Sida Evaluation 07/42

The Red Cross – Lake Victoria Program (LVP) 2004–2006

Fred Opio
Per-Ulf Nilsson

Department for Africa

The Red Cross – Lake Victoria Program (LVP) 2004–2006

Fred Opio
Per-Ulf Nilsson

Sida Evaluation 07/42

Department for Africa

This report is part of *Sida Evaluations*, a series comprising evaluations of Swedish development assistance. Sida's other series concerned with evaluations, Sida Studies in Evaluation, concerns methodologically oriented studies commissioned by Sida. Both series are administered by the Department for Evaluation and Internal Audit, an independent department reporting directly to Sida's Board of Directors.

This publication can be downloaded/ordered from:
http://www.sida.se/publications

Authors: Fred Opio, Per-Ulf Nilsson.

Sida Evaluation 07/42
Commissioned by Sida, Department for Africa

Registration No.: U 11 Ya/13.3
Date of Final Report: June 2007
Printed by Edita Communication AB, 2007
Art. no. Sida40260en
ISBN 978-91-586-8174-3
ISSN 1401—0402

SWEDISH INTERNATIONAL DEVELOPMENT COOPERATION AGENCY
Address: SE-105 25 Stockholm, Sweden. Office: Valhallavägen 199, Stockholm
Telephone: +46 (0)8-698 50 00. Telefax: +46 (0)8-20 88 64
E-mail: sida@sida.se. Homepage: http://www.sida.se

Table of Content

Executive Summary

In 1998, the Secretariat of the East African Community (EAC) in collaboration with the Swedish International Development Cooperation Agency (Sida), agreed for a coordinated approach to foster sustainable development in the Lake Victoria Basin. A process aimed at establishing the strategic partnership, was initiated; and an agreement between EAC Secretariat and the donor community (comprising the governments of Norway, France, Sweden, the World Bank and the East African Development Bank) was signed in April 2001.

Recognizing the potential of well established National Red Cross Societies of EAC countries for which the lake is a shared resource; and the fact that they already had well established Red Cross Branches in the Lake Victoria Basin, the Swedish Red Cross in 2002, initiated discussions with Kenya, Tanzania and Uganda Red Cross Societies on possible ways of making a contribution towards the work of Swedish government/ EAC Partnership and its goal. To this effect, a Memorandum of Understanding (MoU) between the three National Societies individually and through the Eastern Africa Network of Red Cross and Red Crescent Societies RC-Net and the Swedish Red Cross, was signed in Musoma, Tanzania in 2003. The International Federation of Red Cross and Red Crescent (IFRC) co-signed the MoU to demonstrate their commitment to supporting the program. Likewise the International Committee of the Red Cross (ICRC) declared its support for the initiative and would be contributing to the realization of the goal in its area of competence (conflict).

The greatest relevance and impact of the LVP is its involvement in pursuing a regional development program in the Lake Victoria region and its active and wide spread presence at the community level all around the lake. Thousands of community of Red Cross (RC) members, have shown willingness to work locally for development within chosen program priority areas. There is a need to balance the choice of these intervention areas between what is the RC mandate and expertise and what the priority needs are in the communities. How much resources should be invested in emergency preparedness and action (accidents, natural disasters, conflicts) in relation to "slower disasters" like deaths in preventable diseases, HIV/AIDS, unsafe water, hygiene and sanitation, environmental destruction remain questions to be addressed.

Although the project has so far, not made a major significant impact on the target communities, it is expected that in the subsequent phases it will. However, there is a major concern over its coordination. Despite an elaborate organizational structure, the project overall coordination is found to be weak at all levels. The current implementation structure poses a major coordination challenge, as there is no proper overall authority vested in any body. This structure will need to be reviewed and restructured

The LVP is working with many issues; and program interventions are being developed, particularly in the area of safe water and sanitation. Awareness and mobilization activities on HIV/AIDS, hygiene, environmental protection are beginning to have some impact. Based on experiences and strategic choice during the next program phase, the impact and relevance of the program will certainly increase.

However, on the issue of adherence to SRCS-Sida agreement, it is noted that the RC-LVP was not able to adhere fully to the agreed distribution of funds between different budget lines. A larger percentage of funds were utilized for capacity building purposes. Parts of funds used for capacity building were registered under programs. According to the program document, programs in HIV/AIDS, water and sanitation and malaria were mainly to be concerned with the sharing of experiences between countries and one pilot project. Although the sharing of experiences has been there and in particular, the cross-border exchanges between branches have been useful, these program areas have involved small projects and local interventions rather than the sharing of experiences. According to the program document, capacity building initially should have concentrated on "soft ware" while structures and means of

transport would be rare and primarily funded outside the LVI support. But this has not been the case, capacity building costs mainly covered hard ware, in the form of office development, office equipment and IGA investments.

Yet, most of these investments were listed already in the program document, and must be regarded as having been reasonable and have laid a stronger basis for program implementation during the second phase of LVP, and has strengthened the branch capacity to increase own incomes and realize their exit strategies.

The RC seems to fear to challenge government on its roles. For example, in the area of safe water, it is the mandate of government to do so, but RC is often found to be lacking in advocating for safe water provision by government. Many LVP areas lack safe water and governments are not seriously trying to ensure that plans to do so are prepared and budgeted for, but RC is being called upon to initiate such activities. The challenge here is for RC to advocate for safe water by telling governments to carry-out its mandate.

Lastly the LVP was set out to "ensure gender awareness and gender considerations in all activities". This has hardly been the case and the understanding of the gender challenges need to be improved.

List of Abbreviations

ACORD	Agency for Co-operation and Research in Development
AMREF	African Medical and Research Foundation
AIDS	Acquired Immune Deficiency Syndrome
ARV	Anti Retro viral
BCA	Baseline Community Assessment
CBFA	Community Based First Aid
CBO	Community Based Organization
CBHC	Community Based Health Care
EAC	East African Community
FA	First Aid
HIV	Human Immune Virus
HQ	Headquarter
ICRC	International Committee of the Red Cross
IFRC	International Federation of the Red Cross and Red Crescent
IGA	Income Generating Activities.
KRCS	Kenya Red Cross Society
LVP	Lake Victoria Programme
LVI	Lake Victoria Initiative
MoH	Ministry of Health
MoU	Memorandum of Understanding
NGO	Non Governmental Organization
OD	Organization and Development
OVC	Orphans and Vulnerable Children
PLWHA	People Living With HIV/AIDS
PO	Program Officer
PSI	Population Services International
RC	Red Cross
RCAT	Red Cross Action Team
SG	Secretary Generals

Sida	Swedish International Development Cooperation Agency
SRCS	Swedish Red Cross Society
TANESA	Tanzania-Netherlands Project to Support AIDS Control
TOR	Terms of Reference
TRCS	Tanzania Red Cross Society
URCS	Uganda Red Cross Society
VCT	Volunteer Community Teams
VCA	Vulnerability Community Assessment
WATSAN	Water and Sanitation

1. Background to Lake Victoria Program

1.1 Concept and Scope

1. In 1998, the Secretariat of the East African Community (EAC) in collaboration with the Swedish International Development Cooperation Agency (Sida), agreed for a coordinated approach to foster sustainable development in the Lake Victoria Basin. A process aimed at establishing the strategic partnership, was initiated; and an agreement between EAC Secretariat and the donor community (comprising the governments of Norway, France, Sweden, the World Bank and the East African Development Bank) was signed in April 2001. This partnership would be long term, extending over a period of twenty years and a firm pledge for the first ten years was made at the time of signing the agreement.

2. Swedish interest in supporting sustainable socioeconomic development in the Lake Basin was inspired by increasing levels of poverty and worsening health statistics and environmental degradation against a backdrop of the resource endowments of the Basin and the potential for economic growth implied in such endowments. The strategy adopted had two dimensions; 1) involving the engagement and full participation of civil society and local community living around the lake in identifying their needs, their prioritization and in decision making, on how best the challenges they faced could be addressed; 2) the strategy would involve building capacity and supporting change process in state institutions, particularly in management of land, the development of small enterprise and business sectors, health, higher education and research.

3. Recognizing the potential of well established National Red Cross Societies of EAC countries for which the lake is a shared resource and the fact that they already had well established Red Cross Branches in the Lake Victoria Basin, the Swedish Red Cross in 2002, initiated discussions with Kenya, Tanzania and Uganda Red Cross Societies on possible ways of making a contribution towards the work of Swedish government/EAC Partnership and its goal. To this effect, a Memorandum of Understanding (MoU) between the three National Societies individually and through the Eastern Africa Network of Red Cross and Red Crescent Societies (RC-Net) and the Swedish Red Cross was signed in Musoma, Tanzania in 2003. The International Federation of Red Cross and Red Crescent (IFRC) and Red Crescent co-signed the MoU to demonstrate the commitment to support the program. Likewise the International Committee of the Red Cross (ICRC) declared its support for the initiative and would be contributing to the realization of the goal in its area of competence (conflict).

4. The signing of the MoU between the Red Cross partners marked the birth of the Lake Victoria Program (LVP). The program was to run for an initial period of three years (2004–2006), following which this evaluation was expected to be carried out as the point of departure for further period of cooperation, whose duration will be negotiated between Sida and Swedish Red Cross.

1.2 Objective of Lake Victoria Program

5. The main objective of the LVP is to improve the quality of life amongst communities in the Lake Victoria Basin, through the development of a comprehensive program of interventions covering; Health and HIV/AIDS, Disaster Preparedness, Institutional and Local Capacity Development through which poverty levels, vulnerability to both natural and man made disasters and susceptibility to health hazards in their environment can be addressed.

1.3 Rationale for the Interventions

6. The choice of interventions was made against a background of a number of factors, which act as constraints to poverty reduction and development in the Basin. The factors are intricately interrelated in such a manner that they create a vicious circle for the majority of people living in the Lake Basin.

7. Lake Victoria Basin is the largest water mass on the continent; it simultaneously creates a "wetland" prone to floods and a perfect host to vermin and vectors. Both vermin and floods have been known to destroy crops to a degree that has necessitated food aid interventions. In post floods period, high incidences of vector diseases are common in all three countries, a combination of these factors render communities in the Lake Basin to be vulnerable.

8. This vast natural resource is grossly underexploited. Poverty levels are high, household incomes at best, are either merger or irregular; and at worst households have no income at all, especially following the demise of the breadwinners in regular marine accidents. In many cases, preventable and treatable diseases such as malaria can be fatal for lack of resources to seek treatment.

9. Kenya provides vital access to the sea port of Mombasa through a highway, which runs all the way from the port through Kenya, across the border into Uganda through to Rwanda and Burundi. However the highway has created other problems in terms of people mobility and thus the rate of the spread of the HIV virus has increased. The prevalence of the scourge is reported to be higher in urban and semi urban settlements along the highway in all the four countries that are served by the highway.

10. The three East African countries are characterized by a dual model of development and a heavy urban bias, therefore rural areas are poorly developed relative to the cities and health and education facilities and other social amenities are often inadequate to cater for the ever growing rural populations. It is evident that there is relatively lower literacy, but higher maternal and infant morbidity and mortality rates in the Lake Basin communities than in all three countries.

11. A normal coping mechanism for a household with no income is generally to do away with "non-necessities" in the rural setting; and one such "non necessity" is often "school fees". The result is that children from poor families drop out of school at an early age. Yet a good education determines future employment prospects, so if a child is deprived of education, he/she is doomed to a lifetime unemployment and poverty. This leads to "inherited poverty" spanning across generation. Besides, there is a positive correlation between low literacy levels and high disease prevalence, morbidity and mortality rates due to lack of knowledge and understanding on the causes and effect of disease. The same correlation pattern exists between the low literacy levels and vulnerability amongst children not least because they are often expected to contribute to the family income in whatever way they can, including child labor and prostitution.

12. The scramble for survival has often meant over-exploitation of resources resulting in a reduction in the carrying capacity of the land and consequential food security. A combination of these factors and the impact they have on the welfare of communities was the rationale behind the choice of interventions under the LVP.

2. Program Considerations

13. All national Societies in the three East African countries have been implementing activities under the four core areas as elaborated in the Federation's Strategy 2010 viz. Disaster Management, Health, Principles and Values and Organizational Development. Given the challenges facing communities in the Lake Basin, it was envisaged that these could be met through these ongoing programs. This means that LVP is not "donor-driven", on the contrary, the Program presented an opportunity for the National Societies to scale-up ongoing interventions in the communities, whose development challenges they knew and understood. These challenges in summary include the following:

Core Area 1: Health

- HIV/AIDS
- Disease outbreak (Malaria, Cholera etc)
- Inadequate water and sanitation facilities

Core Area 2: Disaster Management

- Environment/ ecological hazards (floods, vermin, vectors)
- Marine accidents
- Inadequate knowledge on environmental hazards
- Inadequate knowledge and skills to cope with disasters
- Poorly defined boundaries (land, water resource) ownership squabbles and classes

Core Area 3: Capacity Building Issues (Community Level)

- Weak Human Resource base (Salaried staff)
- Weak human resource base (members/volunteers) due to poor management systems
- Inadequate management and coordination systems and procedures
- Inadequate management and coordination systems and procedures
- Inadequate Branch infrastructure, equipment and facilities
- Inadequate funding

3. The Evaluation

14. The overall purpose of the evaluation as provided and stated in the terms of reference (see TOR) , provides for an assessment of the impact and effectiveness of LVP, its challenges and the way forward for its improvement.

3.1 Terms of Reference (TOR) for the Evaluation

(i) To assess the relevance of Red Cross and Sida support in addressing poverty reduction and development challenges in the region

(ii) To assess the effectiveness (impact) of the regional approach adopted by the Red Cross in addressing poverty reduction and development challenges in the region.

(iii) To determine the extend to which the overall goal of the program was realized by analyzing and determining the degree of the impact of interventions as stated in the objectives, expected results and indicators for each core area of individual country programs.

(iv) To determine the degree to which the Red Cross regional program has contributed to the Sida Lake Victoria Initiative (LVI) strategy and objectives for poverty reduction and development in the Basin.

(v) To evaluate the degree to which the partnership/collaboration between Red Cross parties (Swedish, Kenya, Uganda Tanzania and IFRC) has contributed to the realization of the overall goal of improving the quality of life amongst communities in the Lake Victoria Basin.

(vi) To assess the degree of adherence of the Red Cross stakeholders' provisions of the agreement signed between the Swedish Red Cross and Sida conditions.

(vii) To identify potential areas of improvement by the Red Cross partners (better programming, more effective and efficient approaches to implementation of activities and organizational development).

3.2 Evaluation Methodology

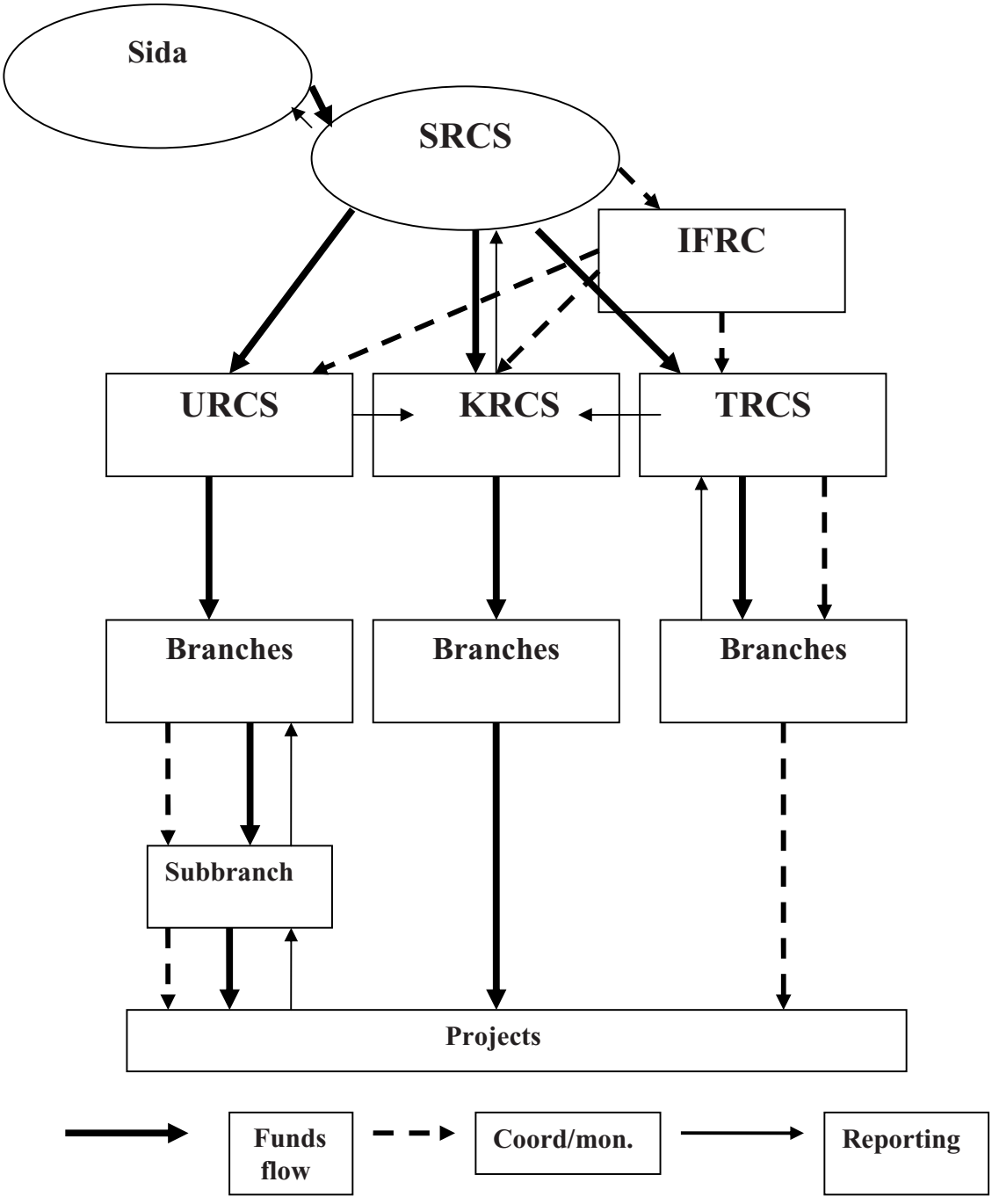
15. The methodology used for the evaluation is primarily a qualitative study, based on structured and non structured interviews. This involved individuals in the study areas, focus group discussion with community groups and other stakeholders (local authorities, NGO's, CBO's) at various levels, analysis of their views on the relevant Red Cross interventions, documentations and assessment of approaches used to prioritize and plan interventions, resource distribution modalities, implementation and monitoring. The views of specific Red Cross stakeholders (Red Cross National Societies, Swedish Red Cross, IFRC and ICRC) and Sida/LVI were also solicited. The evaluation was efficiently coordinated by Sida, IFRC and the three East African National Red Cross Societies through their focal point teams to (all) whom, we owe our special gratitude and appreciation.

