

Ghana Red Cross Society

Strategic Plan

2016-2020

Ghana Red Cross Society

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Special Thanks go to the following sister organisations: International Federation of Red Cross and Red Crescent Societies, International Committee of the Red Cross, Finnish Red Cross, Swiss Red Cross, Iran Red Crescent and other partners for their support to enable the Ghana Red Cross Society come up with this strategic plan.

Word from the President

The 2016 – 2020 Strategic Plan of the Ghana Red Cross Society (GRCS) is designed to meet the expectations of the programmes planned for the society to deliver humanitarian services to the vulnerable in Ghana and beyond.

The strategic plan is developed in line with the Society's vision to become the Leading Volunteer-Based Humanitarian Service Provider in Ghana. It also seeks to prevent and alleviate human suffering by mobilizing the power of humanity as its mission.

The Strategic direction is focussing on "Applying Business Models to deliver humanitarian service" as well as Institutional and Organizational Development, Programmes and Projects for Service Delivery.

These two strands are to enable the Ghana Red Cross Society provide equal space to the development of the Society as an organisation and to its programmes. It is also geared towards building a more resourced and endowed GRCS with appropriate systems to be able to effectively and efficiently develop and sustain programmes and service delivery.

The newly proposed direction is also expected to enhance co-ordination and synergies between and among the different programmatic areas and the departments/units within GRCS.

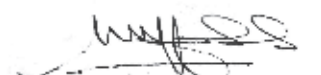
This strategic plan captures the scope of the activities of the GRCS, and matches the resource in the context of the Ghanaian environment to enable GRCS realize its mission and vision.

The Programme Areas which would be focused on for implementation will include: Resource mobilization and partnership expansion, Organisational Development (OD) and PM&E, Institutional development for effective organisation and administration and Communication, ICT and public relations.

The other programme areas will also look at Disaster management (DM), Youth, Mothers clubs, Membership Development and Volunteer Management, Health and Care (H&C), Dissemination and Outreach, Community Development and Advocacy and Policy Influencing.

The overall goal of this strategic plan is to support government efforts towards ensuring a sustainable improvement in the quality of life of the most vulnerable individuals, households and communities in Ghana; enhancing institutional and organizational development of the national society for efficient and effective service delivery, self-sustenance, scale up programs and projects for service delivery to the most vulnerable and affected.

This strategic plan is in conformity with the International Federation's strategy 2020 and it seeks to advance a new golden age of partnership between the GRCS and other National Societies. We also welcome all local and international organisations who share our expectations for innovative collaboration; partnerships and networking to link up with us in the humanitarian course for a renewed experience.



Dr. Michael Agyekum Addo
President, GRCS

Section I

Background to GRCS Strategic Planning Process 2016-2020

1.1 History of Ghana Red Cross Society

Ghana Red Cross Society (GRCS) was established to contribute to the development of humanity especially the poor, vulnerable and marginalised population. In Ghana the Society started as the League of Maternal and Child Welfare by Sir (Dr) Selwyn Selwyn Clarke in 1929 with the aim of contributing to improvement in health and well-being of mothers and children. The league consisted of mothers, teachers, nurses and housewives. Their activities included the welfare of pregnant and nursing mothers, the care of infants and children and the promotion of personal hygiene and good sanitation practices. On 11th June, 1932 it was formally affiliated to the British Red Cross and became the Gold Coast branch of the British Red Cross. After Ghana attained independence in 1957, the name was changed to Ghana Red Cross Society. This name change and objects were made formal and legal on 27th June 1958 by the passing of an Act of Parliament, Ghana Red Cross Society Act No. 10 of 1958.

The International Committee of the Red Cross (ICRC) admitted GRCS as a National Society and gave it formal recognition as a Movement Member in February, 1959. Ghana Red Cross Society was consequently admitted into the League of Red Cross and Red Crescent Societies in November 1959. The League of Red Cross and Red Crescent Societies later became the International Federation of Red Cross and Red Crescent Societies (IFRC) in 1991. GRCS subsequently is also a member of the International Federation of the Red Cross and Red Crescent Societies which is currently made up of 190 countries worldwide.

The National Society and its Emblem has additional legal recognition and protection. For example, it is an offence under Ghana Red Cross Emblem Control decree NRCD 216, 1973 to wrongly use the Red Cross emblem. Punishments include a fine and or imprisonment.

