**NACRO** 

New Apostolic Church Relief Services

# strategic 2014-2017 plan



















# **ABOUT US**

# **NACRO**

#### INTRODUCTION

NEW APOSTOLIC CHURCH RELIEF ORGANISATION (NACRO) is a charity organisation of the New Apostolic Church District Apostle Area (NACDAA) 28, which covers Zambia, Malawi and Zimbabwe. It was first registered in Zambia in 2002 under the Societies Act. NACRO aims to promote developmental activities among the community where it operates.

#### VISION

"NACRO envisages a socially and economically equitable free thinking and self sufficient community in DAA 28 and other and other areas where it operates".

#### **MISSION**

"A faith based organization that seeks to transform needy communities in the areas it operates into self sustenance through improved livelihood and food security, access to education, health services and acquisition of survival skills."



#### CORF VALUES

NACRO is a faith based Organisation with strong Christian beliefs with a duty to touch several lives without any form of segregation or discrimination in communities it operates It is based on this background that NACRO has the following core Values and Beliefs:

- 1.Fairness
- 2.Honesty
- 3.Integrit
- 4. Non discriminatory
- 5. Faithfulness
- 6.Equality

The next section introduces the five strategic directions that NACRO will be pursing in the coming three years. Most of these areas are not necessarily new to the NACRO.

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#### **FOREWORD**

New Apostolic Church Relief Organization (NACRO) then Henwood Foundation was established as a charity organisation for the New Apostolic Church in Zambia, Malawi and Zimbabwe with the aim of contributing to the improvement in the livelihoods of many rural communities.

This strategic plan builds on the previous work that the Organisation has been engaged in since its inception in 2002. The future focus of the Organistaion is guided by five overarching strategic directions that are closely interrelated. The strategic areas range from health, education; and livelihoods, nutrition and food security. Others are disaster risk reduction and mitigation; and organisational development. All these strategic areas will be implemented in the three countries that make up the District Apostle Area 28 (Zambia, Zimbabwe and Malawi). The activities will not be exclusive of each other; instead, the Foundation will strive to promote complimentarily of each of the activities in each catchment area.

The development of this strategic plan involved wide consultations from the key stakeholders of the Organisation in Zambia, Zimbabwe and Malawi. The development also involved an analysis of the current state of affairs in all the six strategic areas that will be the focus of this plan. I am convinced that the strategies that have been identified are the best that the Organisation has used in all its life period. The strategies include a consolidation of the previous work, and a build up on the existing structures to take advantage of the existing opportunities, both internal and external to the Organisation. The role that the New Apostolic Church will play in consolidating the Organisation in all apostolic areas has been enhanced in this plan. The aim is to align the Organisation's operations close to the church in order to take advantage of the strong church backbone.

This plan also lays down the strategies that will be used to strengthen the internal capacity of the Organisation so that it can effectively and efficiently implement all the planned activities. NACRO is committed to strengthen its accountability (both financial and programmatic) to its constituencies and stakeholders. To this end, specific focus has been put on improving the Governance and Management aspects of the Organisation.

Finally, I would like to invite you to take part in the implementation of this strategic plan. I urge you to read this document and find one or two activities that you will help to implement, either through funding, volunteering or in the activities. God Bless You All.

New Apostolic Church Relief Organisation (NACRO) Board Chairperson

#### **ACKNOWLEDGEMENTS**

The development of this strategic plan involved the input and consultation of many people and stakeholders. NACRO is very grateful and indebted to them variously and individually.

Specifically, we would like to appreciate the District Apostle who spared his time to share with us on his vision of how he would like to see the future the Organisation. We are also grateful to all the board members who were very willing to share their experiences in shaping the future the organisation. Others that we are very grateful for their input are the Apostles, District Elders and ordinary members of NACRO who had plenty to share and suggest. We value all your input, which has helped to give strategic direction to this plan.

Finally on the long list of appreciations, I would like to mention the staff of the Organisation. Your tireless efforts in developing the various sections of the plan have borne fruit as evidenced by this plan. The technical input and guidance of the external consultant is also appreciated.

New Apostolic Church Relief Organisation Executive Director

## **BACKGROUND**

# **NACRO**

New Apostolic Church Relief Organisation (NACRO) is a charity organisation of the New Apostolic Church District Apostle Area (NACDAA) 28, which covers Zambia, Malawi and Zimbabwe. It was first registered in Zambia as Henwood Foundation in 2002 under the Societies Act. HF aims to promote developmental activities among the communities where it operates.

#### **ACTIVITIES IMPLEMENTED**

Since its inception in 2002, the Organisation has implemented various activities focusing on HIV/AIDS prevention, home based care, women empowerment, nutrition, water and sanitation.

Others include; OVC education support, health and education infrastructure development, sustainable agriculture and small livestock.