4. Impact on Program Implementation and Results

4.1 LVP Coordination – Organisation and Management

16. LVP set up an organization and management structure for the running of the program. Figure 1 depicts the organizational structure of LVP.

Figure 1. Existing Organizational structure of LVP



17. Despite the above elaborate organizational structure, the project overall coordination is found to be weak. This arises from the organizational structure of the program. This structure poses a major coordination challenge, as there is no proper overall authority vested in any body. While the idea of a rotational chair amongst the East African Red Cross Societies is good, it leaves the functions of planning, coordinating, monitoring and effective supervision to no specific person. The role of coordination is generally delegated to the Program Officer (PO) in charge of Organization and Development (OD), who are also designated as LVP focal persons. The PO/OD is responsible for the whole Red Cross National Society program activities, hence has limited time to devote to LVP in particular. It was found that only in the case of Uganda, one staff was specifically assigned for LVP activities.

18. The focal persons will on at least a quarterly basis visit the program area, monitoring progress and advising the branches. Annually the sub-regional task group meets. Annually a person from SRCS visits all branches reviewing budgets and plans as well as branch development and exit strategies. The Swedish coordinator will visit some project areas several times each year. Cross-border meetings are arranged irregularly, involving some of the branches. Larger cross-border meetings involving most branches have also been carried out.

19. The experience from the first phase of LVP is that this management structure has some weaknesses and needs to be reviewed and restructured.

- Focal persons are tied up with other responsibilities and have not had enough time to monitor and guide LVP during its inception phase. The distance from HQ/capitals to the LV regions is too far.
- In the eyes of the branches, the active support from and communication with focal persons has been insufficient. Comments on reports and progress, information on funds and disbursements etc have too often been slow in coming or insufficient.
- Longer term development of the program, based on field experiences, has not been strong enough when it has depended on focal persons without the time and field contact necessary
- The Swedish control or influence over budgets and plans (through November review meetings) has been necessary but should not need to be so strong
- Branch level cooperation in the region has not been developed to a sufficient extent.

20. The organizations in charge are partly aware of these problems and a strengthening of the regional coordination has been initiated. The transfer of the Kenya program coordinator from Nairobi to Kisumu has been pertinent, resulting in much closer cooperation with the branches and increased contacts between the branches. Likewise, Uganda is regionalizing its structure, which should result in strengthened branch support. In Tanzania the LV regional coordinators are experienced development professionals with a capacity to develop work in the field. In order to further strengthen regional coordination, monitoring, guidance and strategic development of long term programs it is suggested that the organization is restructured (see suggestion below, in Chapter 6).

4.2 Budgets and Disbursements

21. LVP has been characterized by delays in disbursements throughout the years. Initially this was caused by changes in the Sida handling of the program. As the LVI office moved from Stockholm to Nairobi before decision was taken on the LVP, this decision was delayed. SRC at that time also had to revise the proposal and adapt it to the financial limits Sida had set up. The first year of the LVP thus received its funding in November 2004. Delays have then continued. The reasons for this are not completely clarified. The main reason seems to have been late reporting from the branches and then from the national societies to SRCS. As reporting has to come in from a number of branches in

three countries delays are unavoidable. A negative chain of events has thus resulted in the branches not being able to implement their plans in time, or at all, and having to constantly re-plan or scrap planned interventions.

22. All branches in all countries report late disbursements of funds as their major problem. It has caused serious difficulties for the branches. Some quotations from the 2006 report from the Rakai branch, Uganda, illustrate the situation:

"Challenges and constraints met

1. There was no transfer of funds for LVP activities to branches until late December 2006 and so the planned activities could not be implemented as scheduled."

"2. Community expectations could not be satisfied and this somehow affected the image of the branch and the society in general and efforts have to be made to regain it."

"Conclusion
The branch had planned to implement a wide range of activities under different objectives to achieve the specified LVP goal. However, funding from the external donors was not timely and the branch could not raise substantial amounts of local income. For that matter few activities were implemented amid difficulties and as a result, it has been hard to determine the impact created."

23. It is difficult, and not within the duties of this evaluation, to fully investigate the flow of funds for the LVP. What we like to point out is that a) delays and erratic disbursements have hurt the development of branches and programs; b) funds for program implementation have been lower than originally planned for, while capacity building costs and costs incurred at head quarters have been higher. An example (Table 1):

Table 1. Tanzania budgets and disbursements to regions:

			%
Original LVP budget 2003–2006		618 032	100
Amount received	to-date	554 970	76
Amount disbursed:	disbursed	budget	% disbursed
HQ	167 831	96 590	174
Mwanza	93 195	201 802	46
Mara	124 691	162 640	77
Kagera	126 074	157 000	80
Total	**511 791**	**618 032**	**83**

(The figures for the regions include costs at HQ for regional office capacity building and programs)

The TRCS accounting software does not produce financial reports by activities. Efforts are under way to improve the system. A crude activity report extracted for this evaluation shows the following:

Core area	**USD 2003–2006**	**Per cent**
Health	23 384	5.7
Disaster	93 259	23.0
Capacity Building	98 449	24,3
Program coordination	98 312	24,2
Networking	31 095	7,7
HQ Support and Admin.	61 257	15,1

As this TRCS report does not cover all funds it is difficult to conclude the exact distribution of funds. What seems to be the case is that the program areas have received less funds than planned for, while coordination and administration costs have been higher than expected.

24. With hind sight the way the initial late disbursement from Sida (due to the initial late start of the program and subsequent late reporting) was handled was unfortunate. When money was received towards the end of each year, the branches were advised to implement as much as possible in a short time (November & December). This resulted in less effective and very uneven implementation of programs. It also resulted in funds, once again, being unavailable some time into the next budget year, as that year's funds were also delayed. Each year the branches were advised to closely plan for the next year's program, using log frames and planning instruments and within very generous budget frames. These plans were then drastically cut down at the November review meetings, when new plans and budgets were quickly put together. The next year's budget was built on the assumption that disbursements would be in time, which they never were. Soon into the next year, again, funds were not available for program implementation.

    In addition to this, program funds were always small as capacity building was prioritized during the first phase. Often a branch will not have received more than US$ 25 000 during the whole program period. While there never were very large budgets put aside for program implementation, those that were planned were in addition cut down as program coordination costs, salaries and capacity building expenses grew. In 2006 LVP partners decided to allocate 70% of costs for salaries, Red Cross activity centres (construction) and other program-related costs to the budget-line "program coordination and monitoring" under the program area (A. Programs). This further weakened the budgets for actual program implementation.

4.3 Exit Strategies

25. Through SRCS the LVP has developed and put in place quite elaborate instruments to monitor and gauge the development of branches and their activities. Exit strategies, or end results, have been defined by the branches together with SRCS and national societies (see example in annex 2).

26. In addition the branch capacity development is gauged through an elaborate questionnaire annually revisited by the branches. Here the branches estimate where they stand and what the development looks like in areas like: Effectiveness, Relevance, Activities, Capacity Building, Leadership, Human Resources, Financial Resources, Material Resources, Organisation, Mission, Legal Base, Constituency.

    These instruments are valuable tools for the branches as well as for the national societies when monitoring development. There is a need to strengthen the branch ownership of these tools, in order to make them more active and not dependent on instructions from "above".

4.4 Strengthening of Branch Capacity

4.4.1 Increased physical presence

27 Capacity building was one of the three main program areas of LVP. According to the program document, approximately 27.5% of the Sida funds would be used for capacity building, i.e. the strengthening of the RC branches around Lake Victoria, through the set-up and equipping of offices, means of transport, staffing and training of staff and Board members. The RCs, including SRCS, have seen capacity building as the main ingredient in the first phase of the program, in order to set the stage for more effective presence and program implementation in coming phases. Substantially more than 27.5% of the funds have been used for capacity building. The exact figure is unclear as some expenses have been registered under the heading HQ support, as the costs for those investments have been incurred at HQ level. According to the program document the capacity building would initially concentrate on "soft ware" (training etc) while structures and means of transport would primarily be funded outside the LVI support. In reality, hard ware in the form of office equipment, construction of buildings and vehicles, have taken the larger part of capacity building funds.

28. At the onset of LVP, the branch capacities in many of the branches were weak. In Kenya, only the Kisumu branch had salaried staff, while other branches were manned by volunteer members and the Branch Management Boards. In Tanzania two out of three regional branches had staff and offices, while the third was dormant. At the outset of LVP the Ugandan branches were the strongest, with at least some salaried staff and office space. The RC active presence in Nyanza, was mainly seen through the participation of members in disaster situations and through sporadic training in first aid (FA) and disaster management (DM) and dissemination of Red Cross values in schools. A couple of branches in Uganda and Tanzania had some more significant activities also before LVP. The program has resulted in a clearly visible strengthening of the branches in all three countries. Each branch now has at least one salaried branch coordinator (Kenya) and additional staff (Tanzania and Uganda). In Uganda some sub-branches have been established and sub-branch coordinators employed. This is a huge improvement as it shows an established presence in the community and eases cooperation with stakeholders, as well as with members and volunteers and lays the basis for longer term planning and the coordination of activities.

29. Where office space was not at hand, this has been arranged, often by the local government letting RC use or rent some space. Offices are still small and simple and the branches plan for investments in better and RC owned office buildings. The local governments are generally willing to set aside plots for such offices. Some such offices/RC centres are being completed. There is a good effort to turn the branch capacity into a capacity to sustain the branch, through the renting out of office space and/or establishing hostels for students or canteens.

30. Capacity has also increased through the procurement of new equipment – at least one motorbike per branch, bicycles, computer, printer, desks, chairs, some other electronic equipment. This refurbishment has been kept at a restricted level and is generally rather modest than extravagant. Particularly communication is still a serious problem. In Kenya only one new vehicle has been purchased for Kisumu, while all other branches have to depend on motorcycles in districts, whereas the distance often covered is over two hours on dusty or muddy roads. In Tanzania two vehicles were bought and in Uganda there was no information on any vehicle purchased under LVP.

4.4.2 Human capacity building

31. The National Red Cross Societies (NRCS) have carried out some training, strengthening the capacity of the coordinators, youth coordinators and board members. In Kenya the new branch coordinators are generally young men with strong commitment and with a capacity to improve with further training and guidance. But the impression is that there is a need for further and continuous upgrad-

ing of skills and capacity of coordinators and branch management in all three countries, to be able to develop and carry out expanded programs in the communities, particularly when the programs go beyond established RC interventions into broader development initiatives in the areas of safe water, sanitation, disaster mitigation, food security and environment. These are areas where the branch capacity is limited. As the strategic support from the HQ level and regional level is limited, such capacity needs to be in place locally. There is also a need to train board members and core members/volunteers at the sub-branch level, particularly in Tanzania, as programs carried out at this level and capacity are often low.

32. Through SRCS support, training in participatory rural appraisal (PRA), needs and capacity assessments, planning and budgeting have been carried out, and valuable instruments for analyses and planning introduced. These have greatly strengthened branch capacity to improve their planning and reporting. But further training in strategic planning, monitoring and analysis of development challenges at the community level is needed.

4.4.3 Members and volunteers

33. The strengthening of branch capacity, increased mobilization and dissemination of the Red Cross values, improved mobility and funding of project interventions through LVP have resulted in significant increase of membership in all branches as RC has become more visible in the communities. There is also a great strength and added value in the Red Cross being a member-based organization, as opposed to many development NGOs, which lack members. Red Cross, particularly at the local level, is a democratic organization with a democratic practice. Our impression is that the elected branch steering committees have committed and competent members and that branch affairs are run in a democratic and accountable fashion. More or less regular committee meetings are held, minutes kept, decisions taken through democratic procedures. There is a transparent structure for financial accountability, and the auditing of financial reports has been introduced at branch level. This was not there before LVP.

34. While there is a core of committed and long term members the membership is rather mobile, as many are out-of-school youths, who easily quit when other chances come up or the benefits of being member are seen as insufficient. The retention rate in the branches is around 50–60%, which is a clear improvement during the LVP program period. This may be acceptable, if core members stay on for several years, but increases the vulnerability of the organization, particularly where investments have been made in more qualified training, it is important to retain members.

35. Leading members at community or branch level will often be opinion leaders, like teachers, pastors, nurses, civil servants, while the bulk of members and volunteers are common people in the communities, mostly youth. In Uganda, some branches have made strategic decisions on membership recruitment, analyzing the need for "quality" members (strong economically or professionally) and is now concentrating efforts to this. This is a good and necessary development and should be a case of best practice to emulate in the LVP region in the future. Many committed, but poor members/volunteers, who were met at the local level, appear to expect some incentives for their contributions of time and efforts. These incentives can be monetary, material or immaterial. There is a RC policy of giving modest monetary incentives for certain volunteer jobs connected to program activities or at branch office level. The incentives are not always forthcoming, as funds are lacking. Another common incentive is lunch or snacks during an activity. While other NGOs often pay incentives and/or give food for work, this is not done by the Red Cross, out of principle and lack of such capacity. As the branches cannot respond to the demand for such incentives, this tends to result in the loss of interest/commitment by volunteers/members.

36. Incentives can also be immaterial. A lively internal organizational life with activities, talks, entertainment may be enough to keep a strong membership cadre. To a limited extent such incentives are in place, but are in need of being developed further. Visible appreciation through diplomas and pins or t-shirts etc, plus limited monetary incentives when performing certain duties are needed to maintain a structure that is basically sound. The membership is the strongest asset of the Red Cross, beside its excellent corporate image. It is through the members/volunteers that RC can carry out cost effective and sustainable work at the community level. The membership base is the envy of other development organizations/NGOs. It is therefore of greatest importance that RC encourages and nurtures this asset. There is a need to always strengthen the spirit and pride of being with the Red Cross. In order to achieve this, there is a need for continuous initiation of projects and programs that involve the members/volunteers; trainings and invitation to RC activities; incentives in the form of small things, like pins, caps, T-shirts, certificates, public gratitude etc. Members will also need to be compensated for costs incurred and, to the extent this is possible, being given some monetary incentives.

37. The retention of members is crucial – a regional strategy and branch level plans for this are needed. An example of this was noted in Migori in Kenya. The Migori branch (Kenya) was dormant before LVP started 2003. In 2004 it reached 200 members, increasing to 500 in 2005 and 826 in 2006. The retention rate used to be around 25%, but has improved to around 60% according to the branch management. The Nyando branch (Kenya) had about 100 members before 2003 and has increased to 300 members and a renewal rate of about 60% (see highlights below). Similar positive developments are found in Uganda and Tanzania.

Highlights from Nyando

The Nyando branch was created in 1999 but rather passive until 2003, with no office, nor staff and about a 100 members. Some basic RC dissemination was done in core subjects – RC values, first aid and disaster preparedness. With LVP a borrowed office was opened and equipped and in early 2005 a branch coordinator was employed. Membership has expanded to 300 and retention rates improved. Member groups are active in six district locations. The branch capacity for planning has improved. Yearly log-frames with planned activities and indicators are produced. 60 – 65% of planned activities are carried out. Main reason for non-performance is said to be late disbursements of funds.

Within Disaster management Nyando has initiated the creation of local emergency response units. A few volunteers have been trained to lead these. Based on discussions with local authority and local leaders community training of volunteers in first aid and disaster skills has been carried out and a few local committees set up. These committees are supposed to analyze challenges and needs and plan for action, with technical advice from the branch or from government departments. Several persons have been trained through 4 trainings, both in disaster management and first aid. Training of trainers has been carried out. A few isolated activities were carried out in malaria prevention. In the areas of health, HIV/AIDS and malaria, RC and its members relate to government initiatives and assist in their programs.

Activities are generally too isolated to have strong impact or sustainability. The branch feels an urgent need to become more pro-active and to relate its activities more closely to expressed needs that have come up in community needs assessments. There is a need to work with mitigation of disasters and combating poverty through community action. The branch feels that this could be introduced through increased funding, training and more openness on the part of the Red Cross nationally to go into such areas.

4.5 Networking and Collaboration

38. The strengthening of the branches has resulted in a stronger RC presence in local, organized Civil Society. RC is now a respected organization, which is actively taking part in network and coordination arrangements with other CSOs in all the three countries and all branches. In some areas (Busia (U) on HIV/AIDS, Migori in disaster management are taking a leading role.

39. There are numerous examples of the branches coordinating initiatives with CBOs and CSOs at the local level. Duplication does not seem to be a major problem. The major challenges in this area are rather the patchy-ness of many initiatives and the lack, within civil society, of coordination and networking systems, particularly in Nyanza. A third problem, often raised by RC branches, is a certain competition with foreign, well-funded NGOs, like World Vision. These often attract the RC volunteers with their monetary incentives. Still, relations are cordial and cooperation common.

40. In an LVI perspective, it would seem that there is a need to further develop networking and collaboration within civil society. As is the case within the RC-LVP, program development and implementation would gain from not only learning from other experiences but also to coordinate similar programs into comprehensive initiatives. As each organization is anxious to stay alive and continue, its particular work effectiveness is compromised.