The areas of programming during the early stages of GRCS among other things included:

1. the welfare of pregnant mothers and nursing mothers
2. the care of infants and children
3. the cleanliness of the home (personal hygiene promotion and good sanitation practices)

The GRCS' programmes and scope of operation have expanded over the years in both space and time. The programmes have expanded to cover the following thematic areas:

1. Disaster Management
2. Health and Care
3. First Aid
4. Youth Development
5. International Humanitarian Law, Principles and Values and Humanitarian Diplomacy
6. Resource Mobilisation
7. Organizational Development

The Membership structure of the Society, however, has not changed much since its formation and this is adequately prescribed in the Constitution of the Society. Generally, membership is open to all persons irrespective of race, place of origin, age, political inclination, colour, creed, or sex and is made up of:

- **Chief Patron**- His Excellency the President of the Republic of Ghana
- **Honorary Members** – members who are appointed in recognition of their exceptional services and contributions to the Society
- **Corporate Members** – members who are groups of persons, companies, organisations, or institutions which pay a composite annual subscription
- **Ordinary Members** – members who pay an annual subscription
- **Youth Members** – members (in-school and out of school) who are enrolled to carry out voluntary services approved by each branch and pay an annual subscription determined by the Management Committee and approved by the Central Council.

Membership has increased to 65,220 as at 2015. Sixty percent (60%) of the Membership is made up of youth. The Society is currently present in 138 districts in the 10 regions representing 63.9% of the total of 216 districts in the country. Our activities however, overlap into the other non operational districts when the need arises.

1.2 Background and Rationale to the Development of Strategic Plan 2016-2020

Ghana Red Cross Society is the largest Volunteer and Community-based, Relief and Humanitarian service organization in the country and it intends to maintain that lead position, remain relevant to its constituents and stakeholders and also provide timely qualitative services to the vulnerable, especially in the hard-to-reach communities. GRCS, thus in 2011 developed and implemented a strategic plan covering the period 2011-2015 with a focus on meeting its remit as stated above. The implementation period of this Plan ended in 2015. Given the different and rapidly changing dynamics of the needs of its constituents underpinned by rapid changing economic and environmental situation of the country, there is a compelling reason to develop a new Strategic Plan for the Society. A Plan which is built on the successes and learning outcomes of the past Plan whilst at the same time providing space, innovation and direction to enable the Society to meet its current and future obligations in efficient and effective manner.

1.3 The Planning Process for Strategic Plan 2016-2020

This Strategic Plan is an outcome of a participatory process that entailed nation-wide consultations conducted at the national, regional, district and community levels as well as engagement with partners. The focus and target of the national consultative process was GRCS Central/National Governing Board members and the staff working at the Headquarters and partners at the national level. Strategic planning workshops targeted the regional and district level teams and the community beneficiaries. These started with review of available documents and programmes of GRCS. Such documents included the recent past strategic plan, reports including project evaluation reports, and annual project plans and implementation frameworks. Environmental scan undertaken provided information on the status of socio-economic

development in-country and the global dimension of development issues as they affect human development. A series of workshops and interactions involving governing board, staff at the headquarters, regional and district teams were also held. These forums provided additional information to enrich the planning process.



Section II

Context and Situation Analysis

2.1 Location, Land and Climate Conditions

Ghana is in the West Coast of Africa. It is roughly rectangular in shape and is over 800 kilometers from north to south and about 480 kilometers from west to east. It covers a land area of about 238,000 square kilometers. Lying in the tropic, Ghana has a Savannah climate and is bordered in the east by Togo, Ivory Coast to the West and Burkina Faso to the north. The south is the Gulf of Guinea. Most of the land area is plains with a few mountains not exceeding 900 meters. Inland lies an extensive rain forest, which dilutes in a tropical Savannah as the journey goes up north.



2.2 Demography and Social Issues

The population of Ghana, according to the 2010 Population and Housing Census Report is approximately 24.7 million with an intercensal growth rate of 2.5%. The population increased by 30.4% between 2000 and 2010. The population density also increased from 79 per km² to 103 per km² within the same period. The population is mostly youthful with about 50% below the age of 18 years. The first time in the history of population census in Ghana, the urban population overtook the rural. 51.2% of the population are female. The Report further indicated that the urban/rural population ratio is almost 50:50 (50.9:49.1). Given these trends, total population will be about 35 million by 2025 with about 55% of the population living in urban areas. One of the effects of increased rural-urban migration is the growth of inner-city or slums and peri-urban communities. There is likely to be major population shift in the Western Corridor as a result of the oil exploration. The increase in population also put pressure on existing social services which include water supply and sanitation, electricity and health services.