#### **PARTNERS**

The Organistation has worked with several partners including NAK-karitativ, New Apostolic Church International (NACI), New Apostolic Church 28 (NAC28), Golden Valley Agriculture Research Trust (GART), United Nations Development Progamme (UNDP), President Emergency Plan f AIDS Relief (PEPFAR), Churches Health Association of Zambia (CHAZ), Pact Zambia and Community Response to HIV and AIDS (CRAIDS), HELP (Germany), Habitant (Germany) Kickstart, Ministry of Community Development Mother and Child Health and Livestock Development and Animal Health Project.

#### LAST STRATEGIC PLAN

The last strategic plan for the Organisation covered the period of 2008 to 2012. A new plan had not been developed at the expiration of this period; instead a bridging plan covering the period of June, 2014 to July, 2017 has been developed. A full process of developing a new strategic plan will start in 2016. Therefore, this plan still borrows heavily from the recently ended strategic plan, since the full process of developing a new plan was not done for this bridging plan. This strategic plan is meant to make it easier for the Organisation to implement the activities in the coming three years. Many of the planned activities in the previous plan were implemented, but also there were many others that were not achieved. Therefore, this plan presents the activities in such a way that it is easy to implement and monitor them. The revision of this strategic plan was restricted to the strategic directions and log frames, which can be used in developing detailed annual plans and action plans.

# STRATEGIC DIRECTIONS



# **NACRO**

The following five strategic directions and the subsequent objectives and strategies will be the main guiding pillars where NACRO will focus the activities in the three years of the extended strategic period. These include Education, Health, Livelihoods, Food and Nutrition security, Disaster mitigation and relief and Organisational and Institutional Development of the Foundation itself. Currently, the foundation has ongoing activities in six provinces in Zambia, six provinces in Zimbabwe (mainly Mashonaland region) and three regions in Malawi.

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During the extended three year period, Organsiation will continue operating in the same regions and Provinces and in addition activities will be started in two more Provinces in Zambia. The organisation will also start activities in Matabeleland region of Zimbabwe. Most of the work will continue to be done by the volunteers at the Provincial, District and community levels. The role of the Organisation's secretariat will be to coordinate, capacity build and monitor most of these proposed activities.

One of the key steps in the implementation of this plan will be the awareness creation of the planned activities to all the relevant structures that will be involved in the implementation process. A robust M&E framework with clear indicators and targets will be developed as an integral part of this Strategic plan. Routine data and statistics will be collected from across the programme areas to feed into the M&E system. The strategic goal and the details of each strategic direction, together with the objectives and strategies are presented hereafter.

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## STRATEGIC GOAL

# **NACRO**

The goal for this three year strategic plan is as follows:

"To contribute to the improved lives of the needy and disadvantaged people in DAA 28".



The focus of the strategic plan will be on the vulnerable and poor community members. NACRO will endeavour to select the most needy in the communities to be the beneficiaries of the various programs that will be implemented by the Organisation. The areas of improvement will include health, education and vulnerability. The rest of the strategic directions are presented below.











## **Strategic Goal:**

Improved lives of the needy and disadvantaged people in DAA 28

#### Strategy1: Increase access to Education

Strategy2: П Improve the Health status of Vulnerable

#### Strategy3: Improve Household Income, Nutrition and Food Security

**Strategy4:** Disaster Mitigation and Risk Reduction

#### **Strategy5:**

Organisational Development and Institutional Strengthening of NACRO

#### **INCREASE ACCESS TO EDUCATION**

# Zambia Context



The main challenges facing the educational sector in Zambia are around access to and quality of education. The core barriers to education are geographical isolation,



distance to schools, cost of education, gender disparities and high levels of poverty. The poor people are more likely to face barriers in accessing both pre and primary education. According to the ZDHS 2007, the majority of pre-primary age children who were not attending school were in rural areas – 78% rural males and 76.4% females while only 44.9% male and 47.7% female did not attend in urban areas (and most of these are from the urban poor). At the higher education level, only 11% of males in urban areas and 2% in rural areas had completed secondary education compared with 7% of females in urban and 1% in rural areas.

The cost of education remains a big barrier to access education, particularly at high school level. The poor are usually the most affected and therefore highly unlikely to progress to high school after basic school. The Ministry of Education has made attempts to address this inequity. In 2010 they introduced a policy allowing all pupils with a pass in 5 subjects to proceed to grade 10. However, the impact of this policy has been minimal due to several factors. The free education policy also has limited impact. This is so because while tuition in schools is free, there are other school costs related to school management which in some cases have become a barrier. Most of the increase in the Government spending to Education is spent on teacher remuneration and not on learning improvement. Until 2008 when the Ministry developed the Infrastructure Operational Plan (IOP) to guide construction of school infrastructure, there had been no new high schools built for over 15 years, due in part to a deliberate focus on basic education.

#### RATIONALE Malawi Context

the erratic allocation of teachers to schools, with 42% of the teachers not allocated based on the number of students in public schools and poor accountability. Primary completion rates tapers off at 35% of those who enter grade one, largely because their families cannot afford to meet the school requisites. The 2008 Welfare and Monitoring Survey listed the following as being some of the key reasons for the high school dropout rates: schools being uninteresting to pupils, long distance to the nearest school, lack of food and early marriages for girls.

