

DREF operation final report



International Federation
of Red Cross and Red Crescent Societies

South Africa: Rift Valley Fever

DREF operation n° MDRZA003
GLIDE n° EP-2010-00080-ZAF
31 March, 2011

The International Federation's Disaster Relief Emergency Fund (DREF) is a source of un-earmarked money created by the Federation in 1985 to ensure that immediate financial support is available for Red Cross Red Crescent response to emergencies. The DREF is a vital part of the International Federation's disaster response system and increases the ability of national societies to respond to disasters.

Summary: CHF 41,159 was allocated from the Federation's Disaster Relief Emergency Fund (DREF) to support the South African Red Cross Society (SARCS) in delivering immediate assistance to some 15,000 people affected by Rift Valley Fever (RVF).

The objective of the operation was to support the National Society Branches to effectively respond to the outbreak of RVF through promotion of hygiene and provision of health education to affected communities, along with distribution of personal protective equipment (PPE) to farm workers in the three most affected provinces: the Free State, Northern Cape and Eastern Cape.

Some 250 farms in three provinces, with more than 1,100 farm workers and 3,000 families (over 15,000 beneficiaries) were reached. Information talks in 18 informal settlements reaching 1,096 homes with over 3,000 people were also held.

All indications are that the operation has helped prevent further infections of RVF among the farming communities. In the last 3 months of this operation, only eight additional human infections and no deaths were recorded. Although attribution is difficult to establish, it is assumed this is in part due to the success of the operation.

The Department of Health (DOH) as well as the Department of Agriculture, Forestry and Fisheries (DAFF) assisted SARCS volunteers to access the farms and conduct health education. However, because DOH officials were engaged in 2010 Soccer World Cup events, access to some of the affected farms was delayed and a two-month extension was granted for completion of the planned activities by 31 August, 2010. Of the DREF funds allocated, a balance of CHF 1,573 (1,559 + 14 PSSR¹) remained unused at the end of the operation and will be returned to DREF.



South African Red Cross volunteers educate farm worker on Rift Valley Fever, and demonstrate how to use the hygiene kits.

¹ Programmes and Services Support Recovery – IFRC's mechanism to recover indirect costs associated with programmes funded by voluntary contributions.

The major donors and partners of DREF include the Australian, American and Belgian governments, the Austrian Red Cross, the Canadian Red Cross and government, Danish Red Cross and government, the European Commission Humanitarian Aid and Civil Protection (ECHO), the Irish and the Italian governments, the Japanese Red Cross Society, the Luxembourg government, the Monaco Red Cross and government, the Netherlands Red Cross and government, the Norwegian Red Cross and government, the Spanish Government, the Swedish Red Cross and government, the United Kingdom Department for International Development (DFID), the Medtronic and Z Zurich Foundations, and other corporate and private donors. The IFRC, on behalf of the National Society, would like to extend thanks to all for their generous contributions.

Details of all 2010 contributions to DREF can be found on: www.ifrc.org/docs/appeals/Active/MAA00010_2010.pdf and for 2011 on: www.ifrc.org/docs/appeals/Active/MAA00010_2011.pdf

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The situation

South Africa has been experiencing outbreaks of RVF since 1999. The Free State, Northern Cape and Eastern Cape Provinces were the most affected by the recent outbreak. According to the National Department of Health report (see table below), by 30 September 2010, 237 confirmed cases of RVF and 26 deaths were reported. The cases ranged in age from 1 – 86 years (median 43 years), and the great majority (86 percent) were male. The Free State with 123 cases and Northern Cape with 76 cases were the worst affected provinces, with 11 deaths each from the disease.

About 94% of the 237 confirmed cases were reported in persons with occupations regularly in direct contact with animals. Over 50,000 animals were estimated to have been infected, with over 1,500 reported to have died from RVF. The distribution of human cases and deaths by province is shown in the table below.

Province	Number of confirmed cases	Number of deaths reported
Eastern Cape	17	1
Free State	123	11
Gauteng	0	0
KwaZulu-Natal	0	0
Limpopo	0	0
Mpumalanga	0	0
Northern Cape	76	11
North West	9	2
Western Cape	11	1
Unknown	1	0
Total	237	26

Coordination and partnerships

The South African Red Cross Society has worked very closely with the Department of Health (DOH) and the Department of Agriculture Forestry and Fisheries (DAFF). The training of volunteers and community members on hygiene promotion and health education was conducted jointly with the DOH in Northern Cape and Free State Provinces. DAFF works very closely with the farmers' consortium, AGRIFORUM, through which permission is granted to SARCS via the DOH to visit affected farms.