Table 1 Population Growth Trends (2010-2025)

	Pop 2010	Growth Rate	Pop 2025	Avg. Pop (2010-2025)
Urban	10,638,476	4	19,159,295	14,898,885
Rural	13,594,955	2	18,297,019	15,945,987
Total	24,233,431	2.4	34,587,108	29,410,270

According to the Ghana Statistical Services (GSS), there are about 50 ethnic and linguistic groups in Ghana, located in eight broad communities. The largest of these groups are Akan (47.5%), Mole Dagbani (16.6%), Ewe (13.9%), Ga-Dangme (7.4%), Gurma (5.7%) and Guan (3.7%). The Akans, Ewe, Ga-Dangme are mostly in the south and the Mole-Dagbani and the Gurmans in the North of the country. Each of these groups has its own cultural values and beliefs systems which had been handed over from one generation to another mostly through oral tradition and these beliefs and values impact on how people mobilise themselves and utilise resources.

The country is divided into three zones based on geography and other characteristics. There are the Northern, Middle and Southern Zones. The country's major settlements are in the south of the country – Accra, Kumasi, Sekondi-Takoradi, Ho, Sunyani, Cape Coast, Tema and several others. The North has Tamale, Bolgatanga and Wa as the major settlements.

2.3 Political Administration and Democratic Framework

On 6th March, 1957 Ghana attained independence and Dr. Kwame Nkrumah became the first president of Ghana. However, the country became a victim of coup d'états and subjected to a military regime for most part of its 58 years. Ghana moved to democratic governance when the 1992 Constitution came into existence. Political power changed hands to New Patriotic Party (NPP) in 2000 after 8 years rule by National Democratic Congress (NDC). There was another peaceful change in 2009 when NDC won the national election after 8 year rule of the NPP. Ghana again saw another election in 2012, the result of which was contested at the Supreme Court by NPP. The Court ruled in favour of NDC. Ghana stands to see another election in December 2016.

Administratively, Ghana is divided into 10 regions and each region has a regional capital. The

Political head of the region is the Regional Minister, who is nominated by the President and approved by Parliament. Administratively, the Regional Minister works with the technocrats under different ministries and provides leadership to the implementation of government's policies and programmes.

Ghana has since 1982, devolved administrative, planning and development authority to the regions and districts. This is expected to facilitate a bottom-up, participatory planning processes from the community through the district to the national level. Services in all their forms are expected to be an integral part of the development plans with budget allocations to facilitate its implementation. The districts are demarcated based on population size of an area. The smallest unit of planning is at the Community level, - the Unit Committee and this is followed by the Area/Urban Council which may consist of a number of unit areas. Membership to the Unit Committees, Area Council and District, Metropolitan and Municipal Assemblies are both a combination of elective process and appointment from the President. The District is headed by a Chief Executive who is nominated by the President and approved by the membership to the District Assembly. The Chief Executive with the heads of the decentralized departments is responsible for preparing a Medium Term Development Plans in line with National Development Planning Commissions' (NDPC) guidelines. The NDPC is expected to prepare a composite national plans based on consolidated plans from the Districts. This should form the basis of National Medium-Term Development Framework. There are currently 216 Municipal, Metropolitan and District Assemblies.

As per the 1992 Constitution, fiscal decentralization forms an essential component of Ghana's decentralization policy framework. The Metropolitan, Municipal and Districts Assemblies (MMDAs) are supported with funding mechanisms under the District Assembly Common Fund (DACF) which is currently 7.5% of government's revenue. Based on a formula which is approved by Parliament on a yearly basis, the DACF Secretariat distributes the fund to the District Assemblies. However, some components of the funding are earmarked by the Central government for certain activities and spent on behalf of the Districts. The rest of the funding is for the district to allocate to areas of priority with respect to their development needs which are mostly expressed in the Medium Term Development Plans. The District Development Facility (DDF) is also an additional funding mechanism aimed at improving fiscal capacity among MMDAs. The DDF, unlike the DACF which is earmarked, is discretionary with respect to how it is expected to be used. The districts are also expected to generate revenue from levies, rates, fees and fines to finance its administrative expenses. It is of critical importance to assess the quantum of resources allocated to the Social Services at the district level.

