHO and the Federation agreed on the process of adaptation of the training package at country level. A total of 60 participants attended the orientation training.

A consultative meeting was held with the participants who attended the orientation training for prevention guidelines. Participants provided valuable information which will form part of the final global prevention guidelines for the Federation. Proposals were also made on how a task force focusing on developing the final prevention guidelines could be formed. It was generally agreed that the task force should include regional, NS staff, Secretariat and other organizations involved in prevention interventions.

A regional PPTCT advocacy campaign is being planned, together with the United Nations Children's Fund (UNICEF), WHO Africa Regional Office and SAfAIDS, due to a realization that there is low uptake of PPTCT services in the region. Only 10 % of pregnant women are accessing PPTCT services and the country plans and policies are not being implemented due to various reasons ranging from financial and political will. The advocacy campaign will be implemented at national level targeting political leaders and at community level through volunteers going door-to-door.

As part of sharing of information and exchange of experiences, the regional delegation supported the regional HBC officer to participate at the 16th International AIDS Conference in Toronto. The Regional OVC officer was supported to participate at the Roster meeting in Denmark to share experiences on psychosocial support.

An OVC task force, which will enhance the integrated approach when planning, implementing and reporting on programmes, has been established at the Federation Secretariat. An OVC project coordinator and logistics/relief coordinator were recruited in mid-September. The health and care team has been strengthened by the recruitment of additional regional finance and reporting officers.

Achievements of national societies

Table 1: Statistics on HIV and AIDS activities as at October 2006

National society	HBC projects	HBC clients	Care facilitators	OVC	Support groups	People reached with prevention
Angola	12 prevention projects	N/A	238 peer educators	30	0	151,000
Botswana	1	94	15	200	1	35,108
Swaziland	3	3,500	177	6,000	8	8,324
Namibia	6	7,491	1,797	3,472	18	251,675
Lesotho	12	3,261	405	2,597	45	3,593
Zambia	8	4,169	461	1,002	63	4,467
Malawi	14	5,164	526	12,300	9	25,138
South Africa	19	10,000	700	3,000	65	291,872
Mozambique	21	6,886	497	1,080	20	812,245
Zimbabwe	27	17131	1400	50,000	150	49,096
Total	111	46,585	5,978	79,681	379	1,632,518

After the successful launch of the ART training manual, **Zimbabwe** Red Cross Society trained volunteers using the training package and so far, 87 care facilitators are already providing information on treatment literacy. The **Namibia** Red Cross decided to roll-out training of care facilitators using the training package. Similarly, the Baphalali **Swaziland** Red Cross Society has been implementing an ART programme which will use the training package to train its volunteers.

Lesotho and Zambia Red Cross societies developed a draft HIV Work Place Policy that looks at the welfare of employees. The development of the HIV policy has triggered the development of other policies such as the human resource policy. The policy will support implementation of work-based HIV interventions including reduction of stigma and discrimination at the workplace. NSs are developing strong links with networks of PLHIV. The partnership officer visited both networks and national societies in **Botswana, Malawi, Swaziland, Zimbabwe** and **Namibia** in order to foster collaboration with Networks for PLWHIV. Collaboration with the Southern Africa Development Community (SADC) on advocacy activities is being strengthened. An SADC PLWHIV regional advocacy framework has been adopted subject to amendment on the institutional arrangements. The partnership has attended SADC meetings representing NAP+.

NSs continued to implement advocacy activities through campaigns at national, district, and community level. At community level, volunteers conducted HBC, health and hygiene activities through home visits to households with clients. Support groups have been strengthened through income generating activities (IGAs) such backyard gardening, poultry and piggery. Livelihoods of PLWHIV have been enhanced in countries such **Swaziland, Zambia** and **Zimbabwe** with very strong support groups. They have improved on food security and nutrition, and are able to generate funds for cover to household basic needs and medical expenses.

NSs have been capacitated in the area of planning, reporting, management, implementation, monitoring and evaluation. HIV and AIDS coordinators attended the SARAN meeting which was held from 28-29 September 2006 in Harare. SARAN is an annual meeting whose purpose is to share information, experiences and good practices.

HIV and AIDS scaling up committee meeting was held on 30 September and was attended by Secretaries General of **Malawi, Swaziland, Namibia, Zimbabwe** and the health adviser for **Zambia** Red Cross Society. The head of regional delegation, programmes coordinator and regional HBC programme officer attended the meeting to discuss progress made and reviewing the Terms of Reference (ToRs) of the committee. The committee ensures high involvement of the NS leadership in the implementation of the Regional HIV and AIDS programme.