41. The Red Cross advantage of having many members in the communities is something which is valuable also for other organizations, in particular for NGOs with a weak base. This is also something which has been used in a constructive way in some instances, AMREF has contracted the Migori branch to carry out part of its health program and PLAN International has contracted the Musoma RC branch for mobilization work in its malaria campaign.

42. These are interesting examples of win-win cooperation between CSOs, where programs are implemented more effectively and both organizations gain strength and credit. (For example, volunteers put on T-shirts with the emblem of both the Red Cross and the cooperating organization when working in the field.). Such collaboration, including additional funding from other sources, has been accepted and even encouraged by the national RCSs. There is a need to carry this a bit further and actively support branch sourcing of funding for programs and participation in programs initiated by other organizations, when they are in accordance with RC priorities.

43. The Red Cross has traditionally worked in close cooperation with local governments. RC cooperation with government is strong and highly appreciated at the branch level. This collaboration has increased under LVP and local authorities report a clearly strengthened role of RC in supporting development activities. The capacity building of the branches through LVP has strengthened RC's role in disaster planning, management and action together with relevant government authorities. Particularly in Kenya the Red Cross branches are playing a leading role in government disaster management committees.

44. The Red Cross is not the most suitable organization to take a leading role in the development of CSO networking and coordination systems. But one important role, it may play is as a "go-between" between civil society and government, as its relation with government is stronger than that of most CSOs.

4.6 Development and Impact of Programs

45. Based on vulnerability and needs assessments made in preparation of the LVP, the project document identified initiatives within the areas of Disaster management and Health as priorities. LVP has mainly meant the scaling within these existing program/activity areas. There is noticeable increase in number of activities and numbers of people trained in the core areas of health and HIV/AIDS and Disaster preparedness and management.

46. It is important to keep in mind, when assessing the achievements of the programs, that the LVP financially is a small program. The funds for each branch have been very limited, particularly when looking at the funds for program activities.

4.6.1 Disaster management:

47. Disaster management is a mandatory core program of RC. At the national level RC needs to keep up its capacity to act under emergencies in close cooperation with government and other actors. Many areas in the Lake Victoria region, particularly in Nyanza are prone to floods, as well as drought. A particular disaster risk is accidents on the lake. The Red Cross role in these areas is appreciated, by local government, CSOs and communities, as an important actor when such disasters strike. In all districts visited local authority representatives expressed that RC was a very important, leading partner in relation to disasters and accidents. They were said to be the first to take responsibility and volunteer when need occurred. RC is the leading agent in district disaster management committees in Kenya for districts like Migori and Busia, although in Uganda this did not appear to be the case.

48. Through LVP the branches have been able to somewhat strengthen their role in disaster management. More members/volunteers are trained at community level. A warehouse has been constructed in Kisumu for equipment and items for victims. There are several examples of RC volunteers taking important part in flood disasters in Nyando and Migori. Under this strategic area RC carries out certain defined activities for Community based disaster management: training in Community Based First Aid (CBFA) and of Red Cross Action Teams (RCAT), first aid equipment, life jackets, tree planting and environmental actions as well as the promotion of good and hygienic practices, blood donation campaigns etc. At a sub-regional level RC works to develop strategies and plans for action, through RC teams in cooperation with other stakeholders, communication systems, emergency stocks, etc.

49. This evaluation has not analyzed the RC systems and capacities at the sub-regional level, but the impression is that the Red Cross at the local level around the Lake is playing an increasingly stronger role in disaster preparedness and response, in cooperation with government. Still, this capacity is very weak and normally the RC branches can only act after an accident has occurred in order to support the victims.

    At the community level, it is not apparent that the interventions for disaster preparedness and mitigation are part of a strategic planning. Activities are too spread out and sporadic to have a strong and long term impact. Through LVP training in community based first aid (CBFA) and of Red Cross Action Teams (RCATs) RC visibility has clearly increased. Higher numbers are reported, but not in a context of plans for strategic and sustained presence in chosen localities. Capacity and leadership at the community level seems still to be too weak to take responsibility for activities. The limited resources make it difficult to carry through plans for local capacity to manage emergency situations. Not even basic first aid kits are normally available at the community level. Life jackets have been introduced in the lakeshore communities, but not to the extent that it would meet the demands, when people have been sensitized to buy or rent them.

50. While RC exhibits a leading role in disaster management in Nyanza and a certain areas, their strength when it comes to water safety on the Lake, the impression is that work within this area under LVP is unfocussed. The Red Cross does not seem to have a good and limited definition of disaster. As understood at the branch level a disaster is anything from a road accident to a tsunami. This does not make for a clear definition of what mandate RC at the branch level should concentrate its efforts on. Disaster is a nature- or man-made occurrence that affects a large number of people in a life-threatening way. Minor accidents, limited floods etc are not disasters but emergencies. RC needs to decide on where and how disaster management training, preparation and prevention initiatives should be carried out. They should be limited to areas where disasters are known to be occurring, while the Red Cross at national level needs to have its general plan and preparedness to take part in disaster management and relief efforts. At the local level branches need to concentrate on disaster preparedness and mitigation, but prioritize this only in areas that are prone to real disasters.

51. Focus seems to be needed in two areas: water safety and disaster mitigation through environmental action. Quite a number of people, fishermen and boat passengers, drown each year in the Lake. Boats used for fishing and for ferrying people are often unsafe. Reasons behind this problem are:

    1) people cannot (by their own submission) afford life jackets

    2) many people cannot swim

    3) the laws on use of life jackets and boat safety are not upheld

    4) people's attitudes towards protecting their own lives are defeatist.

    So far the response by RC has been to make life jackets more affordable, but only to a limited extent. Few jackets have been made available. If this is the chosen way to go, then life jackets must be made readily available for sale or rent and a continuous campaign for their use carried out. Viable subsidized rates for the sale and profit levels for the rent of life jackets are being established and will need to be analyzed in order to set up long term plans.

52. Another way to go may be to work strategically to enforce the law, which seems to be in place at least in Uganda and Tanzania. Advocacy and law enforcement in cooperation with local authorities and beach management committees may in the longer run be a more sustainable solution.

53. A third intervention applied is the continuous, and arduous, raising of awareness among lakeshore communities, where RC volunteers are doing a commendable job.

    There are demands from several branches that RC should equip them with boats for rescue operations. This is a costly option and may in fact not result in the saving of many lives. (Unfortunately a cost/benefit analysis needs to be made, comparing long term gains from different kinds of interventions in different areas.) Musoma is now receiving such a boat. This and other experiences concerning water safety should be evaluated during the next program phase.

54 Such evaluations, based on the assessments of local needs, may very well also result in a downgrading of the disaster management objective, particularly under the LVP. We find that the priority given to this area is not fully in line with the LVI/LVP overall objectives or with vulnerability assessments made by RC in the region.

4.6.2 Health, HIV/AIDS and first aid

55. The second strategic RC area is health, including water and sanitation and environmental protection. The activities at the branch level on health and in particular HIV/AIDS have visibly increased through the LVP. Members/volunteers at community level are often involved in a number of different activities. Most importantly they continuously play the role of peer educators, advisors and awareness raisers. The short term effects of such interventions are hard to quantify, but the impression is that RC members are influencing community behaviours and understanding in such low key manners. Training of members/volunteers is carried out on First Aid, hygiene and sanitation issues; HIV/AIDS peer educators are trained and community outreach campaigns are conducted. In some branches, support projects for orphans and vulnerable children (OVC) are set up, as well a Home Based Care (HBC) groups with volunteers, community members and people living with the virus. RC branches are also participating in government immunization campaigns.

56. Several interventions are surely making an impact for individuals involved. In particular community based HBC groups are needed. If these can be multiplied and function as the basis for continuous awareness work, OVC-support, VCT and ARV-treatment work and condom distribution, sustained interventions can be carried out at the community level. As of now no strategic plan, at the branch, country or regional levels, for HIV/AIDS work is apparent and interventions are patchy and may

not always be the most relevant. There is a need to develop intervention strategies based on RC best practices.

57. In praise-worthy efforts, direct material support is sometimes given to selected groups of HIV+ people and orphans. This is highly appreciated, but very difficult to sustain unless one has a steady flow of donor funds coming in, which isn't the case. For such support or for community based groups to be sustainable there is a need for material/financial upstart support and functional income generating activities (IGA).

58. In most cases, RC branches coordinate their HIV/AIDS initiatives with other organizations and government. Ideally, trained community members/volunteers will be cooperating with and supporting the local health system and advocate for a strengthening of this system, through increased number of clinics, community pharmacies, health posts and community health workers (CHW). There are several cases where such good cooperation exists and where RC volunteers play a strengthening role, for example in Nyanyande on the outskirts of Kisumu, where volunteers work closely with the local dispensary and CHWs.

59. The three main reasons behind the lack of strong impact at community level are; 1) lack of strategic plans for action; 2) still weak capacity of RC at the community level and 3) lack of funds. The second reason is a limitation, but it is built on a strength. RC at the community level depends on its members/volunteers, not on money. While a well funded NGO can have a strong presence over a limited time in some communities and carry through a full program, RC is present in more communities but has very small funds and limited technical capacity. An increase of funds and a strategically planned training of selected individuals and creation of RC-groups in specific communities may overcome the obstacle.

60. First aid is seen as an important program area for RC. Different level trainings are carried out for members/volunteers, professionals, schools, institutions. First aid kits are sold. Branches normally participate in larger (sports, festivities) events with personnel and kits to give acute help. The RC branches also wish to set up First Aid Posts, but funds have not permitted this so far, except in Uganda where two such posts have been erected with LVP funds. In Kagera (Tanzania) the evaluators also saw a very simple first aid post at the home of a farmer-member. The value and cost effectiveness of the Ugandan FA posts need to be evaluated and monitored during the next LVP phase. In the evaluators' opinion the cost is high and there is a need to closely connect the posts with the government health system in order to get the most effective use out of them.

61. Most branches are involved in anti-malaria campaigns. The most common intervention is the sale of subsidized treated nets to selected needy members of the communities. The number of nets has been too small, but RC is not alone in this endeavor. When RC involves itself with fighting malaria, it needs to be part of a larger program for eradication. If not, the small efforts will be made in vain. With its rather strong presence at the community level through its members/volunteers RC should be able to attract funding from donors, who have chosen malaria eradication as their strategic area, and get funding for larger interventions. This is what the Musoma region is doing in cooperation with PLAN International, mobilizing communities for the use of a new treatment drug. A wide and sustained availability of low cost mosquito nets may be another way to go, with special support programs for identified vulnerable groups (orphans, PLWHA). During the next program phase an internal evaluation of the sustainability and results of the net campaign should be carried out.

4.6.3 Integrated work at community level

The dedicated work of the Omwonyole women's group in Nyando district (Kenya) exemplifies the potential and challenges of development at the community level. It also clearly shows the importance of committed individuals. The group was formed already by 1994 for Home Based care work. It has developed cooperation with various foreign donors for smaller projects, working with orphans and people living with HIV/AIDS. Horticulture is promoted in all homes, nutritious flour is distributed to needy and the group supports "clients" on drug adherence and VCT counseling.

It is actively networking with several other CBOs, with the Ministry of Health, ADRA and the Red Cross. Basketry production has given some small but insufficient income. RC carried out water, hygiene and sanitation awareness training. As a result latrines have been built and hygiene improved. The group initiates community clean-ups and presents talks in the schools.

Most of the members of the group are now also members of the Red Cross.

The local development challenges are many and difficult. Water is normally fetched in the river, as there is only one borehole at the school. RC- training has led to more people boiling the water and/or treating it with purifying tablets, bought at a subsidized rate from RC. The community is in need of several boreholes. Latrines are insufficient and easily collapse during the rainy season. Good latrines need to be built with bricks and cement, which is too costly for most people.

People try to increase income through agricultural production. But they lack investment money and it is also difficult to reach a market for the products. Some irrigation system is needed to increase production. The Red Cross visits once in a while but the people here say they would appreciate more contacts and they would like to be strengthened to maybe form a sub-branch.

62. Safe water and sanitation are key areas when working with health issues among poor communities. With the limited funds available to the RC branches they have so far mainly been reduced to awareness raising and mobilization work. Many people have been influenced to increase their efforts to get safe water, through selection of water points, boiling or treating the water chemically. In many communities the awareness about good sanitation has been strengthened and there is thus an increased demand for sanitation facilities. Over 80% of households in Kagera did not have latrines. The problem is not easy to solve as it was found that in many areas pit latrines could not be easily constructed due to bed rock soils or weak clay soils and high water tables. Cost for building latrines will thus often be high.

63. Only in a few cases have the branches actually been able to fund installations. In Kagera, where the branch decided to prioritize water, some natural springs have been protected and a number of homesteads have built rain water collection systems. In Musoma the branch is supporting the building of some school latrines. Communities all around the lake express a great need for safe water and sanitation facilities and some expect RC to fund them.

64. The LVP and RC national societies did try to get funding and set up a larger program for water/sanitation. Assessments were made by the branches, involving the communities and a proposal was sent for EU funding, but unfortunately it did not receive funding. Still, SRCS and the East African RC societies plan to scale up interventions in this area during the next phase of LVP.

4.6.3 Environmental protection

65. Environmental projects are not within Red Cross' traditional priority area, but tree planting was defined as an area to introduce under LVP. One objective was to set up tree nurseries as income generating activities for branches and member groups. Another was to increase environmental awareness in schools and communities and fight poverty through protection of the environment.

66. Most branches thus have nurseries. A few are successful and give the branch/members an income. Others are making some impact in the communities, where people have started to plant trees on their properties (particularly in Kagera). And some nurseries and plantations are less successful, not giving any income and not having any environmental impact. The best practices should give the lesser successful ones some good experiences.

67. If this area is to be continued the work should learn from and align with the work of more professional organizations in the field of environment and agro-forestry. In particular, the cooperation with Vi Agro-forestry (which is partly in place in Musoma and Mwanza) should be encouraged further. The organizations can complement each other at the community level. The Red Cross can never become an important player in the area of environmental protection, but should see its role as complementary partner. In particularly disaster (drought/floods) prone areas like Migori or Nyando more emphasis can be put on this area if done in cooperation with environmental organisations.

4.7 Core Program Areas Versus Identified Needs

4.7.1 Identified needs

68. The Red Cross core areas of "health" and "disaster" may be programmatically interpreted in different ways. RC's vulnerability assessments in preparation of the LVP program identified poverty as the main cause of a number of problems and the overall goal of the program was set as to improve the quality of life of the people, addressing poverty and strengthening self-reliance. This was to be done within certain RC-related program areas. How these traditional program areas relate to the needs and how they should be widened or added on to, needs to be analyzed further at the regional, and even national level.

69. RC at the branch and community level needs to look more sharply at what interventions are the strategically most important. This may well mean that First Aid and Disaster Management interventions are reduced while other interventions are developed. Our impression is that this is the way forward for the Red Cross LVP program.

70. A case in point may be the community in Nyando district. The area is very prone to yearly flooding, as it lies on a plain with clay soils with low absorption capacity, below a range of mountains where forest cover water retention has diminished. Here a group of members/volunteers, in collaboration with a village NGO, has carried out training on flooding preparedness. Villagers have been mobilized to keep trenches and ditches clean, re-dig and open up more ditches. A system of ditches, mounds and hedges around homesteads has been introduced. But more interesting is that the group also has come in touch with the Swedish CSO Vi Agro-forestry, which works with the introduction of tree planting around homesteads and as an integrated part of crop cultivation. Thus disaster mitigation takes a new step, is scaled up and becomes more long term. At the same time poverty is combated through improvements in agriculture.

    Similarly, in a community outside Kisumu a group of Red Cross members/volunteers were sensitized to take action against yearly floods that constitute threats to health, production and even lives. With advice from a government department the villagers dug an elaborate system of ditches, ponds and live hedges to control the water.

71. When talking with communities around the lake, it very clearly comes out that poverty itself is the great challenge that people feel an urgent need to do more about. Very clear demands for water, improved agriculture and improved incomes are expressed when communities are asked how RC can increase its support. RC members/volunteers also express a desire to carry out projects in this regard and the branches feel the pressure to do more, generally expressed as a desire to increase the number of income generation activities.

72. One intention with LVP was to allow RC branches to move into new areas, connected to disaster management and health, and of a more mitigation and poverty reduction character. The main effort made so far was an assessment on water and sanitation needs with the intention to substantially scale up this work, but funding is not yet at hand. Some commendable work has also been done within the health sector – mobilization and awareness raising on HIV/AIDS, hygiene, safe water, malaria, etc. This needs to be continued and expanded.

4.7.2 Priorities, Strategies and Concentration

73. Branches are generally not clear about if and to what extent they need to concentrate their work – geographically, in relation to groups of citizens and in subject areas of interventions. In most cases a choice of geographic areas for member recruitment and work has been made, based on the capacity of the branch to reach out. This probably has to be tightened even further in order not to spread efforts too thinly with less lasting effects and a greater risk of wasting efforts. There is then a need to set up a strategy so that those communities that are given a lower priority still are kept "alive" and are planned to be phased-in within a reasonable period of time.

74. Often a branch tries to do everything on the RC "menu", from painting zebra crossings, to establishing water points in communities and selling subsidized mosquito nets. This may have some good PR effects, but it is beyond the branch capacity to do so many things and expect sustainable results. An example may be youth work in schools. For lasting effects, there is a need to revisit schools and build up a continuous work to strengthen clubs and to make RC dissemination a permanent feature in the schools by getting teachers involved. Other examples are the limited distribution of mosquito nets or life jackets. Both these programs need to be expanded in order to become effective, and to be monitored in order to be sustainable.

75. Branches need to make strategic choices on where they need to work, what they need to concentrate on and how they need to work in the most cost-effective way. Asked about what the priorities should be the branches will voice their views and some areas come up. In Uganda the expressed priorities were Water and sanitation, HIV/AIDS, Disaster Management.