Map of Administrative Regions of Ghana



2.4 Economic Development

Ghana's economy has maintained commendable growth trajectory with an average annual growth of about 6.0% until 2013. From a rate of 6.5% in 2007, GDP growth increased to 8% in 2010, reaching a peak of 15% in 2011, as a result of the impact of a full year's production of crude oil. Subsequently, the overall nominal GDP in dollar terms increased by about 45% from US\$28,204 million in 2008 to US\$40,680 million in 2012 to sustain an annual average per capita GDP growth rate of about 7% over the period 2007-2012. In 2013 growth decelerated to 4.4%,

considerably lower than the growth of 7.9% achieved in 2012. This further declined to 4.2% in 2014 and is expected to continue to 3.4% in 2015. Growth has, however, been broad-based, driven largely by service-oriented sectors and industry, which on average have been growing at a rate of 9.0% over the five years up to 2013.

The increased average GDP growth of about 7% per annum over the period 2006-2012 led to a per capita income growth of 9.9% over the same period, resulting in increased per capita income from US\$923.10 in 2006 to US\$1,570 in 2012. Furthermore, the strong growth and the accompanying social intervention programmes reduced the proportion of people living below the poverty line from 39.5% in 1998/99 to 18.2% in 2005/2006 with strong indications that the situation has improved further. This notwithstanding, the income inequality across regions and between socio-economic groups remains high. This would require special targeted interventions, including policies to address them.

Agriculture Sector, which is by far the main source of livelihood for poor households in Ghana, has seen up and down turns in recent times. It grew by 2.3% in 2012 and this increased to 5.2% in 2013. There was a marginal increase in 2014 (5.3%). It is estimated, however, that the Sector will experience a decline in 2015 (2.9%). The Agriculture Sector faces myriads of challenges of which include erratic rainfall and inadequate irrigation facilities, poor nature of roads and inadequate storage facilities. A decline in growth for the Agriculture Sector has huge implication for levels of poverty reduction in farming communities.

2.5 Poverty Dimensions in Ghana

Despite enhanced growth in GDP in recent times, the rate of poverty reduction is slow. Poverty in Ghana has several dimensions. These include gender, location and access to services. The proportion of the 'poor' fell from 51.7% in 1992 to 39.4% in 1999 to 28.5% in 2006, representing a decline of 45% over period of 14 years. Those described as 'extreme poor' decreased from 36.5% in 1992 to 18.2% in 2006. By this performance Ghana achieved the target set under MDG 1.

According to the Ghana Living Standard Survey 6 (GLSS 6, 2014), the annual average household expenditure for the country is estimated at GH¢9,317 with a mean annual per capita expenditure of GH¢6,337. The total annual household expenditure for the country is GH¢61,507 million with the urban expenditure (65.8%) almost twice as much as that of rural areas (34.2%). Moreover, the average household expenditure in urban areas (GH¢11,061) is about 1.5 times that of the rural localities (GH¢7,152).

In respect of GLSS 6 Report, the household's average annual per capita expenditure on food (actual and imputed) of GH¢1,302 accounts for the largest share (46.7%) of the total annual household expenditure of GH¢61.507 million. Households' total expenditure on housing accounts for 12.4 percent of total expenditure with an annual average of GH¢1,156 and an annual per capita expenditure of GH¢395.

The United Nations Human Development Index Report (HDI Report, 2014), indicates Ghana's HDI value in 2013 is 0.573, which is in the medium human development category-positioning the country at 138 out of 187 countries and territories. Ghana's life expectancy rose from 53.1 in 1980 to 61.1 years in 2013. Female life expectancy is estimated to be 62.1 years and that of men is 60.2 years. This notwithstanding, it is estimated that almost a third of Ghanaians live on just US\$ 1.25 per day and that there are high levels of persistent poverty in rural savannah and forest areas and increased urban poverty, largely occurring around the coastal regions. These cover such areas as the rural savannah (Northern Ghana) and forest areas (Ashanti, Western and Brong Ahafo), and

the Coastal areas of Central Region. Thus, there are disparities with respect to levels of poverty reduction. For instance, Upper West Region is said to have returned to the poverty levels of the 1990s, with a poverty rate of 88%. In Greater Accra the proportion living below the national poverty line increased from 5% in 1999 to 12% in 2005/6 indicating that pockets of poverty exist in urban environments