NSs in the region have been empowered with psychosocial skills through training sessions held in June and July for staff and volunteers. Regional Psychosocial Initiative (REPSSI) was hired by the Federation to conduct the training

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in two sessions for a total of 60 participants. Staff and volunteers working in HIV and AIDS projects at country level are confident enough to provide support to clients and OVC through counselling.

Impact: The need for love and acceptance of PLWHIV and OVC has been emphasized through the formation of support groups which encourage sharing of experiences and coping mechanisms at community level. The support groups have been shown to be effective in social and psychological support. Members learnt ways of sustaining the livelihood of their families. Some of the support groups have established IGAs such as backyard and communal gardening, poultry and livestock keeping as well as commodity selling. Livelihoods have been enhanced and most of them have improved in terms of nutrition and food security. Clients in the HIV and AIDS projects have managed to know and disclose their HIV status. This has been as a result of reduction in stigma and discrimination.

Partnerships with the national networks of PLWHIV have been strengthened. Psychological support has led to improved motivation and has given hope and strength to people, especially child-headed households. There has been improved quality of life among clients and family members, including an increased availability of food at household level, reduced morbidity and mortality due to AIDS related illnesses. There is improved knowledge on ART and adherence among clients, thanks to the training and support provided by care facilitators. NSs have increased support for OVC and enabled them to return to school, receive food parcels, materials such clothes, blankets and educational support. High risk groups such as commercial sex workers and truck drivers have been reached with behaviour change messages. The use of condoms has increased among these groups.

There is increased community leaders' (chiefs) involvement in prevention activities. This has helped to fight stigma and discrimination and has also increased uptake of VCT and ART. HIV prevention activities have had an impact on religious leaders who are now accepting prevention activities and becoming more involved. Mentoring programme, memory box¹ and hero work have revived OVC hope in some countries. Better recognition of the NSs in their countries by governments and partners due to the services they are providing.

Constraints: Stigma and discrimination remains high in many areas, thus, hampering access to VCT and ART. This was revealed in a recent study conducted by Zimbabwe Red Cross Society where many of the respondents indicated that their children could not be taught by a HIV-infected teacher. Prevention still remains a challenge. In the same study, it was found that many men are not willing to use condoms and that many married women are also engaging in extra marital affairs to compete with their husbands. ART for adults and children is still a challenge since it is not widely available and it is difficult for clients to access money for transport to collect supplies. The consistency of supplies is at times interrupted due to governments facing financial challenges. With the emerging issues of ART, it is a challenge to keep the volunteers working on care and support programmes, abreast with information on ART. Due to increased numbers of HBC clients and OVC, the volunteers are overloaded and this will necessitate the training of more volunteers so as to reduce the client ratio. Food insecurity remains a major concern, particularly the need for nutritious foods for those on ART and tuberculosis (TB) treatment.

There is need to raise funds for the whole Regional HIV and AIDS programme on HBC, prevention and advocacy. Earmarked funds for OVC support have been raised from the RNE to be spent by February 2007. If this is not done, all the good work that has been done in the past six years will be lost because NSs will not be able to maintain the existing activities without funding.

2007-2010 Focus

The Southern Africa Regional HIV and AIDS Programme builds on the track record of Red Cross HIV and AIDS work in the region. It is the first major component of the new Federation Global HIV and AIDS Alliance that is under development, guided by the Federation's HIV and AIDS Policy and a new Operating Model. This includes the recent appointment of a Special Representative for HIV and AIDS to provide leadership for this programme. Country-level programming has been done in the framework of National Red Cross HIV and AIDS Programme Plans developed in line with the Federation's new Operating Model.

¹ Memory box - is one of the Red Cross initiatives to help mothers and fathers, powerless in the face of death due to HIV and AIDS, to communicate with their children by making a treasure chest of information such as family, photographs, letters, stories and history. The memory box also serves as an important vehicle in the AIDS education battle, by allowing people to talk openly about the disease.

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This new HIV and AIDS Regional Programme is innovative in that it reflects all bilateral and multilateral Red Cross activities and, thus, shows a complete picture of Red Cross HIV and AIDS support requested for each country. The Appeal forms a strong base for effective cooperation and coordination at country level, through the concerned NSs. This is anticipated to maximize programme efficiency and impact. The regional programme is founded on strong country-specific action plans which are connected regionally because there is considerable similarity in terms of the underlying epidemiology of HIV transmission, the patterns of risk and vulnerability, cultural and social aspects as well as shared political and other regional institutions. This helps to share technical expertise, programming experience and lessons learned as well as replicating good practices across countries in the region.

For more details, please refer to the Southern Africa Regional HIV and AIDS Programme Appeal available on the Federation website at page: <http://www.ifrc.org/docs/appeals/annual06/MAA63003.pdf>.

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