76. But it was nowhere clear (except in Tanzania where Mwanza was concentrating on schools and Kagera on water) that these choices had really been made and influenced the working plans of the branches. When talking with the communities, it also came out that the expectations on RC where very high and that they were expecting RC to solve every problem. This may lead to disappointments and undue challenges.

77. The Uganda Red Cross is fully aware of this problem and has decided, in its strategy for the coming years, to make these priorities and let the branches concentrate on their programs in fewer areas. This is commendable and should be the way the LVP should go in the coming years. In one respect RC should continue with a wide and "unfocussed" way of work – community sensitization and mobilization. Members/volunteers are doing a very important work, with clear impact, at the community level, through their active presence and dissemination of knowledge and values – on hygiene, basic health, first aid, safe water, environment, HIV/AIDS etc.

78 There is also a need to further develop programmatic collaboration with other organizations as well as with government. This is already done in a commendable but small scale in most places. In some, the branches have been able to get funding for participation in larger programs run by other NGOs, like in Musoma, Tanzania, where RC is funded by PLAN International for sensitization and mobilization on malaria prevention.

4.7.3 Advocacy

79. The Red Cross is a collaborating partner with government, in disaster and emergency aid interventions, as well as in health programs, where the Red Cross supports the implementation of government programs. This close collaboration may, at the branch level, make advocacy work towards government institutions both more difficult and easier. Trust and personal relations gives Red Cross staff and members chances to influence local government decisions and work. When stronger demands and pressure on government is needed, this relationship may be a hindrance. In several areas the RC branches should look at how they more strongly can influence government, for it to implement policies and programs and to work efficiently for the betterment of social conditions. Support for this should come from the regional and national levels.

80. Both water and road safety are areas where government has the greatest responsibility and where laws are in place to increase security, for example the law on the use of life jackets in Uganda. Concerning road traffic a number of laws are in place but not respected. To really decrease the number of accidents RC will need to come up with advocacy work directed towards government authorities and commercial traffic owners, in particular fishing companies, water transport businesses, matatu and boda-boda companies and drivers, if this area of work should be prioritized in the coming years.

4.7.4 IGAs: at branch level, for members/volunteers/with communities

81. With increased local presence and an obligation on the branches to fund at least their administrative costs through own incomes, there is an increased preoccupation with income generation activities (IGA) in the branches. These projects need to be looked at at three levels:

    – IGAs to support the branch

    – IGAs as incentives for members/volunteers

    – IGAs at community level as response to local needs

82. LVP has strengthened the possibility for the branches to increase activities on all these levels, in particular the first. Each branch has made investments in, for example, tents and chairs for renting or a tree nursery for sale of seedlings. Those that plan for the construction or expansion of own offices, like Migori, Kisumu, Kalangala, Rakai, Musoma and several others, also plan to get rental incomes from office space, or even hostels. In the longer term the branches plan to, and may be able to, also use resources like vehicles, computers/internet connections, digital cameras etc for income generating purposes. The inclusion in LVP of funds for such investments is unusual and very welcome. This is also an important part in the LVP exit strategy, which strives towards a substantially increased capacity for self sustained operations.

83. IGAs for members/volunteers and at community level are basically the same, but with different purposes. While the former are intended to strengthen and sustain RC at the community level, the latter would be part of interventions to address poverty and improve the livelihoods of the poor. As members/volunteers also are community members these two groups are sometimes mixed and sometimes interventions are directed towards vulnerable groups, particularly people living with HIV/AIDS and orphans.

84. IGAs are a common part of development program packages. Successes are found, but common are also IGAs with limited results and sustainability. Family- or group based horticulture projects, poultry raising, handicraft products in women's groups are typical such IGAs. Lack of seed funding, time (for women) for work, technical knowledge and markets for products are typical reasons behind limited results. The RC initiatives are and will be struggling with such challenges.

85. In the visited branches the main reasons for the limited number of production related initiatives are that this area so far has not received enough priority and that the funding for such initiatives has been lacking. The area needs to expand, but in order to be successful there is a great need to collect the experiences made also by others and come up with viable methods and projects. Product marketing is one killing factor that has made many IGAs fail.

86. The Mukono and Busia (Uganda) branches have come furthest in this area. Here community groups have been formed, trained in project management and allowed to apply for 'revolving funds' for IGA investments. The first groups have businesses running and have started to pay back to the revolving fund. This experiment should be followed closely and, if successful, be used as a best practice for others to emulate.

4.7.5 Gender issues in branches and programs

87. Sida requires that gender issues be mainstreamed into all development cooperation. This is also the policy of the SRC and the LVP program document states that there is a need "to include gender considerations in all programming".

    At the organizational level, it was found that 10 out of 13 employed branch/sub-branch coordinators visited were men. One out of 18 board chair persons was a woman. Volunteers at branch offices are mostly young men, while there is a mix of men and women among members/volunteers at the community level. In the branch societies some women will normally be included in the management committees (20–30%) but there is a big power difference between being chair or vice chair person.

88. There is an understanding that women should be promoted in the branch. Some steps have been taken to increase female representation. It will naturally take a long time before radical changes take place, as this situation is a reflection of women's position in the East African societies. Women usually stand back, because of customs and culture.

    As a whole the understanding of and implementation of gender awareness policies and programs within the organization and in the community still needs to be strengthened. Initially staff, committee members and strategic volunteers need further training in this area. The regional management should promote the employment of women.

4.7.6 Best practices

89. As clearly demonstrated in this report, LVP has had very limited resources for program implementation. It has thus been difficult to develop any strong and already successful interventions that can be emulated as best practices in the regional program.

    During our travel throughout the region we were able to view a few of the activities in the three countries. Some of these stand out as good practices- that can work as examples for others to learn from.

Case 1. Community IGAs through revolving funds

In Uganda the branches in Mukono and Busia have encouraged the formation of community groups, of women and youth in particular. These groups have been given training in project management and then invited to apply for loan-funds for income generating projects. One group of young men had started carpentry at a landing site and a group of women had a project raising pigs in the same community. Both of them related their stories that the LVP support, through training and start up capital, had made their ventures possible. According to the RC branch the groups were developing and they had both been able to start their repayments. It is too early to say if the projects will be profitable in the longer term. But the project design, with project management training and a "revolving fund", lays the basis for more sustainable IGAs and a sustainable program that can reach a number of community groups.

Case 2. Branch IGAs

The LVP exit strategies for the branches set out to substantially increase the branches' capacity to sustain their own costs. In order to do that a number of branch IGAs have started. Among the larger, and maybe most promising, are those involving the construction of offices cum hostels or other activities. In Mukono the branch intends to finalize a construction, and possibly expand it, and start a student hostel. In Rakai a new RC centre is being finalized which will contain a canteen and space for conferences or social events. It is difficult for a donor to accept such organizational investments, but the Swedish Red Cross has come to the conclusion that it is viable and advisable for improved sustainability of the National Red Cross Societies in Eastern Africa.

Case 3. Community mobilisation

All around the lake the branches are involved in community mobilization around projects or concerning health and other issues. In the landing sites (villages on the lake shore) the branches in Rakai and Kalangala have done a commendable job under difficult circumstances. Members and member groups are, through living in the community and on a volunteer basis, engaging in supporting and convincing people to improve the community hygiene, be aware and take action against water accidents, supporting orphans and HIV+ groups, providing HBC, advocating improved health services etc improveing living conditions and strengthening the community willingness to act in organized manners to improve their livelihoods.

Case 4. Environmental protection

A number of youth clubs in Tanzania have introduced tree planting in schools and this has extended to communities planting trees in open areas. Youth clubs in various schools in Musoma, Mwanza and Kagera regions were involved in tree planting. RC has been providing seedlings at subsidized rates to them, training the youth and a Swedish NGO VI Agro-forestry group is providing advice on the agronomic and husbandry practices. This system of conservation should be encouraged around the lake region where bare land areas are open to soil erosion and long-term degradation.

5. Lessons Learnt and Challenges

90 The Lake Victoria region is one of the most vulnerable and fragile regions in Africa. Several of the world's poorest communities are found in the lake region. The challenges of the Lake Victoria region may be described as insurmountable. Still, the concerted efforts of the Lake Victoria Initiative, with its many partners, are starting to have impact. Some lessons learned through the Red Cross Initiative are:

- The regional program has evoked great interest in the National Societies and revitalized regional cooperation
- The coordinated development of programs is difficult to achieve through the NSs. The missing link between branches and HQ needs to be filled by a stronger regional coordination, in each national lake region and between these regions.
- The Red Cross traditional core areas need to be further adapted to the identified community priorities under LVP.
- Civil Society networking and coordination still needs a lot of improvement, particularly in Kenya.
- The Red Cross at branch level is still too weak to carry out its advocacy role in any forceful manner. This needs to be developed further at regional level to support the local levels.
- There is great potential in the Red Cross members and volunteers. But this is not being adequately exploited. There is a great willingness to participate and to work at community level, but a steady flow of modest funds are needed to keep up this commitment.
- It is difficult but necessary for the RC branches to prioritize between program areas and concentrate efforts more.
- The RC strategy to support capacity building with the intention of strengthening branch sustainability has got a good start and should get continued support.
- There are some successful experiences in the area of Income generating initiatives but this work needs to be significantly strengthened and be based on collected experiences from other development work.

5.1 Effective LVP Coordination

91 Project overall coordination is found to be weak at all levels. The elaborate organizational structure poses a major coordination challenge as there is no proper overall authority vested in any body (Figure 1). While the idea of rotational chair amongst the Red Cross Societies for LVP is good, it leaves the functions of planning, coordinating, monitoring and effective supervision to no specific person. The responsibility of LVP coordination is generally delegated to the Program Officer (PO) in charge of Organization and Development (OD), who are also designated as focal persons. Yet the PO/OD is responsible for the whole Red Cross National Society program activities, hence he/she has limited time to devote to LVP. It was found that only in the case of Uganda, one staff was specifically assigned for LVP activities.

92 Program development and strategic planning is basically weak, partly as an effect of weak coordination. All NS have developed their own national strategic plans and LVP needs to be effectively mainstreamed into those strategic plans. The LVP program itself also needs to be strategically

developed, based on the regional challenges and the lessons learned through program implementation.

93 The work plans and budgets for LVP activities are developed every year based on community needs assessments, but these plans and budgets are arbitrarily changed towards the end of the year (November) during the annual review to fit scaled down budgets. Programs are cancelled without prior information This has limited and distorted the implementation of most LVP activities at the branches resulting into loss of trust in what LVP can do, which could affect the image of the Red Cross.

94. Timely and transparent disbursement is a major challenge for LVP implementation. Lack of transparent information about disbursements, delays in fund transfers and clear reporting system has grossly affected LVP implementation at all levels. All branches have reported serious concern on the delays in disbursements of funds, where funds always come late in the year after the annual review and yet well prepared annual work plans and budgets are approved early in the year for implementation, but no information is made available about the delays in disbursements. In some cases when budgets are cut, HQ does not bother to advise the branches. This lack of communication is posing a serious challenge to the implementation of LVP activities.

5.2 Capacity Building

95. It is apparent that emphasis during the first phase was placed on capacity building, e.g RC centres, office and income generating construction and equipment. These are high capital cost items that demand more resources at the expense of program implementation. While this probably has been a necessary pre-condition for sustainability and stage setting, it poses a serious challenge in carrying out program activities with so limited resources, given the level of LVP funding so far. It is unfortunate that the anticipated program funds were not disbursed in full. It will, in the next phase be necessary to increase the funding of soft-ware development/program activities.

96. Most branches are not able to retain existing membership to a satisfactory degree. Only up 60% of memberships were reported to renew each year. This means that branches' capacity to sustain themselves is limited because most branches depend on membership fees as incomes and members volunteering to carry-out most of the activities. Besides, the types of members vary significantly. In Uganda ordinary members are common, but some branches are now encouraging quality membership, while Kenya is encouraging life membership. The choice and types of membership should depend on the country's norm and the fees charged per membership class should be realistic.

97. It was noted that human capacity at the branches and sub-branches are limited. Most branches are staffed by volunteers, in some cases, even in the case of sub-branch managers, who are very poorly facilitated, if at all. Many volunteers have reported that many a times they have to use their own money to transport themselves to the main branch office or project sites without any compensation. This is contrary to the principles of volunteerism, which has created a great challenge in the management and coordination of program activities at the branch and sub-branch level. Branch or sub-branch volunteer managers should all be well trained and adequately facilitated.

98. While efforts to support youth programs in schools are commendable, youth-out- of-school are not being supported. Those engaged in income-generating activities are not advised on viable enterprises neither provided with any form of loans. The challenge here is how to build their capacity and support them without loosing them as they are very mobile. Volunteer "youth-out-of-school", who have formed drama groups are contributing significantly to RC publicity and awareness campaign on HIV/AIDS, malaria and immunization.

5.3 Programs

99. Limited funding and delayed disbursement/transfers coupled with budget cuts have posed serious challenge in program implementation. Shifts in budget lines pose challenges for program development and implementation.

100. Strategic plans should act as a guide to all future program and activity planning. Given the long-term nature of LVP, long-term strategic plans should be developed by all National Societies, which could help to mainstream program activities. Perhaps functionally the lack of strategic plans or poor internalization of it is the main cause of the weak coordination and persistent changes in approved work plans and budget cuts.

101. Most branches could not specifically define their priority areas. LVP is poverty-driven, so its focus should be on health, safe water and sanitation, food security and sustainable livelihoods, rather than "disaster preparedness". Therefore the need to identify the appropriate priority areas is now necessary. The selection of the priority areas should mainly be community-driven to create ownership and long-term commitment to the project sustainability. Many a time, communities have treated projects as foreign or government projects, and expect government or donors to maintain or sustain the projects. This makes long-term sustainability very difficult. In this regard, special considerations should always be given to community ownership in the design of exit strategies.

102. Discussions with Government officials, CSOs and other partners revealed that RC is well regarded and respected by all of them. Government looks upon RC as a partner and it plays a complementary role to government. However in some cases, RC has been left to carry-out government mandate even when RC has no capacity. This is a challenge to RC, which should not be encouraged but RC should continue to perform the complementary role to government. Similarly CSOs are impressed by RC contribution in health and disaster preparedness and therefore prefer to partner with the branches. The only challenge here is the tendency by some NGOs to depend wholly on the RC for resources and manpower mobilization, because of its volunteer membership and nature of work.

103. The RC seems to fear to challenge government's role. For example, in the area of safe water, it is the mandate of government to do so but RC is often found to be salient in advocating for safe water provision by government. Many LVP areas lack safe water and governments are not seriously trying to ensure that plans to do so are prepared and budgeted for, but RC is being called upon to initiate such activities. The challenge here is for RC to advocate for safe water by telling governments to carry-out its mandate.

6. Recommendations

6.1 Health

104. In general terms, the susceptibility to health hazards in the Lake Basin must urgently be addressed. The high incidences of HIV/AIDS, malaria, cholera etc. pose serious problems for the lake region. Strategic preventative approach needs to be developed to combat HIV/AIDS. While provision of free ARVs treatment and direct support for those living with HIV/AIDS is commendable, long-term preventative measures are more appropriate and recommended and should be strongly advocated by LVP. The use of volunteer drama groups should be encouraged, as the use of drama groups is preventative and more cost effective in the long-run. Sustainable support to those living with HIV/AIDS through HBC groups involved in IGAs is another important area.

105. Other preventative measures should also be adopted for the prevention of other diseases such as cholera, malaria as well as of floods etc, which commonly occur in the Lake Basin. The policy of supplying subsidized mosquito nets to communities has gained popularity among many communities, therefore LVP should advocate for subsidized nets as well as complement governments efforts in doing so. In the case of cholera, provision of safe water and regulatory sanitation measures should be advocated. Policies to this effect must be enacted and/or enforced, where they exist. It is noteworthy to say that LVP should not be seen as a substitute to government but a complementary agent in this regard.

106. It was noted that the construction of First Aid post, have taken the size and dimension of health centres in Uganda. While this may be appropriate for the areas they will serve, first aid posts must remain first aid posts with local ownership, as LVP has no capacity to provide service of health centre equivalent, unless government is prepared to provide equivalent health services at those points with fully fledged staff members, housing and drugs.

107. Although collaboration between government agencies was found to be cordial, supportive and complementary, collaboration with health authorities was found to be weak. This must be strengthened through active participation in health related activities such as immunization, malaria campaigns and HIV/AIDS, Home Based Care (HBC) etc. Furthermore, other CSOs working in this area must also be brought on board to re-enforce the performance of health services in the region

6.2 Other Programs

108. It is ironical that provision of safe water is a major constraint, despite availability of large water bodies. Apart from the pollution created by the water weed (hyacinth), especially around Kisumu, the lake water is increasing getting extensively polluted by mushrooming fishing plants and other industries. Fishing plants around the lake were found to be discharging raw affluent and sewage directly into the lake. In Uganda around Entebbe landing site the extent of pollution was so high, that navigation on the lake about two kilometers from the landing site was becoming risky and a health hazard. National environment agencies must be notified to regularly survey the lake basin for clandestine pollution of the lake and take appropriate measures to minimize pollution of the lake.

109. Provision of long term sustainable safe water supply must be the priority of Governments of the Lake Victoria basins. Construction of shallow wells, protected wells and cost effective bore holes under community ownership for long-term sustainability should be strongly advocated. These are the mandates of governments, where LVP should play mainly a complementary role.

110. While most communities believe that disaster is the mandate of RC, LVP has no capacity for large scale disaster interventions. LVP should focus on limited emergency support e.g., floods, water accidents, cholera outbreaks etc. But disaster prevention in collaboration with government should be the order of the day.

6.3 Capacity Building

111. Many sub-branches were manned by volunteers, who are not adequately trained nor skilled in the management of such sub branches. Branch managers also require regular refresher training. Hence continued and increased training of staff, Board members and volunteers is necessary to ensure that LVP activities are effectively implemented, monitored and supervised.

112. The concept of income generating activities (IGAs) has caught up in all the branches. This is commendable, as in the future, branches will have to sustain themselves. But branches need to be advised on the most viable IGA strategy to adopt. Proper feasibility studies must be carried out to guide the venture in the future.