A phenomenon of poverty is the issue of child poverty which results from the fact that government's support/subsidies to the social services sectors have not achieved the intended target. The implications include the use of children as child labour on farmlands and in the market. These children, especially girls are withdrawn from school to support household and livelihood activities. Another dimension of poverty in the country is the level of food insecurity and this exist when people lack sustainable physical or economic access to enough, safe, nutritious and socially acceptable food for a healthy and productive life. This usually occurs at the household level. According to the World Food Programme's (WFP) Comprehensive Food Security and Vulnerability Analysis for Ghana during the period 2008-9, 5% of the population (1.2 million) are food insecure with 34% and 15% located in Upper West and East Regions respectively.

The gender dimensions of poverty cut across several sectors and in all these women experience greater poverty than men. In the education sector, gender disparities widen when a cohort of student progress on the education ladder. Women are disadvantaged when it comes to access to resources as land, information and are marginalized in the decision-making processes from the community to the national level. Girls are more disadvantaged in terms of access to Services in schools. The GSGDA (2010-2013) did acknowledge the gender dimension of poverty. The document states that there is largely "feminized poverty due to lower literacy rates, heavier time burdens, and lower access to productive resources and weak communication strategies for government policies on women issues".

There is also a phenomenon of increasing urban and peri-urban poverty. Unfortunately the poor and marginalized are located in communities, where access to social services are non-existent. This category of people, thus, spend a greater proportion of their income and time on accessing Services such as potable water and improved sanitation, health, and education.

To guide its development agenda, Ghana has prepared its medium-term development framework, "the Ghana Shared Growth Development Agenda" (GSGDA II, 2014-2017). The strategic direction envisaged by the Agenda is to leverage Ghana's natural resource endowments, agriculture potentials and the human resource base for accelerated economic growth and job creation through value addition especially manufacturing. The priority policies and actions in the Agenda are based on four main pillars and programmatic areas as detailed in the table below.

Table 2. GSGDA II Strategic Pillars

Pillars	Programmatic Areas
Investing in People	Human Development, Productivity and Employment;
Building a Strong and Resilient Economy	Ensuring and Sustaining Macroeconomic Stability, Enhancing Competitiveness of Ghana's Private Sector and Accelerated Agriculture Modernisation and Sustainable Natural Resource
Expanding Infrastructure	Infrastructure and Human Settlements Development, as well as Oil and Gas Development;
Maintaining Transparent and Accountable Governance	Transparent and Accountable Governance

The GSGDA further provides policy framework and direction to the Metropolitan, Municipal and District Assemblies as well as Ministries, Departments and Agencies in their efforts to prepare Medium-Term Development Plans (MTDP).

2.6 Specific Critical Sectors

2.6.1 Water, Sanitation and Hygiene Services

Access to improved water and sanitation services integrated with hygiene intervention on sustainable basis especially at household levels and in schools are critical to reducing poverty through reducing health bills and enhanced livelihood. According to the Joint Monitoring Programme Report (JMP Update 2014), 82% of Ghana's population have access to improved water supply. However, the figures from service providers, that is, Ghana Water Company Limited and Community Water and Sanitation Agency give an average coverage of 64%. There is inequity in access as some locations are not on service points. In some locations, services are erratic and unreliable. Women and children especially girls walk for a long distance to access service, the quality which needs much to be desired. From the JMP only 15% of Ghanaians have access to improved basic sanitation services with 1 in 4 practicing open defaecation. According to the GLSS 6, there are high levels of contamination of water for drinking occurring at the household level. It is estimated that about 70% of OPD cases are water and sanitation related and about 5000 children under age of five die each year from diarrhoea related diseases, 90% of which comes from water and sanitation. Between June 2014 and February 2015, cholera outbreak affected 30,000 people with a Case Fatality Rate of 0.8%.

2.6.2 Health

Improved access to health services at a cost within the reach of the poor and marginalised is important to achieving most of the targets set by the MDGs. Access to these services relate to location and funding. Whilst the government is working at improving access by making services closer to the people especially those in rural areas through the CHPS Compound Programme, access is hampered in some areas because of issues relating to the funding mechanism. The National Health Insurance Scheme (NHIS) is having a challenge in respect of meeting its financial commitment.