Additionally, SARCS has regularly participated in coordination meetings with representatives from the national DOH and WHO. Red Cross has attended the monthly meetings with the Department of Health in the two provinces, and at the National DOH Multi-sectoral Outbreak Response Team.

The IFRC Southern Africa Regional Representation office provided technical and funding support to assist SARCS in responding to the RVF outbreak.

Red Cross and Red Crescent action

The National Society was actively involved in health education and the provision of infection control kits to the affected people that include those working at the farms and small scale farmers. The response operation was implemented in the three most affected provinces of the Free State, Northern Cape and Eastern Cape.

Achievements compared with planned objectives

Emergency Health (food and basic non-food items)

Objective: To reduce health risks, morbidity and mortality resulting from the emergency through the provision of health promotion, and preventive, community-level health education to farm workers in affected regions for three months.

Activities planned:

- Conduct hygiene promotion campaigns within the affected population, focusing on behaviour change.
- Train 50 volunteers in community-based health and First Aid (CBHFA) approach
- Equip 50 community-based volunteers with protective clothing (gloves, masks, apron, etc.) and support required to carry out awareness activities (e.g. fuel, transport, stipend, communication).
- Provide 50 volunteers with logistical support to carry out awareness activities
- Distribute and support the use of personal protective equipment (gloves, masks and apron) among 3,000 farm workers and informal settlement residents.
- Conduct hygiene promotion campaigns within the affected population, focusing on behaviour change

Operation modalities:

- Volunteers received finance for their travelling to farms on a daily basis. In some areas where the farms were too far, transport was hired to take the volunteers to the farms and back. The target Branches also made use of their own vehicles to transport the volunteers to the farms. Each volunteer received a daily stipend totalling to R500 for the twenty days of the campaign. In all, 1,100 PPE kits were handed out to farm workers and their families.

Achievement:

- Altogether, 80 volunteers were trained (30 more volunteers in 3 health districts in the Free State province). The trained volunteers helped with the hygiene promotion campaigns. The hygiene promotion campaign enabled the volunteers to help the farm workers and their families to implement infection control in their homes as well as safer water and sanitation practices. Some 250 farms in three provinces, with more than 1,100 farm workers and 3,000 families (over 15,000 beneficiaries) were reached. Information talks in 18 informal settlements reaching 1,096 homes with over 3,000 people were also held.

Impact:

- All indications are that the operation has helped prevent further infections of RVF among the farming communities. In the last 3 months of this operation, only eight additional human infections and no deaths were recorded. Although attribution is difficult to establish with certainty, it is assumed this is in part due to the operation, especially the community sensitization by trained volunteers and distribution of hygiene kits designed to protect farm workers against RVF and other water and food borne diseases.

Other positive outcomes include:

- The operation facilitated strengthened working relations among SARCS, DAFF, DOH, community leaders, councillors and farmers.
- The protective clothing was well received, as evidenced by the continued use by the beneficiaries.
- Farm workers demonstrated high level of awareness of the consequences of contracting RVF and other diseases.
- Most farm workers were unwilling to go to clinic for treatment due to the distance between their homes and health facilities. The close working relationship between SARCS and the local clinics has

helped the Red Cross staff and volunteers to refer the vulnerable people to the health facilities for tests and medical attention.

Challenges:

- The farms proved to be very far from one another, and difficult to reach by normal transport.
- The farm workers evidenced serious health problems and need regular visits by health practitioners.
- The farm workers in general are isolated from other communities, and do not have access to education, health and social services the government provides.
- It was however difficult to get farmers to give their workers time off to attend health education sessions provided by SARCS.
- The farmers and workers, especially those on small farms near the towns, do not want to change their traditional practices. They do not believe that meat can spread diseases. The volunteers had difficulty in persuading about 10 small scale farmers to change the way they slaughter animals.
- The people in informal settlements buy meat from vendors on the road. In most cases, these are stolen sheep or cattle. It was also difficult to get the vendors to disclose if the animal died before the slaughter, or if it was a healthy animal which belonged to them.
- During the Soccer World Cup hosted in South Africa in 2010, it was difficult to access some of the affected farms as the DOH officials were engaged in World Cup activities.