113. Communities must also be guided on the viable IGAs, which they can adopt. But many communities we talked to reported that they lack training and financial capital to establish and operate viable IGAs. The principle of a 'revolving fund' currently practiced in Uganda at the Mukono branch should be explored as an idea for other communities to adopt. But this should depend on the circumstances prevailing in the local area.

6.4 Membership and Volunteerism

114 Many branches have been struggling with recruitment of members. The issue of quality of members is also being considered. This issue requires careful and realistic analysis before a decision can be made on the way forward. We recommend that each National Society's Board should set-up a sub committee on membership. To review among other things; 1) types of membership; 2) rationale for quality members; 3) membership fees by category; 4) any other related issue on membership (eg. awards, certificates, recognition etc.)

115. Most RC members are also volunteers who engage in RC work, but not all volunteers have appropriate skills to undertake technical activities. We recommend that only registered RC members should be engaged in RC work at professional level as volunteers. However other members/ volunteers must be properly trained and capacitated.

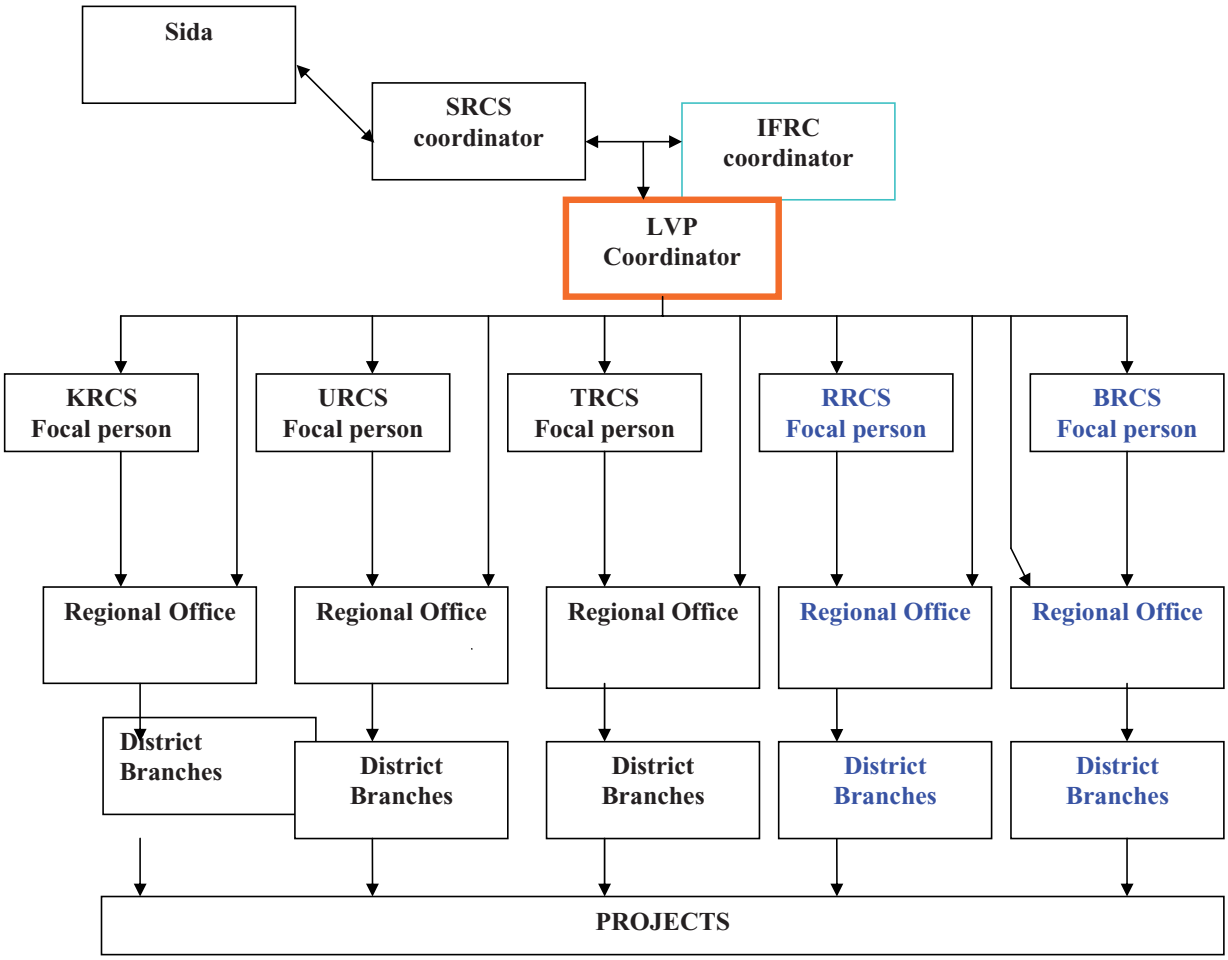
116. While in all branches, volunteers were found to be very active, participating in various meetings and instrumental in carrying out field activities, many of them expressed concern that they were not compensated nor refunded expenses incurred (e.g transport, accommodation, meals etc.). They have argued that whereas the little incomes they make are meant for their families' upkeep, they are forced to spend it during their voluntary work. This is acting as a disincentive for them. We recommend that LVP and National Red Cross Societies for that matter, should develop policies and strategies on volunteer incentives.

6.5. Coordination

117. Coordination was found to be weak, resulting in poor communication, inappropriate planning, distorted budgeting, poor monitoring and reporting. All these seem to arise from the poor organizational structure of the LVP (see Figure 1). We strongly recommend that LVP organizational development and management be restructured to allow for effective coordination and implementation of program activities. The position/office of Coordinator of LVP should be created and

located within the IFRC sub zonal office (Figure 2). The role of the LVP Coordinator would be among other things; 1) reporting to the Rotating Chairperson of LVP; 2) liaising with National Secretary Generals through their focal persons on LVP and National Society's issues; 3) coordinating and monitoring LVP activities; 4) strategic planning, preparing quarterly and annual work plans and reporting to Sida/ IFRC and National Societies; 5) back-stopping and supporting regional/district branches in preparing project proposals, training and building branch capacities etc; 6) mobilizing resources and identifying potential donors/sponsors and fund raising; and 7) promoting regional cooperation and regional interventions.

Figure 2. The Proposed Restructuring of LVP Organization



N.B: Rwanda and Burundi are indicated in blue as they are yet to be incorporated. Their incorporation into LVP should be reviewed and accommodated in the MOU accordingly.

6.6 Strengthening Regional Approach and Best Practices

118 As both Rwanda and Burundi are due to come on board, their incorporation into LVP program should be reviewed and accommodated in the MOU accordingly.

119 Despite, a fully incorporated spirit of regional approach, to-date few cross border meetings and exchanges have taken place since the inception of LVP. We recommend that high level meetings be restricted to once a year but more cross border meetings/exchanges be encouraged subject to resource availability for focal persons, branch managers, RC members, volunteers and youths.

120. The role of youth did not appear to feature prominently in the regional approach. Various youths are involved in youth activities, including peer educator activities, and drama groups, tree planting, experience sharing etc. Most of these have some bearing in the regional approach, but it appears that youth roles, especially youths-out-school are not being exploited in this regard. We recommend that LVP should promote regional youth exchanges, drama groups, experience sharing and best practices.

121. Documentation of best practices has been lacking throughout the first phase. New ideas that are generated are lost in the process. We recommend that documentation of best practices be adopted at all levels so that those found to have universal applications may be recommended for adoption elsewhere in the region. More emphasis should be placed on relevance and cost effectiveness.

6.7 Finance

122. Delays in disbursements and financial transfers to branches have been identified as major constraints to LVP implementation. For the whole of phase one, disbursements have been delayed, while transfers to branches have been un-duly delayed without any explanation. We recommend that delays in disbursements should be minimized and any delays in transfers by HQs to the branches should be communicated to the branches in writing early, providing full explanation. A system of disbursements and transfers should be put in place and transparently communicated to National Societies and branches for implementation. It is expected that if the position of LVP coordinator is created the situation will greatly improve.

123. The reasons for delayed disbursements were not clearly explained, although poor communication and lack of timely reporting were cited as some of the reasons. We recommend that timely and transparent reporting be adopted at all levels. The system of last minute budget cuts at each annual review should be avoided. Approved work plans should be based on consultative process and available resources, which should be indicated at the end of each financial year.

124. Due to poor coordination it was noted that monitoring and reporting of activities have been lacking. We strongly believe that the proposed restructuring will improve overall coordination, monitoring of budgets and activities as well as eliminate distortions in work plans and budgets (see Figure 2)

7. Conclusions

7.1 Goal Achievement and Degree of Impact

1. Community empowerment

125. The LVP objective was: to strengthen and empower communities in their initiatives for sustainable development. It was noted that where RC members were present there were visible impacts and the first steps have been taken towards achieving the objectives. Members take active roles in the communities, although the impact is still low but can be increased through increased program funds, continued training of members and more focused interventions.

2. Capacity building

126. The LVP objective was: to strengthen the capacity of the branches for effective support, co-ordination and service delivery. It was noted that branches have been significantly strengthened and capacity increased. But interventions are not yet effective and regional co-ordination of lessons learned and best practices are not yet in place. Cooperation with stakeholders has been strengthened and improved. Local fundraising through IGAs is being developed in a strategic way. Exit strategies for branch development and sustainability are in place and are monitored. The number of members and volunteers has greatly increased and with that the local activities of the branches. Branch boards have been strengthened and take an active part in the development of work, but need more training.

3. Health

127. The LVP intended to carry out community based health initiatives, to facilitate and support vulnerable communities around the lake through its volunteers. Priority would be given to HIV/AIDS, malaria and other infectious diseases. LVP would also develop a comprehensive program to reduce threats of unsafe water and poor sanitation.

    The greatest impact has come through the sensitization and mobilization work carried out by members/volunteers. Significant impact concerning awareness raising can be registered in certain geographic locations. In all interventions the impact has been limited and patchy, the main reason being limited and uncertain funding for program implementation, for example malaria net coverage, HIV/AIDS HBC, orphan programs. Lack of concentrated efforts has also implied weaker impact. The water and sanitation programs have hardly come off the ground, except in one branch, as funds have not been available. But a participatory baseline assessment has been made and program plans prepared for future implementation.

4. Disaster management

128. The LVP objectives were: 1) to empower communities to predict, prevent and mitigate the impact of disaster; 2) to develop Integrated Community Based Disaster Management programs and at the sub-regional level 3) to establish and implement a sub-regional disaster management strategy. A number of local initiatives have been carried out, in particular training of RC members/community members. Impact on 1) has been small (water safety sensitization in Uganda, a few village flood prevention measures in Kenya). 2) Integrated management programs are in the making in some Kenyan branches. 3) a sub-regional strategy is not yet in place.

7.2 Contribution to Goal of Improving Quality of Life

129. As explained above the LVP has given some contribution to the common goal of improving the quality of life of communities and poor people around the lake. RC is only one of many players, which all have their strengths and weaknesses. With the limited funds available for program initiatives during phase I not much more could be expected from LVP. The most important contribution has been the strengthened presence of members and volunteers who live and work in the communities, carry out awareness and mobilization work and thus prepare and equip people to involve themselves in local development initiatives. This impact should not be underestimated. The presence of "change agents" at community level is an invaluable development tool.

7.3 Effectiveness of the Regional Approach

130. The concept of a regional Red Cross approach in the LV region is very pertinent. Development challenges are similar, the Red Cross is present all around the lake and various problems also cross the borders. A well established regional program will increase effectiveness in addressing the development objectives. Three years is a short time, but during this time the RC societies and branches have significantly increased their contacts and gotten to know each other better, at the national level, but particularly at the branch level. The program inspires both local work and further regional cooperation and coordination.

131. The effectiveness of the approach has so far been limited as much effort has been needed to be placed on the establishment of well functioning branches. It is our conviction that the regional approach can be significantly strengthened during the next phase, if some of the suggested improvements are implemented, particularly improved coordination and strategic leadership at the lake level, timely and increased funding of programs and increased cross-border exchanges among branches, leading to the adoption of best practices.

7.4 Relevance of the LVP in Addressing Development Challenges

132. The greatest relevance of the Red Cross societies being involved in pursuing a regional development program in the Lake Victoria region is its active and wide spread presence at the community level all around the lake. Thousands of community RC members are showing a willingness to work locally for development within chosen RC areas.

133. There is a need to balance the choice of these intervention areas between what is the RC mandate and expertise and what the priority needs are in the communities. How much resources should be invested in emergency preparedness and action (accidents, natural disasters, conflicts) in relation to "slower disasters" like deaths in preventable diseases, HIV/AIDS, unsafe water, hygiene and sanitation, environmental destruction?

    The LVP is working with these issues and program interventions are being developed, particularly in the area of safe water and sanitation. Awareness and mobilization work on HIV/AIDS, hygiene, environmental protection is having effect. Based on experiences won and strategic choice during the next program phase the relevance of the program can be increased.

7.5 LVP's Contribution to the Lake Victoria Initiative Strategy and Objectives

134. The overall objective of the Swedish Lake Victoria Initiative is to contribute to poverty reduction within a sustainable development framework. Priority is given to five areas of activity:

1. Capacity building for sustainable development
2. Empowering communities and individuals
3. A sound environment and sustainable use of natural resources
4. Combating HIV/AIDS
5. Private sector development for economic growth.

135. LVI underlines the need for focal and strategic approaches in development initiatives, as well as increased coordination of activities. It also argues for a rights-based approach and the strengthening of the voice of poor people through the strengthening of civil society.

136. The Red Cross LVP is a program with limited resources and capacities. It also works within the parameters of the RC core areas and responsibilities. This implies a need to focus on areas where the branches and members/volunteers can make a difference and add their efforts to those of others.

137. It is our understanding that LVP to a large extent tries to work in line with the LVI objectives and strategy. It does not have the capacity or mandate to work within all priority areas. Its main contribution can be found in its work to empower communities and individuals, through mobilization and awareness raising on social, health, safety and environmental issues. While this is done on a small scale, through training, local social mobilization and small projects RC-LVP so far lacks a full understanding of the need to build its work on a rights-based approach. LVP has not tried to organize or equip local communities to understand and demand their rights in relation to government at local or national level. The role of civil society to monitor and actively engage with government for social, political and economic change, is so far not within the RC development strategy.

138. Notwithstanding, through its local presence LVP is strengthening local organisations and activities, resulting in more empowered individuals and groups.

    Within the area of improving living conditions, particularly in the areas of health, HIV/AIDS and water and sanitation the LVP has worked in line with the LVI. With larger program resources and strengthened strategic focus the program has the capacity to make a positive and important impact.

139. The regional approach has also taken some strides but need to be further developed in order for experiences and synergies to be developed into stronger and focused programs.

7.6 Degree of Adherence to SRCS – Sida Agreement

140. As has been pointed out the RC-LVP was not able to adhere fully to the agreed distribution of funds between different budget lines. A larger percentage of funds was utilized for capacity building purposes. Parts of funds used for capacity building were registered under programs.

141. According to the program document programs in HIV/AIDS, water and sanitation and malaria mainly concerned the sharing of experiences between countries and one pilot project. The sharing of experiences has been there and in particular the cross-border exchanges between branches have

been useful. But mainly these program areas have involved small projects and local interventions rather than the sharing of experiences..

According to the program document capacity building would initially concentrate on "soft ware" while structures and means of transport would be rare and primarily funded outside the LVI support. In reality capacity building costs have mainly covered hard ware, in the form of office/ RC Centre development, office equipment and IGA investments.

142. The agreement with Sida LVI was that investments in hard ware "should primarily bee seen as encouragement when a branch has shown its commitment and competence by successful program implementation". In fact the program has worked the other way around. Hard ware investments have preceded program implementation.

Nevertheless, most of these investments listed already in the program document, have been reasonable and have laid a stronger basis for program implementation during the second phase of LVP, since it has strengthened the branch capacity to increase own incomes and realize their exit strategies.

143. The LVP set out to "ensure gender awareness and gender considerations in all activities". This has hardly been the case and the understanding of the gender challenge needs to improve.

Annex 1. General Country Observations and Highlights

1. Kenya Highlights

Capacity building

The Kenya Red Cross Society in several reports refers to the objectives of LVP as being:

– to build the capacity of LVP branches for effective disaster response

– to build the capacity of LVP communities to manage disaster/risk reduction.

These apparently were the Strategic Objectives of the program jointly formulated by the sub-region (E.A) task force during the conceptualization of the LVP in 2003. From these objectives the branches originate specific locational priorities in the areas of health, particularly HIV/AIDS-related and control and prevention of floods etc. Even though this leaves room for a broad spectrum of activities, it increases the risk of limiting program activities.

KRCS, at the LVP Conference in September 2006 requested for a review of these objectives which they also found limiting. We support such a review.

Program coordination

Branches in general felt that program coordination from HQ had not been effective enough. Communication has been insufficient, feedback on reports slow, responses late in coming. Branches also feel they need more advice on plans and performance.

The program coordination was initially adversely affected because of high turnover of LVP "Focal Persons" at the HQ from 2003–2005. However, communication and feedback (on plans & performance) to branches markedly improved given increased contact through periodical monitoring and supervision visits by the Regional Coordinator from 2006.

The decision to move a regional coordinator to Kisumu has further greatly improved the chance to effectively monitor and lead the LVP in Kenya.

Strengthening of branch capacity

At the onset of LVP the branch capacities in the Nyanza region were weak. Only the Kisumu branch had salaried staff, while other branches were cared for by volunteer members and the Branch Management Boards. Several branches were more or less dormant.

The program has resulted in a clearly visible strengthening of the branches. Each branch now has a salaried branch coordinator. This is a huge improvement as it shows an established presence in the community and eases cooperation with stakeholders, as well as with members and volunteers and lays the basis for longer term planning and the coordination of activities.