Statistics from the Multiple Indicator Cluster Survey (MICS, 2011) on MDG 4 and 5 provide information on the health status of MDGs target:

- Under 5 Mortality Rate is 82 death per 1000 live births. This means one in every 12 children dies before reaching his/her 5th birthday;
- Child Mortality Rate is 31 deaths per 1000 live births children aged 1 year;
- Infant Mortality Rate is estimated to be 53 deaths per 1000 live births; Post - Neonatal and neonatal rates are estimated at 21 and 32 deaths per 1000 live births;
- Neonatal Mortality Rate represents 60% of the IMR in Ghana, meaning 60% of deaths in infancy occur during the first 28 days of a child's life;
- Children living in rural areas experience higher levels of Infant and Under-5 Mortality (56 and 94 deaths per 1000 live births) as compared to those living in urban areas (46 and 72 live births)

It is worth noting that these are national averages and therefore issues of equity are not reflected in the figures. Since there is a disparity in service provisions at the expense of rural communities, it stands to reason that the figures for rural communities may not be encouraging. According to the 2015 Budget Statement and Economic Policy, Ghana's HIV situation is classified as a low

prevalence epidemic with pockets of high prevalence in certain populations. The national median HIV prevalence rate has continued to decline since 2009, when it was 1.9%, to 1.3% in 2013, while the prevalence rate among pregnant women also declined from 2.1% in 2012 to 1.9% in 2013. This notwithstanding and according to prevalence by age, the age group of 35-39 years recorded the highest prevalence rate of 3.2% while the lowest prevalence rate of 0.8% was recorded for the age group 15-19 years. HIV prevalence among the age group 15-24 years, which is used as proxy for new infections, declined from 1.3% in 2012 to 1.2% in 2013. The estimated number of new HIV infections decreased by 2.2% from 7,991 in 2012 to 7,812 in 2013.

The West African Sub-region witnessed the emergence of Ebola diseases which spread from one country to another through human contact. In all, 3 countries were seriously affected and these include Liberia, Sierra Leone and Guinea. Other countries marginally affected were Senegal, Nigeria and Mali. The scale of spread, and the inability of the affected countries to manage the outbreak prompted an international support, through both financial and technical assistance. Ghana's response to the diseases came through massive education and awareness programmes on personal hygiene management.

2.6.3 Climate Change and Disaster Management

Climate change and its related issues have become one of the current phenomenon on the development agenda with United Nations leading the agenda. It has become a development agenda because of the impacts, especially the negatives, on natural resources, livelihood and humans. Overall, there is evidence that the agriculture sectors (including fisheries, cocoa, cereals, and root crops), and water resources sectors as well as human health and women's livelihoods will be negatively impacted by climate change; the poor being most vulnerable. Moreover, climate change may also contribute to accelerated storm surges and coastal erosion, to which Ghana is particularly vulnerable (World Bank et al. 2006, Dasgupta et al 2009). Coastal fisheries are undergoing severe changes due to change in sea temperature and currents combined with overfishing and non-functioning resource regimes. Similar issues face Lake Volta, with important implications for the lake ecology and livelihoods of fishermen. Disaster risk and poverty are strongly linked in Ghana, and are in turn intertwined with the reality of climate change. Climate change is expected to expose people to higher rainfall variability, water stress, drop in agricultural yields, and depletion of resource-based livelihoods. This would increase the risk of drought periods, increase evaporation and reduce agricultural productivity. Moreover, climate change will probably result in rising temperatures potentially increasing the risk of forest and bushfires. At the same time, Ghana's economy and rural population depend on sustainable growth in these climate-sensitive sectors.

The impacts of climate risks are likely to magnify the uneven social and spatial distribution of risk in Ghana, and possibly amplify poverty in the Northern Sections of the Country. At the same time, the links between disaster risk and poverty in a changing climate means that reducing disaster risk can help reduce rural and urban poverty, further sustainable development and growth and improve adaptation to climate change.