How we work	
<p>All International Federation assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and is committed to the Humanitarian Charter and Minimum Standards in Disaster Response (Sphere) in delivering assistance to the most vulnerable.</p>	
<p>The International Federation's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.</p>	<p>The International Federation's work is guided by Strategy 2020 which puts forward three strategic aims:</p> <ol style="list-style-type: none">1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.2. Enable healthy and safe living.3. Promote social inclusion and a culture of non-violence and peace.
Contact information	
<p>For further information specifically related to this operation please contact:</p> <p>In South African Red Cross Society: Mandisa Kalako-Williams, Secretary General; Email: mandisak@redcross.org.za; Phone: + 27 12 431 2000/02/04/05; Fax: +27 12 431 2006</p> <p>In IFRC Southern Africa Region: Ken Odur, Regional Representative, IFRC Africa Zone Johannesburg, Email: ken.odur@ifrc.org Phone: +27 11 303 97 00, Fax: + 27 11 884 3809.</p> <p>In IFRC Southern Africa Region: Dr Michael Charles, Malaria & Community Health Delegate, Email: michael.charles@ifrc.org; Phone: +27 11 303 97 00, Fax: + 27 11 884 3809.</p> <p>In Geneva: Christine South, Operations Coordinator for Southern Africa region; Email: Christine.South@ifrc.org; Phone: +41 22 730 4529; Fax: +41 22 730 0395;</p> <p><i>For Performance and Accountability (planning, monitoring, evaluation and reporting (enquiries):</i></p> <p>In IFRC Africa Zone: Robert Ondrusek; Planning, Monitoring, Evaluation and Reporting Delegate, Johannesburg; email: robert.ondrusek@ifrc.org; Phone: Tel: +27 11 303 9744; Fax: +27 11 884 3809; +27 11 884 0230</p>	

[<final financial report below; click here to return to the title page>](#)

International Federation of Red Cross and Red Crescent Societies

MDRZA003 - South Africa - Rift Valley Fever

Final Financial Report

Selected Parameters	
Reporting Timeframe	2010/4-2011/3
Budget Timeframe	2010/4-2010/7
Appeal	MDRZA003
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
A. Budget	41,159					41,159
B. Opening Balance	0					0
Income						
<u>Other Income</u>						
<i>Voluntary Income</i>	41,159					41,159
C6. Other Income	41,159					41,159
C. Total Income = SUM(C1..C6)	41,159					41,159
D. Total Funding = B + C	41,159					41,159
Appeal Coverage	100%					100%

II. Balance of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
B. Opening Balance	0					0
C. Income	41,159					41,159
E. Expenditure	-39,600					-39,600
F. Closing Balance = (B + C + E)	1,559					1,559

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Reporting Timeframe	2010/4-2011/3
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III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A							B	A - B
BUDGET (C)		41,159					41,159	
Supplies								
Clothing & textiles	6,100						6,100	
Water & Sanitation		73				73	-73	
Other Supplies & Services	547	6,541				6,541	-5,994	
Total Supplies	6,647	6,614				6,614	33	
Transport & Storage								
Storage	2,500	2,373				2,373	127	
Transport & Vehicle Costs	9,500	1,708				1,708	7,792	
Total Transport & Storage	12,000	4,082				4,082	7,918	
Personnel								
National Staff	8,330						8,330	
National Society Staff		11,568				11,568	-11,568	
Total Personnel	8,330	11,568				11,568	-3,238	
Workshops & Training								
Workshops & Training	6,220	6,196				6,196	24	
Total Workshops & Training	6,220	6,196				6,196	24	
General Expenditure								
Travel		776				776	-776	
Information & Public Relation	1,700						1,700	
Office Costs	1,000	1,657				1,657	-657	
Communications	2,000	2,679				2,679	-679	
Financial Charges	750	-52				-52	802	
Other General Expenses		3,650				3,650	-3,650	
Total General Expenditure	5,450	8,710				8,710	-3,260	
Programme & Service Support								
Programme & Service Support	2,512	2,429				2,429	83	
Total Programme & Service Support	2,512	2,429				2,429	83	
TOTAL EXPENDITURE (D)	41,159	39,600				39,600	1,560	
VARIANCE (C - D)		1,560				1,560		