The Free Primary Education policy has caused other problems to the current capacities of the primary education sector including inter alia: lack of infrastructure, high pupil classroom ratios and high teacher pupil ratios. In addition, the low participation of parents and guardians in school governance and decision making processes within the schools makes it difficult to hold school authorities accountable in the delivery of quality education.

Access to Primary Education -Malawi has one of the highest youth populations in the SADC region, with 37% of the people below the age of 16 years. Although the population growth rate for this age group is projected to decrease, the primary school age-group (6 to 13 years old) will increase by 20% between now and 2018. Primary school places for 4.8 million children will be needed by 2018 if universal primary education is to be reached before then. This implies that there will be 45% increase from the 3.3 million primary school pupils enrolled in 2008. The challenge is the ability of the Government to meet this gap. In addition, the effects of HIV and AIDS are making it difficult to sustain the support to the children (especially orphans) due to few people supporting large numbers of dependants in schools.

the end of the primary level. Pregnancy is also a major concern responsible for 4% of the total girls dropping out within the primary school level; starting at 2% in Standard 4 and reaching 21% in Standard 8.

Up to 43% of girls get married before the age of 19 years, indicating that the scale of early marriages causes the low transition rates of pupils from primary to secondary school. Of these, close to 3% get married between the ages of 12 and 14 years. Information from EMIS 2007, states that 69% of girls attending Standard 8 are over-age (more than 13 years old), with 22% being over 16 years. Grade repetition, at 22% also contributes to children dropping out of school. Educational continuity is an issue all over the country. Almost 30% of the poor children do not even start primary school. The teacher to pupil ratio appears to have worsened between the period 2002-2010, while pass rates have fluctuated around 70%, reflecting to a certain extent declining quality of education.

#### RATIONALE Zimbabwe Context



In Zimbabwe, the situation of children is influenced by many factors including poverty, the negative impact of HIV and AIDs, the deterioration of the welfare and justice systems, violence, exploitation and abuse of children in families and communities. HIV/AIDS has caused a surge in the number of Orphans and Vulnerable Children (OVCs) in Zimbabwe. It is estimated that that the pandemic is responsible for close to 70% of all the OVCs (who were estimated to be a million in 2006). The Zimbabwe Rural Vulnerability Assessment conducted by UNICEF in 2010 shows that over 250 000 households (including 700 000 children) live in extreme poverty and are food insecure.

On the other hand, the primary school enrolment has been consistently high in Zimbabwe. The Net Enrolment Ratio (NER) increased from 81.9% in 1994 to 98.5% in 2002. However, there has been a gradual decrease since 2003. The 2009 Multiple Indicator Monitoring Survey (MIMS) recorded a NER of 91%. The disaggregated data by gender shows a good balance between boys and girls at primary school level. In 2009 the enrolment rate was at 50.5% girls. Although enrolments have remained high, completion rates deteriorated over the years, falling from 82.6% in 1996 to 68.2% in 2006. In 2009, the completion rate was still at 70%, with boys recording a lower rate than girls.

The economic situation for the average Zimbabwean family has worsened during the past decade. This has had a direct negative impact on their ability to send their children to school and pay for school fees and uniforms. In this worsened economy, there is greater pressure on children to contribute to the family economy in order to make ends meet.



Malawi is unlikely to meet the MDG goal of **universal primary education** by 2015 due to several reasons including the following: the high number of school dropouts, the high pupil/teacher ratios,

Early marriages are a major problem particularly for girls. It is responsible for 9% of the dropouts in primary schools. It increases roughly from standard 5, ranking 18% and reaches 41% at A key reason behind the high dropout rates of the last ten years can be attributed to poor access to food which results in many children failing to have enough food to eat in order to be able to manage school activities. Furthermore, the achievement of the Universal Primary Education is hampered by the long distances (more than five kilometres in each direction) many children in rural areas have to cover to reach the nearest schools. This discourages many pupils who end up dropping schooling altogether. During the period of this strategic plan, Organization will contribute to increasing access to education of the vulnerable people through scholarships support, psychosocial support, nutrition as well as construction of infrastructures for community schools and Early Childhood Care Education and Development (ECCD). ■



## 2

#### IMPROVE THE HEALTH STATUS OF THE VULNERABLE

#### RATIONALE Zambia Context



HIV and AIDS continue to compound poverty and vulnerability, with high geographical and gender variations. Prevalence rates in urban areas are twice those in rural areas. Women bear disproportionately higher rates of infection than men (16.1% for women / 12.3% for men). High vulnerability of women and girls is associated with poverty, Gender Based Violence (GBV), economic and social status. The number of children orphaned by HIV and AIDS is estimated to be over 1.3 million. Service levels have remained low with only 12% of orphans and vulnerable children having access to any form of support (ZDHS-2007).