Where office space was not available, often the local government or a church has been letting RC to use or rent some space. Offices are still small and simple and the branches plan for investments in better and RC owned office buildings. The local government is generally willing to set aside plots for such offices. Capacity has also increased through the procurement of new equipment – at least one motorbike per branch, bicycles, computer, printer, desks, chairs, some electronic equipment. This refurbishment has been kept at a restricted level and is generally rather too modest than extravagant. Particularly communication is still a big problem. Only one new vehicle has been purchased for Kisumu.

Human capacity building

The new branch coordinators are generally young men with strong commitment and with a capacity to improve with further training and guidance. It is unfortunate that only one woman, in Rachuonyo Branch, has been employed as branch coordinator. Management training has also been given. There is need of continuous upgrading of skills and capacity of coordinators and branch management.

Red Cross, particularly at the local level, is a democratic organisation with a democratic practice. Our impression is that the elected branch steering committees have committed and competent members, who also would benefit from recurrent training.

Branch affairs are run in a democratic and accountable fashion. More or less regular committee meetings are held, minutes kept, decisions taken through democratic procedures. There is a transparent structure for financial accountability, and the auditing of financial reports has been introduced at branch level.

Members and volunteers

The implementation of LVP has resulted in increased membership in all branches. The Migori branch was dormant when LVP started. In 2004 it reached 200 members, increasing to 500 in 2005 and 826 in 2006. The retention rate used to be around 25%, but has improved to around 60% according to the branch management. The Kisumu branch initially had some strength and membership numbers have not changed as much. In 2006 the branch had 500 members, against about 180 four years ago. Its strength is a higher number of life members – 130. The Nyando branch had about 100 members before 2003, but this has since increased to 300 members and a renewal rate of about 60%. While there is a core of committed and long term members, the membership is rather mobile, as many of them are young men out-of-school, who easily quit when other things come up or the benefits of being member are seen as insufficient.

The retention rate in the branches seems to be around 50–60%. This may be acceptable if core members stay on for several years, but increases the vulnerability of the organization. Leading members at community or branch level will often be opinion leaders, like teachers, pastors, nurses, civil servants, while the bulk of members and volunteers are common people in the communities, mostly youth. Many committed, but poor, member/volunteers were met at the local level. These often hope for or expect some incentives for their contributions of time and efforts. The branches cannot respond to the demand for such incentives, resulting in the loss of volunteers/members.

Development of program areas

LVP has mainly meant the scaling up of existing program/activity areas. There is noticeable increase in number of activities, numbers of people trained in the core areas of health and HIV/AIDS and Disaster preparedness and management.

Disaster Management:

Many areas in Nyanza are prone to floods, as well as drought. A particular disaster risk is accidents on the lake. The Red Cross is appreciated, by local government, CSOs and communities, as an important actor when such disasters strike. In all districts visited local authority representatives expressed that RC was a very important, leading partner in relation to disasters and accidents. They were said to be the first to take responsibility and volunteer when need occurred. RC is the leading agent in district disaster management committees in Migori and Busia.

Through LVP the branches have been able to strengthen their role in disaster management. More members/volunteers are trained at community level. A warehouse has been constructed in Kisumu for equipment and items for victims. There are several examples of RC volunteers taking important part in flood disasters in Nyando and Migori. Under this strategic area RC carries out certain defined activities for Community based disaster management: training in Community Based First Aid (CBFA) and of

Red Cross Action Teams (RCAT), first aid equipment, life jackets, tree planting and promotion of good environmental and hygienic practices. The impression is that the Red Cross in Nyanza is playing an increasingly stronger role in disaster preparedness and response, in cooperation with government.

On the community level it is not apparent that the interventions are part of a strategic planning. Activities are still too spread out and sporadic to have a strong and long term impact. Capacity and leadership at the community level seems still to be too weak to take responsibility for activities. The limited resources make it difficult to carry through plans for local capacity to manage emergency situations. Not even basic first aid kits are normally available at the community level. Life jackets have been introduced in the lakeshore communities, but not to the extent that it would cover needs when people have been sensitized to buy or rent jackets.

Health, HIV/AIDS and environment

The activities at the branch level on health and in particular HIV/AIDS have visibly increased through the LVP. Training of volunteers was carried out on hygiene and sanitation, small malaria control actions were carried out, HIV/AIDS awareness community outreach campaigns are conducted; in some branches support projects for orphans and vulnerable children (OVC) are set up, as well a Home Based Care (HBC) groups with volunteers, community members and people living with the virus. Several interventions are surely making an impact for individuals involved. In particular, community based HBC groups are needed. If these can be multiplied and function as the basis for continuous awareness work, OVC-support, VCT and ARV work and condom distribution, sustained interventions can be carried out at the community level. As of now no strategic plan for HIV/AIDS work is apparent and interventions are patchy and may not always be the most relevant. There is a need to be part of a comprehensive plan at district level in coordination with other actors among CSOs and in particular MoH. But for such community based groups to be sustainable there is a strong need for material/financial support and/or functional income generating activities (IGA).

Networking and cooperation

All Nyanza RC branches are involved in networking with civil society organisations (CSO) and searching cooperation when this is possible and desirable. The Red Cross cooperation with government is long standing and is strong and highly appreciated at the branch level. The capacity building of the branches through LVP has, as has been mentioned earlier, strengthened RC's role in disaster planning, management and action together with relevant government authorities. There are also numerous examples of the branches coordinating initiatives with CBOs and CSOs at the local level. Duplication does not seem to be a major problem. The major challenges in this area is rather the patchy-ness of many initiatives and the Kenyan civil society's lack of coordination and networking systems, at least as can be seen in Nyanza. The Red Cross is not the most suitable organization to take any leading role in the development of such networking and coordination systems. An important role it may play is as a go-between between civil society and government, as its relation with government is stronger than most CSOs.

Advocacy

Red Cross Societies seem to shy away from advocacy. A number of development issues are the mandates of governments but are often not implemented effectively and/or lacking government funding. RC must be seen as complementary to governments and must work as partners, in so far as they have the capacity to do so. In doing this they need to advocate more strongly towards government, on behalf of the people, for the fulfillment of government duties.

2. Uganda Highlights

Capacity building

The branches have been significantly strengthened through LVP. Uganda National Society has restructured/expanded its OD and has set up regional offices (in Mbale, Gulu, Hoima and Mbarara). Staff has been expanded in several branches and the branch offices have been equipped with computers, printers, office materials and motor cycles. In some branches, sub-branches have been established and volunteer coordinators have been deployed. Funds have been put aside for the construction of branch offices and several such offices are near completion. There is a good effort to turn the branch capacity into sustainable branches, through the renting out of office space and/or establishing hostels for students and other IGA ideas.

Human capacity building

Some training has been carried out, strengthening the capacity of the coordinators, youth coordinators and board members. But the general impression is that there is need for further and continuous training of key staff and board members/RC members for the branches to be able to develop and carry out expanded programs activities in the communities, particularly when the programs go beyond established RC interventions, into broader development initiatives in the areas of water, sanitation, disaster mitigation, food security, environment. These are areas where the branch capacity is limited. As the strategic support from the HQ/regional level is also limited, such capacity needs to be developed locally.

Membership/volunteers

The strengthening of the capacity of branches, increased funding for activities and the facilitation of transport means has made the RC more visible in the community. This has led to a' rather strong' impact in regards to increased membership base and an increased number of volunteers. There is a clearly visible increase in member/volunteer activities in the communities.

The idea of 'Quality membership' is being considered in Uganda– a couple of the Ugandan branches have made strategic decisions on membership recruitment, analyzing the need for "quality" members and concentrating efforts to this. This may be a good and necessary development. Membership is the strongest asset of the Red Cross, beside its excellent corporate image. It is through the members/volunteers that RC can carry out cost effective and sustainable work at the community level. The membership base is the envy of other development organizations/NGOs. It is therefore important that RC nurtures this asset. There is a need to always strengthen the spirit and pride of being with the Red Cross. In order to achieve this there is a need for continuous projects and programs that involves the members/volunteers, trainings and invitation to RC activities, incentives in the form of small things like pins, caps, T-shirts, certificates, public gratitude etc. members will also need to be compensated for costs incurred and where possible, some benefits should be considered

Networking and collaboration

The strengthening of the branches has also resulted in a stronger RC presence in organized Civil Society. RC is now a respected organization which is actively taking part in network and coordination arrangements with other CSOs in all the three countries and all branches. In some areas (Busia (U) on HIV/AIDS, Migori in disaster management) it is taking a leading role. RC has traditionally worked in close cooperation with local governments. This collaboration has increased and local authorities have indicated a clearly strengthened role of RC in supporting development activities.

Planning and reporting

Reporting and planning systems are uniform and satisfactory, developed by the national societies and the SRCS. Branches report on activities and budgets monthly, quarterly and annually. Annual reports are done against annual plans and divergences between plans and results are explained. But communi-

cation between HQ and branches are scanty. There is a lack of analytical summaries of work carried out and lessons learned. Planning is to a large extent limited to activities, which are planned to be carried out, setting out numbers to be reached. Sometimes a problem analysis is made, but the planned interventions are not necessarily adjusted to this analysis, as intervention priorities are not fully made. Log-frames, including indicators and risks analysis are normally produced and reports made against them.

Assessments seem to be done throughout the year, thanks to a close relation between members/volunteers and the communities and local authorities. But this does not always result in medium and long term strategies for impact and change. Rather, the branches every year plan for a large number of activities in various areas. Normally these fall within traditional RC activities, e.g. First Aid and DM training, dissemination of RC objectives, and certain programs, like distribution of mosquito nets or life jackets. Hence branches have a difficult time in deciding on priorities and to plan strategically against such priorities.

Concentration

Branches are generally not clear about if and how they need to concentrate their work, both geographically, in relation to groups of citizens and in subject areas of interventions. The effect is that efforts are spread too thinly with less lasting effects and a greater risk of wasting efforts. An example may be youth work in schools. For lasting effects there is a need to revisit schools and build up a continuous work to strengthen clubs and to make RC dissemination a permanent feature in the schools by getting teachers involved. Other examples are the limited distribution of mosquito nets or life jackets. Often a branch tries to do everything on the RC "menu", from painting zebra crossings to establishing water points in communities and selling subsidized mosquito nets. This may have some good PR effects, but it is beyond the branch capacity to do so many things and expect sustainable results.

Strategic choices – priorities

Branches need to make strategic choices on where they need to work, what they need to concentrate on and how they need to work in the most effective way. Asked about what the priorities should be, the branches usually voice their views and some areas come up. In Uganda the expressed priorities were water and sanitation, HIV/AIDS, distribution of mosquito nets. But it was not clear that these choices had really been made and consequently actually influenced the work plans of the branches or communities. Uganda Red Cross is fully aware of this problem and has decided, in its strategy for the coming years, to make these priorities and let the branches concentrate their programs to fewer areas. This is commendable and should be the way the LVP to go in the coming years.

Some tough choices will probably have to be made. In most branches there is a certain concentration, but there seems to be an effort to cover most communities of size. There is a need to concentrate further and set up a strategy so that those communities that are given a lower priority still are kept "alive" and are planned to be phased in within a reasonable period of time.

On life jackets

A number of problems do arise: 1) people cannot afford life jackets. 2) people's attitude towards protecting their own lives is defeatist, 3) the law on use of life jackets is not enforced, 4) too many people cannot swim. So far the response has been to make life jackets more affordable, but only to a limited extent. Few jackets have been made available. If this is the chosen way to go, then life jackets have to be made readily available for sale or rent and a continuous campaign for their use carried out. But another way to go may be to work strategically to enforce the law. While this was seen as impossible at one landing site, in another the local authority was of the opinion that this could be done.

On malaria

If RC involves itself with fighting malaria, it needs to be part of a larger program for eradication. If not, the small efforts will be made in vain. Its strong presence at the community level through its members/volunteers, RC should be able to attract funding from donors who have chosen malaria eradication as their strategic area, and get funding for larger interventions The Government of Uganda is selling subsidized mosquito nets under the Ministry of Health program. A wide and sustained availability of low cost mosquito nets may be another way to go, with special support programs for identified vulnerable groups (orphans, PLWA).

On HIV/AIDS, Water and sanitation

Incidences of HIV/AIDS were pronounced in Rakai branch. But due to government intervention the HIV/AIDS has declined. More sensitization is taking place. Drama groups are making significant impacts on youths.

Disaster management

RC needs to decide on where and how disaster management, training, preparation and prevention initiatives should be carried out. They should be limited to areas where disasters are known to be occurring, while the Red Cross at national level needs to have its general plan and preparedness to take part in disaster management and relief efforts. At the local level branches need to concentrate on disaster preparedness and mitigation, but prioritize this only in areas that are prone to real disasters.

Advocacy

Red Cross Societies seem to shy away from advocacy. Issues such as Life jackets, roads construction, health institutions and ARV availability are the mandates of governments but are often pushed to RC, which does not have the capacity to do so. RC must be seen as complementary to governments and must work as partners, in so far as they have the capacity to do so.

Disbursements

Delayed disbursements are one of the biggest challenges in the implementation of LVP. It has generated negative effects – members/volunteers lose heart and communities lose trust. This is extremely negative and has to be avoided at all costs. All branches in all countries reported delayed disbursements of funds as the major problem. This has caused serious problems for the branches. Some quotations from the 2006 report from the Rakai branch, illustrates the situation:

"Challenges and constraints met

1. There was no transfer of funds for LVP activities to branches until late December 2006 and so the planned activities could not be implemented as scheduled."

2. Community expectations could not be satisfied and this somehow affected the image of the branch and the society in general and efforts have to be made to regain it."

The branch had planned to implement a wide range of activities under different objectives to achieve the specified LVP goal. However, funding from the external donors was not timely and the branch could not raise substantial amounts of local income. For that matter few activities were implemented amid difficulties and as a result, it has been hard to determine the impact created." In addition most branches have reported that members/volunteers are lost or lose dedication when planned and promised activities are delayed.

3. Tanzania Highlights

Capacity building

It was noted that while the branches have been significantly strengthened through LVP, both staff and Board members need some training. Staff numbers have been expanded in several branches and some branch offices have been equipped with computers, printers, office material and motor cycles, although Bukoba branch is still using an old computer. Some sub-branches have been established but manned by volunteer coordinators. There is a good effort to turn the branch capacity into a capacity to sustain the branch, through the renting out of office space and/or initiating some IGAs.

Human capacity building

Some training has been carried out, strengthening the capacity of the coordinators, youth coordinators and board members. But the urgent demand made is that there is a need for further and continuous training of key staff and board members/members for the branches to be able to develop and carry out expanded programs in the communities, particularly when the programs go beyond established RC interventions into broader development initiatives in the areas of water, sanitation, disaster mitigation, food security, environment. Trained peer educators have been active in community work. These are areas where the branch capacity is limited. As the strategic support from the HQ level and regional level is also limited, such capacity needs to be developed locally.

Membership/volunteers

The strengthening of the branches, has increased funding for activities. The facilitation for transport means (motor cycle, 4-wheel vehicle) has made the RC more visible in the community. This has led to a rather strong impact in regards to increased membership base and an increased number of volunteers. There is clearly visible increase in member/volunteer activities in the communities.

Membership – a couple of branches/sub branches have made significant effort to recruit members. It should be noted that membership is the strongest asset of the Red Cross, besides its excellent corporate image. It is through the members/volunteers that RC can carry out cost effective and sustainable work at the community level. The membership base is the envy of other development organizations/NGOs. It is therefore of greatest importance that RC nurtures this asset. There is a need to always strengthen the spirit and pride of being part of the Red Cross. In order to achieve this there is a need for continuous projects and programs that involves the members/volunteers, trainings and invitation to RC activities, incentives in the form of small things like pins, caps, T-shirts, certificates, public gratitude etc. Volunteers/members need to be compensated for costs incurred and, to the extent this is possible, some benefits should be provided.

Networking and collaboration

The strengthening of the branches has also resulted in a stronger RC presence in organized Civil Society activities. RC is now a respected organization which is actively taking part in network and coordination arrangements with other CS organizations.

RC has traditionally worked in close cooperation with local governments. A number of Government officials, CSOs we met (AMREF, PLAN International, TANESA, ACORD etc) have expressed satisfaction with RC collaboration.

Planning and reporting

Reporting and planning systems although uniform it is not regular. Branches report on activities and budgets monthly, quarterly and annually. Annual reports are done against annual plans and divergences between plans and results are explained. There is a lack of analytical summaries of work carried out and lessons learned. Planning is to a large extent limited to work plans which are approved but changed at annual reviews. Sometimes a problem analysis is made, but the planned interventions are not neces-

sarily adjusted to this analysis, as intervention priorities are not fully made. Log-frames, including indicators and risks analysis are normally produced and reports made against them. But new plans are determined at the annual review which are adopted depending on new resource indication and required to be carried out within a short time. (two months).

New plans do not show an effort or capacity to strategically look at what the branch wants and needs to do in response to community assessments. Such assessments seem to be done throughout the year, because of close relation between members/volunteers and the communities and local authorities. But this does not result in medium and long term strategies for impact and change. Rather, the branches every year plan for a large number of activities in various areas, which fall within traditional RC activities (of FA and DM training, dissemination of RC objectives, and certain programs, like distribution of mosquito nets or life jackets).

The branches have a difficult time in deciding on priorities and to plan strategically against such priorities. Only in Mwanza and Kagera regions, were there are some indicative priority areas. These included school clubs/youth, HIV/AIDS, Water and Sanitation, water safety.

Concentration

Branches are generally not clear about where they need to concentrate their work. The effect is that efforts are spread too thinly with less lasting effects and a greater risk of wasting efforts. A good example is youth participation in schools. For lasting effects as noted in Uganda, there is a need to revisit schools and build up a continuous work to strengthen clubs and to make RC dissemination a permanent feature in the schools by getting teachers involved. Other examples are the limited distribution of mosquito nets or life jackets. There is some confusion in the communities where RC and some NGOs are charging different subsidized prices for mosquito nets. This needs to be rectified.