The Government of Ghana in July 2014 launched a National Climate Change Policy (NCCP) which seeks to essentially ensure a coherent and pragmatic approach in dealing with the impact of climate change on the socio-economic development agenda of the economy. The NCCP has prioritized five (5) main Policy Areas:

- (i) Agriculture and Food Security
- (ii) Disaster Preparedness and Response
- (iii) Natural Resource Management
- (iv) Equitable Social Development
- (v) Energy, Industrial and Infrastructural Development

The National Climate Change Adaptation Strategy (NCCAS) which has been developed to focus on a time frame from 2010 to 2020 is intended to:

- Ensure a consistent, comprehensive and a targeted approach to increasing climate resilience and decrease vulnerability of the populace.
- Deepen awareness and sensitisation for the general populace particularly policy makers about the critical role of adaptation in national development efforts
- Position Ghana to draw funding for meeting her national adaptation needs
- Strengthen International recognition to facilitate action
- Facilitate the mainstreaming of Climate change and disaster risk reduction into national development.

Developed in response to United Nations Framework Convention on Climate Change (UNFCCC) and Hyogo Framework for Action, the development of a National Climate Change Adaptation Strategy (NCCAS) has been agreed on as a trigger under the Natural Resources and Environmental Governance Programme in Ghana. The NCCAS indicated that Ghana's economy relies heavily on climate sensitive sectors mainly on agriculture, energy and forestry. About 70% of the population depends directly or indirectly on agriculture (fisheries, crop and animal farming etc.) and forest sector for both timber and non-timber forest products. Consequently, any anomaly in the climate therefore tends to affect the economy of Ghana, particularly the vulnerable.

The NCCAS, further states that climate forecast and climate change scenarios for the country predict a more severe and frequent pattern of such drought and flood events. At present, there is broad international consensus that even if the world makes a significant reduction in greenhouse gas emissions, the lag in the climate system means that the world is faced with decades of climate change due to the greenhouse emissions already put into the atmosphere from industrialization activities. The Strategy finally conclude in its introductory section indicated that 'Ghana need to properly plan and carefully adopt a development path that ensures climate resilience and integrate adaptation measures into all facets of national development planning, particularly at the local level makes the preparation of a National Climate Change Adaptation Strategy (NCCAS) all the more relevant.'

The issues highlighted under the Situation and Contextual Analysis segment of this Strategy is to underpin the formulation of strategic direction of GRCS for the next 5 years as the Strategy seeks to influence some of the challenges identified in the analysis and build on the successes portrayed in their last strategy.

Section III

Situational Analysis of GRCS

Performance of Selected Programmatic Areas during 2011-2015

3.1 Disaster Management (DM)



Disaster Management is one of the core programme domains of the Ghana Red Cross Society which ensures that the impact of disasters on the victims and the population at large is mitigated. The DM therefore is focused on providing humanitarian assistance to vulnerable populations and communities in Ghana through preparedness, response, mitigation and disaster risk reduction. The goal of this department within the period (2011-2015) was to reduce the number of deaths, injuries and impact from disasters and

strengthen community resilience and recovery from disasters and crises. The specific objective was to establish and implement mechanisms that will reduce vulnerabilities and risks and curb the adverse impacts of disasters in the communities

Within the plan period the department concentrated most of its activities in the three Northern Regions, the Eastern, Central, Western and Greater Accra working with communities and other stakeholders on floods, bush fire prevention, food Security, Climate Change and management. Vulnerability and Capacity Assessment (VCA) were undertaken to better understand different dimensions of hazards and risks in project locations. Some of the locations were in 5 districts, namely, West Mamprusi, West Gonja, Central Gonja, North Gonja, and Gushegu and over 20 flood-prone communities largely living along the White and Black Volta. In 2014 in the Northern Region, VCA were conducted in 25 disaster-prone communities in 5 districts. As a result of rainstorm in early 2013, which displaced 5000 families, this domain supported 500 families with basic relief items in three districts. One hundred and fifty (150) volunteers were trained on needs assessment, relief distribution, and hygiene promotion. Forty (40) Community-Based Health and First Aid (CBHFA) Volunteers were trained in psychological first aid in preparation to offer Psycho-social support to affected families in case of disaster. Despite the high recognition of GRCS as a lead organisation for its work relating to disaster response in the country there is a need to accelerate efforts in disaster preparedness,



risk reduction, rehabilitation, recovery and development. The Strategic Plan (2016-2020) will highlight and commit resources to these areas.

This Strategic period will aim at increasing community resilience, minimising community vulnerability and risk to disasters, to avoid or limit the adverse impacts of disasters within the broad context of sustainable development. Through risk assessment and identification, risk analysis, planning for risk reduction activities, GRCS propose to plan and implement proactive and preventive measures while strengthening community capacity to resist or cope with and recover from disasters. It is the intention of GRCS to enhance effective disaster mapping and prior planning on how best interventions are to be handled. This will also involve adequate resource mobilization to await any disasters that could occur in the country. This is in line with Government of Ghana's National Disaster Preparedness and Management Policy and Framework.