The low population density contributes to significant challenges in the delivery of basic health services. Current estimates suggest that 226 new adult infections occur each day. 10% of new infections are a result of transmission from mother to child and 90% are driven by the following factors: multiple and concurrent sexual partners, low and inconsistent condom use, low levels of male circumcision, mobility and labour migration.

In the past 10 years, Zambia has succeeded in scaling up AIDS services countrywide through a decentralised public health system in all the districts of the country. Access to treatment has increased for those who

need it, with over 344,000 (78%) receiving Anti-Retroviral Treatment in 2010. 58% of the people on ARVs are women and 42% are men. Paediatric treatment is lagging behind with only 28% of children in need of ART accessing it.

The most recent estimates (2005) show that only 13% of rural households in Zambia had access to proper sanitation. On the other hand the 2010 LCMS indicates that 62% of the households in Zambia had access to safe drinking water. The poor people have a much lower access of 49%, while the rural households had 50% access

#### RATIONALE Malawi Context



In Malawi, Maternal mortality remains very high at 807 per 100,000 live births. The country will not achieve the MDG target related to the maternal mortality indicators by 2015. This is mainly due to direct obstetric complications while it is also compounded by HIV and AIDS as well as malaria.

The key underlying causes are poor access to quality health care services, poor health seeking behaviours, teenage/early /unwanted pregnancies, poor child spacing, inadequate access to comprehensive family planning services both at community and facility level and limited access to sexual and reproductive health

education and other related services. Although Malawi will achieve the MDG goals on infant and child mortality; child mortality rate of 122 per 1000 live births and infant mortality rate of 69 deaths per 1,000 live births remain high. 19% of this mortality rate is associated with poor breastfeeding practices during the first 6 months of life translating into

an estimated 8,000 infant deaths per year. The rest of the children are dying from malaria, Acute Respiratory Infections (ARI), diarrhoea, malnutrition and immunizable diseases. Malaria is ranked amongst the top three killer diseases. Although the death rate from malaria has reduced from 5.6% in 2004 to 3.4% in 2009, the slight decline is due to government's commitment by promoting the establishment of village clinics to enable children access treatment within 24 hours and its provision of free Long Lasting Nets (LLNs) for pregnant women and newborn babies. Malaria is a major cause of anaemia in under five children and responsible for 40% of all under five hospitalizations and 40% of all hospital deaths. Many children die from malaria because of low usage of Insecticide Treated Nets (ITN) in the country.

According to the MDG review of 2009, only 24.7% under five children slept under an ITN. Malawi has one of the highest HIV and AIDS prevalence rates in Africa. Since 2007, the prevalence rates have stabilized at 12% among the adults of 15-49 years old. About 1 million Malawians are living with HIV, including approximately 100,000 children below 15 years. Close to 500,000 children are orphaned from AIDS related causes. Currently, 60% of new cases of HIV occur among young people 15-24 years (with young women three times more likely to be HIV positive than their male counterparts) and about 2.1% of adolescents in Malawi are living with HIV and AIDS. The prevalence is much higher among adolescent women (3.7%) than it is among adolescent men (0.4%) because women start getting the infection at a younger age than men.

Malawi has made tremendous progress in improving access to safe drinking water and appropriate sanitation

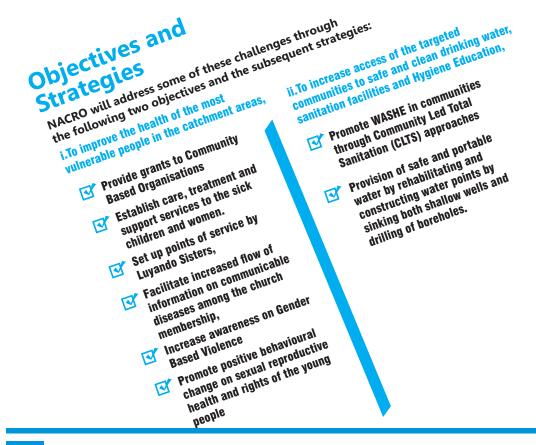
Access to safe water and sanitation has been reported at 80% and 94% respectively. However, 25% of the rural communities do not have access to safe water supplies and 30% of the water points are not working at any given time largely due to weak operation and maintenance, unavailability of spare parts in most rural communities, theft and vandalism. In the urban areas, 6% of the population do not have access to safe water sources, and 18.1% of all schools use water from unprotected sources. In Malawi, 11% of the population still defecate in the open and 43% of households in the urban areas share sanitation facilities while 27% share facilities in rural areas. Access to improved sanitation remains a challenge with 54% of the population in rural areas and 35% in urban areas having no access to improved sanitation.

#### RATIONALE Zimbabwe Context

The situation of water and sanitation has deteriorated over the years in Zimbabwe. It is estimated that in 2008 up to 48% of the population was still using open defecation, predominantly through the bush. Until the 1990s, Zimbabwe maintained a sophisticated water resource management system and a high level of water and sanitation services.