Strategic choices – priorities

Branches need to make strategic choices on where they need to work, what they need to concentrate on and how they need to work in the most effective way. It was found to be a common practice in all the three countries that often a branch tries to do everything on the RC "menu", from painting zebra crossings to establishing water points in communities and selling subsidized mosquito nets. Asked about what the priorities should be for the branches. The response usually something will come up. In various branches in Tanzania expressed priorities were varied. But water and sanitation, HIV/AIDS, DM. were predominant. But it was not clear that these choices had really been intelligently made to influence the working plans of the branches.

The Tanzanian Red Cross in its strategy for the coming years is to make these priorities but let the branches concentrate their programs to fewer areas. This makes a lot of sense.

Strategies

There will be a need to develop programmatic collaboration with other organizations as well as with government. This is done in some places. In Musoma, Tanzania, the RC is funded by PLAN International for sensitization and mobilization on malaria prevention.

Both water and road safety are areas where government has the greatest responsibility and where laws are in place to increase security, for example a law on the use of life jackets cannot be enforced. Concerning road traffic a number of laws are not respected in every country. To really decrease the number of accidents RC will need to come up with advocacy work directed towards government authorities and commercial traffic owners.

On life jackets

So far the response has been to make life jackets more affordable, but only to a limited extent. Few jackets have been made available. If this is the chosen way to go, then life jackets have to be made

readily available for sale or rent and a continuous campaign for their use carried out. But another way to go may be to work strategically to enforce the law.

On malaria

If TRCS wants to involve itself with fighting malaria it needs to be part of a larger program for eradication. If not, the small efforts will not go a long way. With its rather strong presence at the community level through its members/volunteers RC should be able to attract funding from donors who have chosen malaria eradication as their strategic area, and get funding for larger interventions. This is what the Musoma region is doing in cooperation with PLAN International. A wide and sustained availability of low cost mosquito nets may be another way to go, with special support programs for identified vulnerable groups (orphans, PLWA).

On HIV/AIDS, water and sanitation

Incidences of HIV/AIDS were pronounced in Kimbugo branch because youth who go fishing contract HIV/AIDS and return to the main land and spread it. Communities had planned to visit the island to sensitize those living there. Test carried on 107 youth revealed that they were all (100%) infected. This branch also has 80% of the households without toilets. The area has rocky bed, which makes it difficult to dig pit latrines.

On tree planting, environment

Tree planting in schools had taken off very well in all the branches in Musoma, Mwanza and Kagera regions, but this focused mainly in schools except in Kagera region where the efforts had spread to communities. All branches had tree nurseries and were collaborating well with the Swedish NGO VI Agro-forestry in the areas, who were supporting/training communities.

Advocacy

All National Red Cross Societies should make some efforts to advocate for Life jackets, HIV Aids and malaria campaigns, roads construction, water and sanitation, health facilities, ARV availability, which are the mandate of government. RC should be seen as complementary to government and other agencies.

Disbursements:

All branches in all countries, have reported late disbursements of funds and HQ delayed transfers as the major problems. Poor communication between HQ and branches has also been cited as a major problem which has caused serious problems for the branches with some serious consequences. Negative effects – members/volunteers lose heart and communities lose trust. This is extremely negative and has to be avoided at all costs. Available information indicates that for Tanzania, like in Uganda and Kenya:

1. There was no transfer of funds for LVP activities to branches until late November/December and so the planned activities could not be implemented as scheduled."

2. Community expectations could not be satisfied and this somehow affected the image of the branch and the society in general and efforts have to be made to regain it."

While the branches plan to implement a wide range of activities under different objectives to achieve the specified LVP goal, funding from the external donors is not timely and the branch can not raise substantial amounts of local income. For that matter few activities were implemented amid difficulties and as a result. In addition most branches have reported that members/volunteers are lost or lose dedication when planned and promised activities are delayed and/or cancelled.

Annex 2. Exit Indicators

Compilation of a selection of indicators from 4 branches: Busia, Kisumu, Rachonyo and Migori (Migori not complete).

Component	Present 2006	Exit indicators
Percentage women on gov. body	22	33
No of sub-branches	11	21
No of women groups	15	22
No of youth groups	29	78
Total number of members	2103	3714
No of adult members	963	1640
No of female members	559	1100
No of registered volunteers	615	1030
How many vol. active >_4 hours per week	263	475
Volunteer retention rate	55%	75%
Red Cross centre owned	No	Yes
Internet facility	2 no 2 yes	Yes
Vehicle	No (1 reg.)	Yes
Covering basic adm costs by own funds (%)	25	100
Covering some core activities by own funds (%)	3 – no, 1-35	45–50%
Community contributes to program costs		
With funds	No	yes
Programs/projects started under LVP	Beneficiaries	Beneficiaries
Malaria	200	20 000
HIV/AIDS	650	27500
IGAs	750	9 000
Watsan	–	27 000
Wells	–	6 500
RC ActionTeam members	80	400
First Aid posts	–	3
Community based first aid	48	800
HIV/AIDS and Home based care	650	27 000

Annex 3. Acknowledgements/People Met

In the course of the review we visited many branches, sub-branches and community projects and met several Red Cross officials, government officials, civil society organizations and communities, most of who provided us with valuable information that has been used to write this report. We are most grateful and appreciative to the following individuals and organization/communities we met during the course of this exercise who contributed in one way or another to the success of this evaluation.

People met and interviewed:

(i) Sida

- Nekessa Connie Ouma
  Regional Programme Officer, Sida/LVI
  Embassy of Sweden
  P.O Box 30600 – 00100 GPO,
  Nairobi, Kenya

- Gertrude Ngabirano
  Regional Programme Manager LVI
  Embassy of Sweden
  24 Lumumba Avenue
  P.O Box 22669,
  Kampala, Uganda

  SRCS

- Staffan Wiking
  Regional Coordinator
  East Africa Programmes
  Nils-Arvid Jonasson
  Programme officer
  Swedish Red Cross
  Stockholm, Sweden

(ii) ICRC

- Christine Brem
  Regional Cooperation Delegate
  P. O Box 73226, Nairobi,
  Kenya

- Faith Akiror
  Cooperation Field Officer
  P.O Box 4442, Kampala,
  Uganda

(iii) IFRC

- Per Jensnas
  Head of Regional Delegation
  P.O Box 41275, Nairobi, Kenya

- Esther Okwanga
  Head, East Africa Sub
  Regional Office

- John Erik
  Acting Regional Security Delegate

(iv) Kenya Red Cross Society - Nairobi

- Gumato Yattani
  Head, Organizational Development &
  LVP Focal Person

- Oyoko Omondi
  Regional Manager
  Kenya Red Cross Society,
  Nyanza Region

- John Addenyo
  Acting Regional Manger
  Kenya Red Cross Society,
  Nyanza Region

- Dr.Margaret Oduor
  Chairperson of the Board and National
  Representative
  Kenya Red Cross Society,
  Kisumu Branch

- Philemon Majwa
  Branch Coordinator
  Kenya Red Cross Society,
  Kisumu Branch

- Joseph Aloo
  Branch Coordinator
  Kenya Red Cross Society,
  Migori Branch

- Njoroge Ndirangu
  District Commissioner
  Migori, Kenya

- Daniel Asaka
  Branch Coordinator
  Kenya Red Cross Society,
  Nyando Branch
  Nyando, Kenya

- Isaac Adede
  Chairman of the Board
  Kenya Red Cross Society,
  Nyando Branch
  Nyando, Kenya

- Rev. Boniface Abuto
  Proprietor
  Amazing Grace Orphanage
  Nyando, Kenya

- Nicodemus Akango
  Branch Coordinator
  Kenya Red Cross Society,
  Busia Branch
  Busia, Kenya

(v) Uganda Red Cross Society
P.O Box 494
Kampala, Uganda

- Alice Uwase Anukur
  Secretary General

- Nataka Michael Richard
  Deputy Secretary General

- Dr. Bildard Baguma
  Senior Health Coord.

- David Okumu
  Head, Organizational and Development

- Jessica Kamya Bagenda
  Programme Officer OD & LVP Focal Person

- Peter Waalwo Kajula
  Disaster Management Coordinator

- Aine Reuben
  Relief Officer

- Mulumba Mathias
  Programme Officer,
  Community Based Disaster Management

- Kevin Nabutuwa
  Branch Coordinator
  Busia Branch
  Busia, Uganda

- Patrick Kabugo
  Branch Coordinator
  Mukono Branch
  Busia, Uganda

- Julius ……
  Branch Coordinator
  Kalangala Branch
  Kalangala, Uganda

- Constantine Nsubuga
  Chairman of the Board,
  Kalangala Branch
  Kalangala, Uganda
- Chairman LC V
  Kalangala District
  Kalangala
- Chief Administrative Officer (CAO)
  Kalangala District
  Kalangala
- Salvatore Muhereza
  Branch Coordinator
  Uganda Red Cross Society, Rakai Branch
  Rakai, Uganda

(vi) Tanzania Red Cross Society

Judith Bihondwa,
Head, Organization and Development &
LVP Focal Person
Tanzania Red Cross Society
Dar es Salaam, Tanzania

- Pauline Kilele
  Regional Coordinator,
  Tanzania Red Cross Society
  Mwanza Region
  P.O Box 1752 Mwanza
- Dr S A Yongolo
  Chairman, Regional Board
  Tanzania Red Cross Society
  Mwanza
- Simon Chupa
  Regional Coordinator,
  Tanzania Red Cross Society
  Musoma Region
  Musoma
- Stephen Mathayo
  Chairman Regional Board
  Tanzania Red Cross Society
  Musoma
- Dr. Yvonne Swai
  Regional Coordinator,
  Tanzania Red Cross Society
  Kagera Region
  Bukoba

- Chairman, Regional Board
  Tanzania Red Cross Society
  Kagera Region
  Bukoba

(vi) CBOs/NGOs/CSOs Collaboration/Partners

(1) Kenya
(2) Uganda

– AMREF
– World Vision
– Pamoja
– ACTIONAID
– Amazing Grace
– UNICEF
– Watsan Project
– Goal (Uganda)
– World Vision
– NAADS
– CARE (Kenya)
– UNAFA
– Catholic Church
– NEMA
– Prep

(3) Tanzania

– AMREF
– VI Agro-forestry
– ACORD
– TANESA
– BAHAMA
– TAWOWHA
– KKKT
– World Vision

Other people and groups met:

Kisumu, Kenya:

Dr Abuto, Nyanyande health centre
Vitalo Ominyo, life RC member
17 members of the Nyanyande RC member/volunteer group

Migori, Kenya:

John Bosco, youth officer; Churchill Okongo and Dan Omondi, sub-branch board members; Joanne Ovande, branch committee member.
Jack Chucho, Migori Board chairman, Caleb Juma Ogallo, Migori vice chairman

Nyando, Kenya:

Board members and volunteers: Tom Aiko, Sarah Owino (treasurer), Beatrice Adhiembo, Mary Wachara, Meshack Omondi Mumbo, Allan Dickens, Elly Onyango.

15 members of RC community group in Nyando and members of ACODEP, village CBO.

M K Ngoleyang, Department of Social Services;

Busia, Kenya

Robert Ngetish, District Disaster Committee; other District government officers
Medicins Sant Frontiers, Busia

Community group in Budalangi division

Busia, Uganda:

YES – Youth Environmental Services (Busia NGO)
Friends of Christ Revival Ministries (Busia RC partner)
Members of the Busia RC branch board
Busia sub-branch coordinator
Community meeting in Busia sub-branch with appr. 50 people representing 2 youth groups, four community groups and RC supported orphans.

Kalangala, Uganda:

Fred Kintu, Action Aid (RC NGO partner)
Anselm Charigonza, District Community Services, and other district Govt. representatives
Sylvia Nalwanga, RC branch vice chair person, Francis Musoke, branch treasurer,
Naome Sanyu, women rep, Jospeh Ssebide, youth volunteer, Josephine Nassolo, youth,
Julius Ssemanda, Branch field coordinator, Edward Bugimbi, life member, Constantino Nsubuga, chairman of board

Action Aid – Fred Kintu
Edith Saku and Miiro Deo, volunteers, Kasekulo landing site
Soul Tomusanga – RC volunteer, Banga
Kasensero landing site: Chairman of RC group Moses Mayumbave – Bazira aids group
Catherine Namayanga – RC volunteer
Kayunga sub-branch board, Uganda:
Nalubega Annei, Sengendo Innocent, Eberu Daniel, Kubeedi M Ali, Senkatuka Martin, Grace Balamaga, Kizza Dirisa, Winnie Nanangae, Sulaiman Ssekandi, James Katumba

Mukono Branch board, Uganda

Fredrick Zimba High school patron

John Paul Walusimbi	Branch youth chair/board member
Amos Amazu	Community service/board member
Christopher Bbosa	Youth advisor/board member
Jamal Mugabi	Youth friendship/board member
Michael Kasozi	Volunteer
Musuuza Lwanga	General services/board member
Jessica Kalema	Women rep/board
Patrick Kabugo	Field coordinator
Simon Kiyuba	Vice chari person in board
Joel Bimiggwa	Sanitation/board
Ritah Nassolo	Secretary
Beatrice Yia	Women rep.
Jane Mutasa	Office secretary
Geoffrey Bullenga	Youth coordinator

Kiyindi landing site, Mukono, Uganda:
Meeting with 20+ community and local government representatives
Meeting with youth carpentry group

Meeting with women's IGA group

Musoma, Tanzania:

District government: Municipal Director, Dr Kunaje – director of rural municipal council, Ms Makene, Malaria focal person, Tana Nyabange, HIV/AIDS councilor

NGO partners: George Oduor Muyabi – Umoja, Robinson M Wangaso – Radio Victoria, Thomas Barthazary Wambura – Green Aid, Donald D Bahitwa, Richard Hamza – ACT Diocese, Joel Mayige – Vi Agro-forestry

Saragana sub-branch: meeting with branch board and members.

Mwanza, Tanzania:

RC Board members: Cecilia Mulingwa, Timothy Lugejuna, Lenah Ndyamukama, Anastazia Bernard, Sosthenesy Nsabi, S A Yongolo
Igoma branch, Igoma primary school: Teachers and students
Kisesa branch, meetings with youth club, PLWHA group, community members and RC board members

Kagera, Tanzania:

District commissioner
Meeting with 7 RC partners
Meeting with Muleba sub-branch board members and 10-15 community members
Meeting with 14 members of Kimbugu sub-branch board and members and community meeting

Annex 4. References

Cited Literature

Kenya Red Cross Society, Various Annual Audit Reports of Branches on LVP Activities for 2004 and 2005

Nataka Michael Richard, 2004. Implementation Report 2004, East African Sub Regional Lake Victoria Red Cross Programme, Kampala, Uganda

Nataka Michael Richard, 2006. Annual Report March 2005 – March 2006, East African Sub Regional Lake Victoria Red Cross Programme, Kampala, Uganda

Sida, 2004. Agreement Between Sida and Swedish Red Cross on Support to Lake Victoria Programme during 2004 – 2006, Nairobi, December 3rd, 2004.

Swedish Red Cross Society, 2004. Application for Development Cooperation in the Lake Victoria Basin, Stockholm, October 20th, 2004.

Swedish Red Cross Society, 2005. Humanitarian Assistance and Development Cooperation in East Africa, Report 2004 – Revised Proposal 2006, Stockholm, September 21st, 2005.

Swedish Red Cross Society, 2004. Terms of Reference for an Evaluation of the Implementation and Impact of the (Red Cross) Lake Victoria Programme 2004 – 2006. Nairobi, March, 28th, 2007

Tanzania Red Cross Society, Various Annual Audit and Annual Reports of Regional Branches on LVP Activities for 2004 and 2005,

Uganda Red Cross Society, LVP Annual Report 2005 and 2006

Uganda Red Cross Society, Various Annual Audit Reports of Branches' on LVP Activities for 2004 and 2005

Nils-Arvid Jonasson 2005. Capacity Assessment Performance Indicators "CAPI-Branch"

Annex 5. LVP Evaluation: Programme

Date	Time	Event	Responsible Person/Remarks	
28/03/07	06.30hrs	Per-Ulf Nilsson arrives NBO ex-AMS (KL 1566). Airport transfer to Hotel Inter Continental	Contacts: – Emily (Visitors Services) Tel 0733 888 033 or 0721 211 981 – Dorothy (EASRO) Tel. 0720 853 941	
	11.00hrs	Meeting with Esther Okwanga	Ditto	
	12.30hrs	Fred Opio arrives ex-Entebbe	Ditto	
	13.00–14.30hrs	Lunch hosted by EASRO	Ditto	
	14.30–16.30hrs	Briefing/courtesy call on Head, Regional Delegation IFRC	Esther Okwanga (EASRO)	
	16.30hrs	Transfer back to Hotel InterCon	Ditto	
29/03/07	06.00hrs	Transfer: Hotel – Airport for flight to Kusumu	Esther to accompany team to Kisumu	
	09.00hrs	Pick up from KIS airport to Hotel Sunset or Hotel Imperial)	KRCS Regional Office (Nyanza)	
	10.30hrs	Briefing at KRCS Reg. Office Briefing and meeting with Oyoko Omondi Esther Okwanga Nyanza Regional Office Staff Kisumu Branch KRCS staff	John Oddenyo (Acting Regional Manager)	
	12.30–14.00hrs	Lunch		
29/3–5/4		Field work in Kenya & Visited 30/3–1/4 Migori branch & field visits 2–3/4 Nyando branch & field visits 4–5/4 Busia branch & field visits	John Oddenyo	
05/04/07	noon.	KRCS takes team to Busia (K)	Ditto	
5 & 6/04/07	p.m	URCS meets team in Busia (U) → Field visits to sub branches. & Travel to Kampala by road	URCS – Jessica Bagenda	EASRO

