

British Red Cross, Sierra Leone Community Health and Ebola Recovery Programme (MYG034.15)

Summary of End of Year 2 Report

Introduction

Summary

In November 2017 British Red Cross provided an annual report for MYG034.15 this report covered the period of July 2016 – July 2017.

This report explained that the year two of the project had been delayed. These delays were mainly because of financial capability problems in Sierra Leone Red Cross, which British Red Cross have been working to resolve for most of this year. This has now been achieved as a result of direct engagement by the British Red Cross in training and bringing in changes at Sierra Leone Red Cross, including new staff.

Along with the Annual Report the British Red Cross provided an updated plan of action for the period of July to February 2018 which the External Relations team agreed to as there was no fundamental change to the original project delivery plan other than timing. The activities from July to February were funded by the Isle of Mans year two instalment of the Multi-year Grant.

British Red Cross have now spent 90% of their year two funds and have requested the third and final instalment of £91,222.14 from the Isle of Man Government in order to complete the project.

British Red Cross have provided an updated

Year Two Activities:

There were three primary challenges causing delays to the programme in 2017 resulting in less progress against each of the five objectives than had been expected. First the re-designed programme commenced later in 2016 than planned. Second, there was late and incomplete budgeting, planning and financial reporting on the part of SLRCS. Third, the extension of the rainy season well into November 2016 made it difficult for volunteers to carry out scheduled household visits or to procure and build hardware.

Objective one: The capacity of target population to reduce vulnerability to communicable diseases (Malaria, HIV) is increased

Planned activities under this objective were not completed due to the aforementioned issues of dispersing funds. This meant that the procurement of monitoring tools could not take place.

Activities under this objective have been rescheduled to later on in 2017.

Objective two: The preparedness of SLRCS to respond to community health emergencies is increased

Planned activities under this objective were not completed due to the aforementioned issues of dispersing funds due to the late release of funds, some activities under this objective had to be delayed to later on in 2017.

Objective three: Target communities have improved practice of and access to reproductive, maternal and child health with emphasis on young women and men

Despite the unavailability of funds, over 6,500 people attended the national immunization day event supported by 280 volunteers from each of the 14 branches participated in the National Immunisation Day campaigns organised by the Ministry of Health and Sanitation (MoHs) in April 2017.

Objective four: Target communities and schools have improved access to and use of safe water supply and sanitary facilities

Due to the extended rainy period at the end of 2016 and the delays in the release of funds at the start of 2017, the construction of latrines and the rehabilitation of wells had been postponed and now rescheduled for the last quarter in 2017 and early 2018 which should be within the dry season. Construction of latrines is not possible during the rainy season due to the fact that the water table rises (increase in volume) during the raining season which makes digging pits for latrines and water wells very challenging.

Since the distribution of sanitary kits is a complementary to the WASH hardware (construction of latrines), this has been postponed to the fourth quarter when the construction of latrine activity will be commence.

Community participation in the target villages in activities under this outcome was not as good as hoped for as it was the peak period for farming activities.

The procurement process for 3,400 tippy taps is on course, but the construction of these taps has not yet taken place. The funds for the procurement of these Tippy taps will be sent to the 14 SLRCS operational branches where final procurement and distribution of the Tippy taps will be made to the most vulnerable.

Objective five: The capacity of SLRCS (HQ and branches) to deliver quality health programmes is increased

Field Health Officers and coaches in the 14 operational branches conducted visits to targeted communities in order to coach staff and volunteers to help improve their skills in both activity implementation and best practice around data collection, to ensure that monitoring data is accurate and recorded consistently across locations. 112 villages across the 14 branches have been reached.

It was challenging to train mothers and fathers clubs in gender and diversity promotion (including prevention of Sexual and Gender Based Violence) due to peak farming season when it was difficult to get their full cooperation and attention. The training therefore has been postponed to November 2017, after the peak farming period, when the crops will have been harvested.

Year Three activities,

Due to the delays to grant activities over this reporting period BRC worked with SLRCS to provide an implementation plan for the period of June 2017 to February 2018, these were simply a delay to the pre agreed project delivery plan and were agreed by the External Relations Team in June.

British Red Cross have now produced the plan of action for the
of financial capability problems in Sierra Leone Red Cross