All these services suffered significant neglect over the past decade resulting in significant loss of lives caused by poor sanitation and unclean drinking water. The estimates show that by 2008 only 46% of the population had access to clean and safe drinking water and 30% to improved sanitation facilities. During this strategic plan period, NACRO will provide direct health services to the most

vulnerable community members in the catchment areas (including the HIV/AIDS persons and OVCs), as well as nutritional support and capacity building. In an effort to improve access to safe drinking water and improved sanitation, the foundation will focus on rehabilitation and construction of water wells and promotion of WASHE in the communities.





# IMPROVE HOUSEHOLD INCOME, NUTRITION AND FOOD SECURITY

#### **RATIONALE**

#### **Zambia Context**



Agricultural households tend to be characterised by low productivity with many unable to sustain their livelihoods. The main reasons for this are poor agricultural practices, geographical isolation, inadequate access to credit and agricultural markets and information. The dependence on maize, particularly among small scale farmers, remains very high. Maize is used as both a staple food crop and a cash crop.

As a source of income, Maize has a lot of risks, such as poor and unreliable markets and low prices in outlying areas. Farmers rarely get a real market value for their crops. On the other hand, incomes from the farm enterprise are very low, because there is very little value addition done to the produce. The farm products are sold in their raw forms, at below market prices. The limited knowledge and skills in entrepreneurship and the casual approach to farming are all factors that cause the farm incomes to be very low.

Zambia is one of the 22 African countries that suffer from the burden of under nutrition for children under five years old. Chronic malnutrition (stunting) is one of the highest in the world, estimated at 45% (more than one million) of the under five children, while 5% are acutely undernourished (wasted) and 15% are underweight.

In addition, vitamin A deficiency among the children is estimated to be 53%, iron deficiency anaemia at 46% and 13% are born with low birth weight (ZDHS 2007). Micronutrient deficiency is high among pregnant and breastfeeding mothers as well. Malnutrition is a consequence of many factors in Zambia. Key among them is the care, food and health factors.

Poor infant and child feeding practices due to lack of resources or knowledge of caretakers, coupled with illnesses such as diarrhoea, pneumonia, malaria and HIV/AIDS are immediate causes of malnutrition. Other underlying causes include poverty, household food insecurity, unsanitary health environment, illiteracy, social norms and emergencies.

A high proportion of households in Zambia (both urban and rural) suffer from either chronic or transitory food insecurity. Food security for the rural households is dependent on climatic conditions as well as access to productive farming inputs and implements. It is also negatively affected by scarcity of productive labour, inappropriate technology, limited markets and high disease burden on small holder livestock. Another factor affecting nutritional status of people in Zambia is the food consumption pattern. In 1994, the daily per capita energy intake in Zambia was estimated by FAO to be 1,954 calories, compared to the recommended world intake of 2,300. Food consumption patterns in Zambia are poor, characterised by low frequency of food intake (one or two meals per day), lack of variety in the diet (70% energy) and consumption of low nutrient dense foods. These practices are a result of low food availability, accessibility and cultural feeding practices which emphasises on single food consumption (maize meal) as well as lack of education and awareness on nutrition.

#### RATIONALE Malawi Context



The integrated household survey of 2000 indicates that 65% of the country's population is poor, with the incidence of poverty higher in rural areas (66.5%) than in the urban areas (54.9%). Over 85% of the country's population live in rural areas. The major occupation of most Malawians continues to be subsistence agriculture which is beset with a lot of uncertainties concerning availability of food throughout the year. The food insecurity is caused by many factors including low farm productivity, infertile soils and over cultivation on the same pieces of land year in year out. Developing and sustaining productive small enterprise in the formal and informal sector continues to be difficult for most Malawians due to poor markets, lack of technical know-how and limited access to credit facilities.

A Participatory Livelihood Assessment conducted by CARE Malawi in 2005 revealed that lack of access to credit by the rural poor, lack of access to capital for farm inputs, high interest rates, lack of access to good markets and limited incomearning opportunities makes the rural poor susceptible to economic shocks and stresses.

Apart from the deteriorating social and economic issues, gender inequalities (some of which are influenced by cultural trends) continue to reinforce vulnerability of Malawian women and young girls. Traditional social values and financial hardships put pressure on women to marry at an early age, and begin bearing children. The onset of HIV/AIDS has pushed women into the roles of both caregivers, and major bread winners of their households, yet women continue to be economically disadvantaged.

In a market study commissioned by UNDP in 2007 to assess the demand for financial services in Malawi women, youths and men reported that there were differences in behaviour when it comes to savings between them. It was more common for women to save than men because women are concerned with the welfare of the household, while men spend money on consumer goods and entertainment. Women are taking on more and more financial responsibilities yet have limited income-earning opportunities than their counterparts. The study confirmed that there is demand for micro -credit to finance livelihood activities. The nutrition status among children under five years is a key indicator of deprivation and poverty and they have a bearing on the development of children. Malawi has the highest malnutrition in the region. The stunting rate in the central region is 48%, southern region is 45.4% and the north is at 39.6%. About 38% of all child deaths in Malawi are associated with Protein-Energy Malnutrition (PEM). The current level of undernutrition (weight for age) among children under five years is 16%. This level of stunting is caused by chronic malnutrition, high burden of infectious diseases, low quantities and quality of food intake, poor preparation of foods and lack of dietary diversification. This is worsened by the HIV and AIDS epidemic.