07 – 09/04		Initiating report writing/ Easter break		
10/03 /07	09.00hrs 13.00	Briefing at URCS HQ Briefing and meeting with – Esther Okwanga – Deputy SG – Gertrude Ngabirano (Sida) – Jessica & some URCS Staff Travel to Kalangala	URCS – Jessica Bagenda	EASRO
11/ 04		Meeting branch and BGB in Kalangala Branch, meeting district officials	URCS – Jessica Bagenda	
12/4		Visit project areas in Kalangala – Bbanga & Kasekulo & Bugoma. Travel to Rakai Branch, visit new RC centre	URCS – Jessica Bagenda	
13/4		Meeting BGB, Mukono Branch Visit project areas Travel to Kampala	URCS – Jessica Bagenda	
14/4		Meeting Mukono branch and sub-branch	URCS – Jessica Bagenda	
15/4		Visit project areas in Mukono	URCS – Jessica Bagenda	
16/04/07		Meeting GS Uganda red cross Team travels to Mwanza (TZ) Esther travels to MWZ ex-Dar Briefings in Mwanza and travel to Musoma late afternoon	URCS – Jessica Bagenda Pauline Kilele Regional Coordinator	09.00hrs
17/4		Field Visits in Musoma. Meeting District Gov, branch board, members, visit urban project sites	Simon Chuppa	
18/4		Visit Saragana sub Branch	Simon Chuppa	
19/04		Travel back to Mwanza. Discussions with branch and Chairman and some RMC members. Meeting NGO partners.	TRCS in Mwanza	
20/04 /07		Visit Igoma branch, Igoma primary school, Kisesa branch	TRCS in Bukoba	

21 & 22/ 04 /07	Travel to Bukoba. Team meets with TRCS in Kagera Region: Chairman of the Board, Regional Coordinator, Several NGOs/CSOs/ CBOs & staff Field Visits to sub branches – Muleba and Kimbugu - in Kagera Region	TRCS - Dr Yvonne Swai
23 –25/04/07	Team travels to Kalangala via Masaka to prepare draft report for presentation at SG's Annual conference	Consultant's team
26 /04/07	Team make Prelimiary Draft Report at Annual SG Conference in Kalangala	EASRO/URCS/KRCS/ TRCS/RRCS and BRCS and the Conultants Team
25/05/07	Teams submits final report to the IFRC	Consultants

Annex 6. Terms of Reference for an Evaluation of the Implementation and Impact of the (Red Cross) Lake Victoria Programme 2004–2006

1. Background

1.1 East African community (EAC)/ swedish international development cooperation agency (SIDA) partnership

In 1998, the Secretariat of the EAC in collaboration with the Swedish International Development Cooperation Agency (SIDA), agreed on a need for a coordinated approach to foster sustainable development in the Lake Victoria Basin. A process aimed at establishing a strategic partnership was initiated and on 21 April 2001, an agreement was subsequently signed between the EAC Secretariat representing itself and its member states and the donor community led by the government of Sweden. Amongst the partners from the donor community were the governments of Norway and France, the World Bank and the East Africa Development Bank and the government of Sweden. The partnership would be long term, extending over a period of twenty years and a firm pledge for the first ten years was made at the time signing of the agreement.

Swedish interest in supporting sustainable socioeconomic development in the Lake Basin was inspired by increasing levels of poverty and increasingly worsening health statistics and environmental degradation against a backdrop of the resource endowment of the Basin and the potential for economic growth implied in such endowment. The strategy adopted had two dimensions; on the one hand, it would involve the engagement and full participation of civil society and local communities living around the lake in identifying their needs, their prioritization and in decision making on how best the challenges they faced could be addressed. On the other hand, the strategy would involve building capacity and supporting change process in state institutions particularly in management of land, the development of the small enterprise and business sectors, health, higher education and research.

1.2 East african national red cross societies (EANS)/swedish red cross (SRC) partnership

Recognizing the potential of the well established National Red Cross Societies of the EAC countries for which the lake is a shared resource and the fact that they already had well established Red Cross Branches in the Lake Victoria Basin, in the autumn of 2002, the Swedish Red Cross initiated discussions with the Kenya, Tanzania and Uganda Red Cross Societies on possible ways of making a contribution towards the work of Swedish government/EAC Partnership and its goal. To this effect, on 25 March, 2003, a Memorandum of Understanding (MoU) between the three National Societies individually and through the Eastern Africa Network of Red Cross and Red Crescent Societies

(RC-Net) and the Swedish Red Cross was signed in Musoma, Tanzania. In its role as "architect and monitor of cooperation" within the Red Cross Movement, the International Federation of Red Cross and Red Crescent Societies (IFRC) co-signed the MoU to demonstrate its commitment to support the programme.

On its part, the International Committee of the Red Cross (ICRC) declared its support for the initiative and would be contributing the realisation of its goal in its area of competence.

For details of the roles of components of the Red Cross Movement see Annex 1.

The Lake Victoria programme ("LVP")

The signing of the MOU between the Red Cross partners marked the birth of the LVP. The programme would run for an initial period of three years (2004-2006) following which an evaluation would

be carried out as the point of departure for a further period of cooperation whose duration would be negotiated between the Swedish Red Cross and SIDA. For details of country plans

(objectives, activities, expected results and indicators) in each core areas of intervention carried out under the LVP, see Annex 2.

Overall Goal of the LVP

To improve the quality of life amongst communities in the Lake Victoria Basin through the development of a comprehensive programme of interventions covering Health and HIV/Aids, Disaster Preparedness, Institutional and Local Capacity Development through which to address poverty levels, vulnerability to both natural and man made disasters and susceptibility to health hazards in their environment.

1.3 Background and Rationale for Interventions

The choice of interventions was made against a background of a number of factors which act as constraints to poverty reduction and development in the Basin. The factors are intricately interrelated in such a manner that creates a vicious circle one for the majority of people living in the Lake Basin.

1.3.1 Ecological/environmental factors

Lake Victoria Basin is the largest water mass on the continent; it simultaneously creates a "wetland" prone to floods and a perfect host to vermin and vectors. Both vermin and floods have been known to destroy crops to a degree that has necessitated food aid interventions. In turn and in a typical post floods period, a high incidences of vector borne diseases are not uncommon in all three countries, a combination of these factors render communities in the Lake Basin are vulnerable.

1.3.2 Economic development factors

This vast natural resource is grossly under exploited for example, the fishing industry remains largely informal and in the hands of local cooperatives which with limited technological know how, the work is labour intensive not to mention associated occupational hazards which have has claimed thousands of lives over the years. Consequently, poverty levels are high for at best household incomes are either meagre or irregular and at worst, some households have no income at all following the demise of the breadwinner in a marine accident. In the case of the latter category, a preventable and treatable such as malaria can be fatal for lack of resources to seek treatment.

Kenya provides vital access to the sea port of Mombasa to her through highway which runs all the way from the port through Kenya, across the border into Uganda through to Rwanda and Burundi. However, the highway has created their own problems in terms of people mobility and there is evidence suggesting a positive correlation between people mobility and the rate of spread of the HIV/Aids virus. The prevalence of the scourge is reported to be higher in urban and semi urban settlements along the highway in all four countries that are served by it.

The three East African countries are characterised by a dual model of development characterised by a heavy urban bias thus, rural areas are poorly developed relative to the cities, health and education facilities and other social amenities are often inadequate to cater for the ever growing rural populations. This is evident in the relatively lower literacy, maternal and infant morbidity and mortality rates in the rural Lake Basin communities in all three countries.

1.3.3 Social factors

A normal coping mechanism for a household with no income is doing away with "non-necessities; in a rural setting, one such "non necessity" is often school fees. Understandably, it is highly unlikely that a hungry child will get any utility from attending classes for first of all, he/she often has to walk long

distances to school during which he expends whatever little energy he has left. With little if any energy at all, he/she cannot be reasonably expected to concentrate in class and thus get utility out of school attendance. The result is that children from these poor families drop out of school at an early age and unfortunately, a good education determines future employment prospects and if a child is deprived of education, he/she is doomed to a lifetime of unemployment and poverty. In turn and come the time they establish their own families and with no regular income, the young adults cannot afford to send their own children to school and a pattern of "inherited poverty" spanning across generations emerges. Besides, there is a positive correlation between low literacy levels and high disease prevalence, morbidity and mortality rates due to lack of knowledge and understanding on the causes and effect of disease. The same correlation pattern exists between the low literacy levels and vulnerability amongst children not least because they are often expected to contribute to the family income in whatever way they can, including child labour and prostitution. Finally the scramble for survival has often meant over-exploitation of resources resulting in a reduction in the carrying capacity of the land and consequent food insecurity. A combination of these factors and the impact they have on the welfare of communities was the rationale behind the choice of interventions under the LVP. The interventions are elaborated below.

2. Programme Structural Considerations

All National Societies in the three East African countries had been implementing activities under the four core areas as elaborated in the Federation`s Strategy 2010 viz. Disaster Management, Health, Principles and Values and Organisational Development as such, and given that the challenges facing communities in the Lake Basin could be met through these ongoing programmes, LVP activities were certainly not "donor-driven". On the contrary, the Programme presented an opportunity for the National Societies to "scale up" ongoing interventions in the communities that they had been working with for years and by the same token, communities whose development challenges they knew and understood. Below is a summary of the challenges:

Core Area 1: Health

HIV/AIDS
Disease outbreak
Inadequate water and sanitation facilities

Core Area II: Disaster Management

Environmental/ecological hazards (floods, vermin, vectors)
Marine accidents
Inadequate knowledge on environmental hazards
Inadequate knowledge and skills to cope with disasters
Poorly defined boundaries (land, water resource) ownership squabbles and clashes

Core Area III: Capacity Building Issues (Community level)

High levels of poverty
High illiteracy levels
Poorly developed infrastructure
Core Area III: Capacity Building Issues (Red Cross Branches)
Weak human resource base (salaried staff)
Weak human resource base (members/volunteers) due to poor management systems
Inadequate management and coordination systems and procedures
Inadequate Branch infrastructure, equipment and facilities
Inadequate funding

As mentioned earlier, detailed country plans (interventions: objectives, activities, expected results and indicators) can be found in Annex 2.

3. The Evaluation

3.1 Purpose

The purpose of the evaluation is as follows:

- To assess the relevance Red Cross SIDA support in addressing poverty reduction and development challenges in the region.
- To assess the effectiveness of the regional approach adopted by the Red Cross in addressing poverty reduction and development challenges in the region.
- To determine the extend to which the overall goal of the programme was realised by analysing and determining the degree of the impact of interventions as stated in the objectives, expected results and indicators for each core area of individual country programmes (see Annex 2).
- To determine the degree to which the Red Cross regional programme has contributed to the SIDA Lake Victoria Initiative (LVI) strategy and objectives for poverty reduction and development in the Basin.
- To evaluate the degree to which the partnership/collaboaration between the Red Cross parties (Swedish, Kenya, Uganda, Tanzania and the IFRC) has contributed to the realisation of the overall goal of improving the quality of life amongst communities in the Lake Victoria Basin.
- To assess the degree of adherence of the Red Cross stakeholders to the provisions of the agreement signed between the Swedish Red Cross and SIDA.
- conditions
- To identify potential areas of improvement by the Red Cross partners for future SIDA support (better programming, more effective and efficient approaches to implementation of activities and organizational development).

3.2 Conduct of the evaluation

Stakeholder Involvement

The communities served are at the centre of the evaluation and shall comprise the most important "subjects" of the evaluation. To this effect, the consultants shall gather, accurately document and analyse their views on the relevance of Red Cross interventions, the approach used from identification and prioritisation of needs, planning interventions, resource distribution modalities, implementation, monitoring, formative evaluation through to how the information gathered from the formative evaluation has been used.

Equally important, will be to elicit the views of other stakeholders (NGO`s, CBO`s and local authorities) on the Red Cross interventions, division of labour, coordination mechanisms and the effectiveness thereof.

Finally, the evaluation would be incomplete without eliciting the views of Red Cross stakeholders (East African National Societies, Swedish Red Cross, the Federation and the ICRC) and SIDA/LVI (Nairobi).

At the country level, National Red Cross Societies shall communicate through the IFRC East Africa Sub Regional Office, a focal point/team for the coordination of the evaluation; identification, access to

stakeholders (communities, other CBO/NGO and relevant Government departments) and the organisation of meetings and venues to facilitate the work of the consultants.

Methodology

The evaluation is primarily a qualitative study as such, it is strongly suggested that use be made of a combination of structured (for basic information) and non structured interviews with individuals in the subject groups as elaborated above and focus group discussions with community groups to facilitate the gathering of qualitative information. It will be necessary to cross validate some of the information given by the respondents through desk study and analysis of the Red Cross operational plans and records on vital statistics from local authorities (District Medical, Education Social Welfare, Agricultural Officer etc.). In addition to these suggested instruments, the consultants shall use any other instruments deemed necessary to get as much and as accurate information as possible.

Findings

The findings shall address the main purpose of the evaluation as elaborated earlier.

Recommendations and lessons learnt

The lessons learnt shall address both success stories and facilitating factors; not so successful stories and associated constraints.

The recommendations shall address what can be done even better in the case of success stories; what should be avoided in the case of not so successful stories and how identified constraints can be overcome.

Reporting and the final Report

The consultants shall compile their findings, lessons learnt and recommendations into a written report to be presented to the Red Cross partners through the Federation's East Africa Sub Regional Office within a period of four weeks following the completion of the assignment.

In addition, the Red Cross partners plan to hold their annual LVP conference in Uganda on 25–27 April. The consultants are expected to complete the assignment on or before 25 April, furthermore, they shall present the preliminary findings of the evaluation at the conference.

Sequel to the presentation of the preliminary findings, the consultants shall finalise the evaluation report within a period of four weeks during which both the Red Cross and SIDA shall have the opportunity to study and comment on the final draft before the final report is published.

The report shall remain the joint property of the Red Cross and SIDA both organisation of which shall have the right to share it with whosoever they deem necessary for the further strengthening their partnership for the benefit of communities in the Lake Basin.

The Evaluation team

The evaluation team shall consist of two consultants; one shall be appointed from the East Africa region while the other shall be appointed in Sweden by the Swedish Red Cross; one of the two consultants shall be designated team leader.

During the course of the assignment and to facilitate their work, the consultants shall have two resource persons one each designated by the Red Cross and SIDA.

Key qualifications, competencies and experience required of the consultants are as follows:

– Postgraduate degree in Development, Economics or Social studies

– Minimum of ten years experience in one or a combination the following: design, planning, management and/or policy research on development programmes. Experience in poverty reduction programmes is an added advantage.

– Experience in working with donor funded programmes.

– Traceable record of previous consultancies.

The consultants` suitability for the assignment shall be evaluated according to the criteria elaborated in the "Consultancy Application Summary Form" (Annex 3)

Work Plan and Schedule (See Annex 4)

4. Administrative Considerations

Consultancy fees

This shall be agreed between the Red Cross and the consultant and shall be payable upon the submission of the final report.

Travel costs

The Red Cross shall meet all travel and associated costs (air, road transport, hotel accommodation, per diem at Federation rates and other incidental expenses relevant to the assignment which may be incurred during the course of the assignment)

Declaration

I …….have read, understood and accept the Terms of Reference of this consultancy and offer my services for the agreed remuneration at a daily rate of US$.....per day during the assignment and for a further five days after the completion of the assignment for the purpose of compiling the final report.

I also agree that the final report shall remain the property of the Red Cross and that the organisation may share it with whosoever it deems necessary to further its humanitarian work.

Name:

Signature:

Date: *Place:*

Witnessed: (for the International Federation of Red Cross and Red Crescent Societies)

Name:

Designation:

Signature:

Date: *Place:*

Recent Sida Evaluations

07/31 Business Training for Entrepreneurs in Vietnam. An Evaluation of the Sida-supported Start and Improve Your Business (SIYB) project
Karlis Goppers, Mai The Cuong
Department for Research Cooperation

07/32 Measuring the Impact of HIV/AIDS on Electoral Processes and National Budgets in Africa
Zenda Ofir
Department for Africa

07/33 Maanisha Community Focused Initiatives to Control HIV/AIDS in Lake Victoria Region, Kenya
Alex Kireria, Grace Muriithi, Karanja Mbugua
Department for Africa

07/34 Rättsreform i Paraguay
Juan Faroppa, Tina Lundh
Department for Democracy and Social Development

07/35 Cooperación al Sector de Justicia en Paraguay
Juan Faroppa, Tina Lundh
Department for Democracy and Social Development

07/36 The Swedish Research Cooperation with Ethiopia
Johan Mouton, Torbjörn Fagerström, Adriaan Louw, F. F. Tusubira, Jimmy Volmink
Department for Research Cooperation

07/37 Reconciliation and Development Program (REDES) Sida – UNDP Partnership for Peace in Colombia 2003–2006
Elisabeth Scheper, Anders Rudqvist, María Camila Moreno
Department for Latin America

07/38 The Policy Research Capacity Strengthening to Implement Vietnam's 2001–2010 Socio-economic Strategy Project
Adam McCarty, Mathew Greenwood, Tran Ngoc Diep
Asia Department

07/39 Swedish Support to the Menstrual Regulation Program of Bangladesh
ZA Tahmina Sarker, Nazme Sabina
Asia Department

07/40 Organisations in the Field of HIV/AIDS and Human Rights AIDS Legal Network (ALN) and AIDS Consortium (AC)
Carmel Marock
Department for Africa

07/41 Institutional Cooperation between Furniture Technology Centre, South Africa and Tibro Training Centre, Sweden
Per Hellström, Philip Hirschsohn
Department for Africa

Sida Evaluations may be ordered from:

Infocenter, Sida
SE-105 25 Stockholm
Phone: +46 (0)8 779 96 50
Fax: +46 (0)8 779 96 10
sida@sida.se

A complete backlist of earlier evaluation reports may be ordered from:

Sida, UTV, SE-105 25 Stockholm
Phone: +46 (0) 8 698 51 63
Fax: +46 (0) 8 698 56 43
Homepage: http://www.sida.se

SWEDISH INTERNATIONAL DEVELOPMENT COOPERATION AGENCY
SE-105 25 Stockholm, Sweden
Tel: +46 (0)8-698 50 00. Fax: +46 (0)8-20 88 64
E-mail: sida@sida.se. Homepage: http://www.sida.se