#### **RATIONALE**

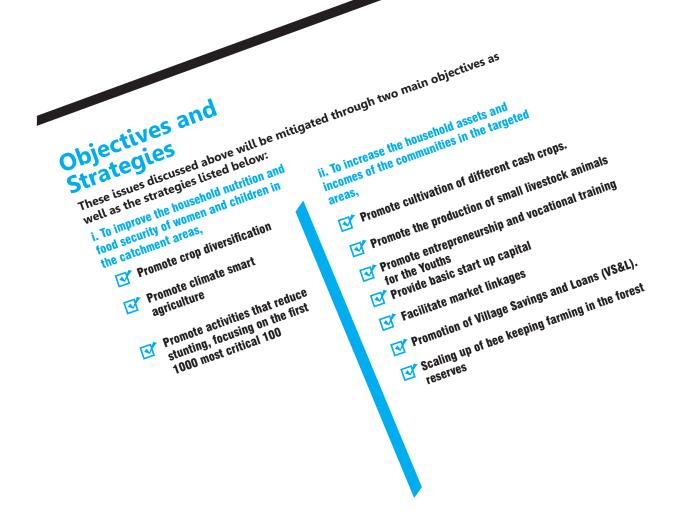
#### Zimbabwe Context

According to the 2003 Poverty Assessment Study Survey (PASS II), the population living below the Total Consumption Poverty Line in Zimbabwe rose from 55% in 1995 to 72% in 2003. This has been caused by the sharp economic decline of more than 40% in GDP during the same period. The 2007 MDG Mid-Term Progress report showed that the households that were poor in urban areas increased from 45% in 1995 to 61% in 2003, while in rural areas the figures soured from 57% to 71% during the same period. The feminisation of poverty in Zimbabwe manifests itself through higher prevalence rates of poverty among female-headed households, with 68% of all female-headed households living below the poverty line in 2003. The economic crisis in the last decade disproportionally affected women through the loss of employment in sectors such as food processing and the textile industries.

Zimbabwe which was once the food basket for southern African region is now a net importer of food. The proportion of people living below the Food Poverty Line (FPL) increased from 29% in 1995 to 58% in 2003; this percentage has probably increased since then. It is estimated that 1.3 million people were food insecure at the peak of food insecurity (February and March) in 2011. Urban agriculture continues to be one of the most important sources of livelihoods for the majority of households in peri-urban and high-density areas. On average, in 2006, household maize production for those growing the crop in urban areas contributed up to eight months of household cereal requirements.

During this strategic plan period, Nacro will prioritise the issues of food and nutrition security. The key areas of interventions will include promotion of climate smart agricultural practices and promotion of crop diversification, including draught resistant crops such as cassava. The Organistation will also promote the production of small livestock animals (goats, sheep, pigs and chickens) as alternative sources of income.

Promotion of value addition to crops and animal products will be given first priority as well. Finally, the foundation will facilitate market linkages and improve skills and knowledge of the targeted communities in entrepreneurship and business management. Limited basic start up capital will be provided to some beneficiaries also.





#### DISASTER MITIGATION AND RISK REDUCTION

#### **RATIONALE**

#### **Zambia Context**

Zambia is vulnerable to the effects of climate change because of its geographical exposure, low incomes and dependence on subsistence rain fed farming. Like other sub-Saharan countries, it is already suffering from the effects of climate change. From 1971 to 2005, there was a 58mm decline in rainfall (6%) compared to the period 1940-1970. Zambia is also experiencing more frequent and intense dry spells and more recently floods. These trends are expected to intensify in the future with projected temperatures expected to increase by at least 2°C by 2070. Data on Zambia suggests a drastic increase in flood related events. It is not certain if this is due to an increase in precipitation only or to underlying sensitivity factors, such as changes in land use patterns. The Human Development Report of 2011 indicates that approximately 416,000 people are affected by natural disasters in Zambia annually. Overall, climate variability is projected to keep 300,000 people below the national poverty line by 2016.

There is evidence that current climate variability has a large impact on development in Zambia. This variability is identified as low frequency-high impact, extreme weather events (e.g. droughts and floods) and high probability-low impact weather events (e.g. erratic rainfall, warmer days and nights).

Since the mid-2000s, floods have

affected the major river basins in the North West and South of Zambia. There are now floods every year along the river line areas, primarily the Zambezi belt, and in the unplanned settlements in the peri-urban areas. The Disaster Management and Mitigation Unit under the Office of the Vice -President is responsible for coordinating the multi-sector risk reduction response to disasters. Management structures have been developed at provincial, district and community levels but are yet to be put into operation.

#### **RATIONALE**

#### **Malawi Context**



Malawi's climate is sub-tropical and most farming activities are highly dependent on rain. Rain fed agriculture is very susceptible to changing weather patterns, leading to crop failure and hunger in some parts of the country. Malawians are vulnerable to the impact of a wide range of climatic shocks and hazards, including droughts (1 in every 3 to 5 years), floods (every year) and strong

Climate change has been included as a key priority area in the Malawi Growth and Development Strategy (MGDS) since 2009. Currently, the Government of Malawi is drafting a DRM policy to address issues of disasters in the country and has also developed a National Adaptation Plan of Actions (NAPA) to help in addressing climate change issues.

The Government through the Department of Disaster Management Affairs (DoDMA) has specifically categorized some districts in the country as being particularly vulnerable to the effects of natural disasters such as floods, droughts and strong winds especially in the northern and southern regions. Although the DoDMA has put some efforts to manage disaster risks, the current capacity and resource limitations constrain efforts to develop emergency preparedness, response, recovery and mitigation measures at various levels. During the strategic plan period, NACRO will work closely with the departments and units charged with the responsibilities of mitigating the impact of the climatic hazards and improving disaster preparedness in all the three countries to scale up the efforts in the catchment areas of the Organisation.

The disaster mitigation and relief will be one of the efforts of the foundation will be the three years. The efforts of the foundation will be the disaster mitigation and relief will be one of the key focus areas for NACRO in all the disaster mitigation and relief will be one of the key focus areas for NACRO in all the key focus areas for the key focus areas f The disaster mitigation and relief will be one of the key focus areas for NACRO in all three years. The efforts of the foundation will be three years and strategy:

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the three around the following objective are around the following objective around the following objective around the following the foll Strategies Promote community awareness of climate i.To reduce the impact of natural calamities change impacts and adaptation on the affected community members,

Provide the necessary support to the affected people through Swedency Lesbouse and bost disaster recovery interventions.



#### ORGANISATIONAL DEVELOPMENT AND INSTITUTIONAL STRENGTHENING OF NACRO

NACRO has been in existence in Zambia since 2002. During this period, the organisation has undergone several changes. In addition, the foundation has experienced some difficulties in recent times such as meeting statutory obligations and mobilising adequate resources to run all the programmes. while the demand for its services has increased tremendously. It is for this reason that this strategic plan will also pay attention to the organisation's own growth needs including organisational structure, human resource capacity, financial stability and internal management systems and processes. The Organisation will also focus on consolidating in the existing catchment areas while expanding into new territories during this plan period.

The Organisation has over the years been working on defining its membership criteria and streamlining the organisational structure. The grassroots memAs a result of this situation most members are not active; they only become active when there are activities being implemented in their areas. This situation is quite common in all the countries. NACRO will endeavour to reverse this situation; it will seek to constantly engage with all levels of membership and ensure that they are active all the time.

The organisation has four layers in its structure. These start at the satellite committee level, which is the lowest community based structure. This is followed by the district advisory committee, the provincial/regional advisory committee and the national committee, which is at the apex. Some of the structural levels are not active and effective due to inadequate resources and limited engagement with the Organisation.

Therefore it is important for NACRO to reposition itself in such a way that all the members at these levels can participate in

A deliberate budget allocation will be put aside in order to allow for such events. Also the flow of information to all the members and awareness creation of NACRO will be a priority area of focus. Other issues of focus will include a refinement of the membership criteria, strengthening of the participation of the members in the NACRO activities and capacity building of the various structures. All these improvements will lead to increased visibility of the Organisation among the stakeholders, which in turn will improve the sustainability possibilities of the Organisation. The Organisation has also not been very good in following the provisions contained in its governance manuals. This is characterised by irregular member meetings or no such meetings at all. In the coming three year period, the Organisation will adhere to all the provisions contained in its constitu-



# THE INTERVENTIONS LOGIC MODEL

# **NACRO**

## **PROGRAMME**

Sphere of interest

GOAL Impact/ Higher Level Outcomes Improved lives of the needy and disadvantaged people in DAA 28

Sphere of influence

**OUTCOMES** 

Purpose (Objectives) located at an appropriate Increased literacy levels of the vulnerable community members Better health and nutritional status of the vulnerable people

Increased resilience of the vulnerable community members

Increased access of the vulnerable community members to quality educational services Improved health of the most vulnerable people in the target communities Increase access of the targeted communities to safe and clean drinking water, sanitation facilities & Hygiene Education.

Improved nutrition and food security of women & children in the catchment areas.

Increased household incomes & assets of the communities in the targeted areas,

Reduced impact of natural calamities on the affected community members

Sphere of control

**OUTPUTS** 

learning environment, increased progression rate, more children accessing nutritious foods, increased access to psychosocial services providing health & nutrition services, capacity of CBOs improved, HBC centres established, increased knowledge on diseases & GBV Knowledge on WASHE increased, more people using VIP toilets, water facilities constructed and where necessary rehabilitated,

Increased diversification in crop production and food diets, higher adoption levels of CSA, farm yields increased

grow cash crops, keep livestock & sell to the market, more members involved in businesses, IGA & VS & L, more market information flow& access to good market.

More farmers

Better rapid response preparedness,

Partners & Budget allocation

# THE INTERVENTIONS MODALITIES

# **NACRO**

The main modality of implementation of the selected interventions in this strategic plan will mostly be the use of volunteers at different levels. The role of the NACRO secretariat will be to coordinate the volunteers at the community level, district and provincial levels.

At the community level, the volunteers are organised into Satellite Advisory Committees (SAC). These are the activity implementation centres.

Special efforts will be put in place to ensure adequate capacity in these committees. Such efforts will include facilitation of elections of the committee members where such vacancies exists as well as specific training in identified areas that would strengthen the skills and knowledge base of the key volunteers. The next level of Regional Advi-

sory Committees (RAC) will also be strengthened. Elections will be facilitated where necessary, and the members will be oriented in governance issues.

Special efforts will be made to ensure all the positions are filled, and that all the RAC members are familiar with their roles.

The highest level of the volun-

teer structure is the National

Advisory Committee (NAC). This is a key level in the NACRO structure which consolidates the country programme. Information will flow vertically from the SAC, to the RAC up to NAC and the Secretariat, and vice versa. The secretariat will also interact directly with the SEC where there are specific projects being implemented.

All the three levels will be holding quarterly and annual review and planning meetings. Reports will be generated in these meetings and submitted to the secretariat, using the channel discussed above.

# INSTITUTIONAL AND MANAGEMNET ARRANGEMENTS

# **NACRO**

- The General Council
- The Board of Directors
- The National Advisory Committee
- The Regional
  Advisory Committee
- The Satellite
  Advisory Committee

The General Council is composed of several members from across the organisation including the Board of Directors, members of National Advisory Committees, Regional Advisory Committee and equal number of ordinary members from each country. The General council is the overall decision making Board pertaining to all key governance issues of the Organisation such as ratification of policies, constitution, membership and approval of auditors.

NACRO is governed by an elected Board of Directors who are nine with tenure of office of three years and are elected at a General assembly.

The Executive Director is a non-voting and non-elective member of the Board. The Board's main mandate is to provide strategic policy direction and ensure good accountability within the whole organisation. They also play a key role in resource mobilisation.

The National Advisory Committee is composed of elected representatives from the Regional Advisory Committees based at country level. These are elected at the National Annual General Meeting for tenure of two years. Their main role is to give input into the national NACRO Country programs and also to perform delegated duties by the Board of Directors.

The Regional Advisory Committees are composed of elected representatives from the satellite committees. This structure is at the level of Area Apostles. Their major role is to provide input into the national programme based on the issues and feedback from the satellite committees. They form a core group of volunteers who are involved in the implementation and monitoring of the NACRO programmes and activities in their areas.

The satellite committees are formed around the District Elder areas as defined by the church structure. This is the lowest level of the Organisation structure and is based at the community level. This is where the actual beneficiaries of the services offered by NACRO are found. The main role of this committee is to identify the needs, the required intervention activities and the beneficiaries. Their work links strongly into the regional advisory structure.

# INSTITUTIONAL AND MANAGEMNET ARRANGEMENTS

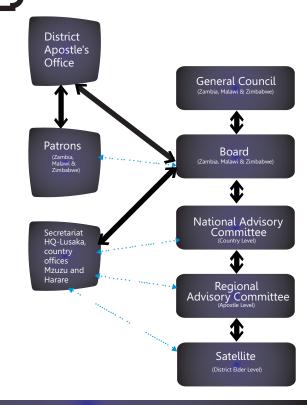
# **NACRO**



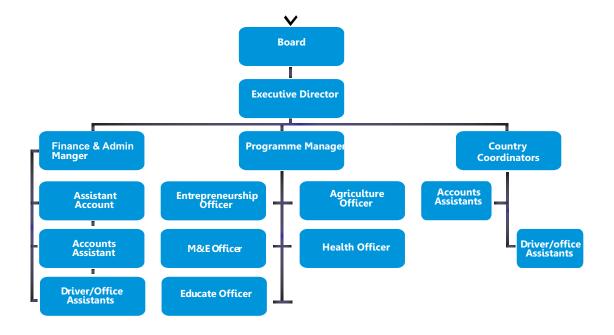
#### The Secretariat

The Executive Director of NACRO has the final responsibility over the management of the Organisation, and hence the implementation of this strategic plan. He is assisted by the Programme Manager, Finance Officer, and two Country Coordinators, each in Malawi and Zimbabwe.

There are also three Accounts Assistants, one in each country. The foundation also employs programme officers based on funded programmes under each thematic area. This staff establishment is lean, but will ensure smooth implementation of the strategic plan activities in each country. The structure is further supported by teams of volunteers drawn from the Regional areas.



The approved establishment is presented below:



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