The Society will continue to build considerable capacity at national, regional and district levels for effective response and ensure community resilience against the worst consequences of natural and human-induced hazards. The Society shall also be more proactive in the area of Restoring Family Links during the life of this Strategic Plan in line with international commitments in this area since tracing constitutes one of the core roles of all National Societies. As one major component of disaster prevention, the role of the Society in environmental development has gained considerable attention in recent times as it has become a major concern worldwide and Ghana in particular. Within the life of the Strategic Plan GRCS plans to refocus her Disaster Risk Reduction and mitigation activities within this context.

Building on the work already started during earlier plan period, the Society shall build capacity, raise more understanding of disasters, and how their effects may be mitigated and integrated in disaster prevention. To achieve this, citizens' awareness shall be deepened especially in high risk and hard to reach communities.

In addition GRCS shall work to ensure effective preparedness, better targeting, and effective coordination towards quicker and quality disaster and emergency responses especially at the community levels. These provide avenue for scaling-up and deepening networking and collaboration at both horizontal and vertical levels –that is, within the Red Cross Movement, UN Agencies, NGOs, Private Sector and State Actors at all levels for better co-ordination of disaster response. Although, the GRCS is seen as a lead humanitarian agency, it considers all her activities as complimentary to the efforts of Government of Ghana.

3.2 First Aid

First Aid is the traditional work of the Society which ensures that at least the ordinary people are well-equipped with first aid techniques in order to save lives. Life saving techniques have become one of the most important issues in the world today. More and more people lose their lives every year through accidents. These include Road Traffic Accidents, industrial and domestic accidents. The impact of accidents is not always fatal in themselves, but it is the way in which casualties are handled at the accident scene that may lead to fatality.

Immediate help is very important in saving lives. Some casualties die at the mercy of untrained First Aiders or eye witnesses at the scene of the accident. The Accra Sports Stadium incident on May 9th 2001, which claimed the lives of over 100 supporters of Accra Hearts of Oak and Kumasi Ashanti Kotoko, is a typical example where lack of knowledge was fatal for a great number of

people. This is why First Aid training is essential to the general populace.

During the period of 2011 to 2015, GRCS has trained over hundred thousand (100,000) people in first aid skills both on commercial and non-commercial bases. These include corporate organizations, institutions, volunteers, drivers and organized groups in our communities. In the year 2016 and beyond, the Society would intensify the first aid training to cover a larger area of the populace which includes volunteers, governance, staff, institutions, families and other corporate organizations. In addition, GRCS would improve on the first aid and ambulance services both at emergency first aid post along accident prone routes and at events by establishing more of these services.



3.3. Health and Care (H&C)

Health and Care focused on reducing mortality. The specific actions implemented covered such areas as Community-Based Health and First Aid (CBHFA), Measles containing Vaccines 2 Defaulters tracing, Promotion of Long Lasting Insecticide Bed Nets (LLINs), Hygiene promotion, Cholera DREF operation, Maternal, Neonatal and child Health (MNCH), Non Communicable Diseases (NCDs) activities and Ebola awareness raising for prevention. Some of the outputs and outcomes include capacity building for about 5000 volunteers across the country. Over 200 Mothers Club members (minimum of 15 members per club) in two districts each in Brong Ahafo and Central Regions have been supported with skills and income generating facilities under the CBHFA approach project.



GRCS under the CBHFA approach project supported five communities (Brahabe-kumi, Domoki, Ofoase in the Gomoa East District in the Central Region and Fakwasi, Adjalaja No. 1 and Adjalaja No. 2 in the Atebubu district in the Brong Ahafo Region) with two (2) borehole and 80 household latrines were constructed. A total number of 3066 households were reached with behaviour change messages through household visits in the Brong-Ahafo and Central Regions.

Measles Rubella and Supplementary activities were implemented in Greater Accra, Wa Central, Jirapa and Garu Tempani districts. There were orientations for the Staff on non-communicable diseases with focus on lifestyle diseases. Hygiene promotion activities included awareness raising sessions, home visits, sensitization at schools and churches including women's fellowship groups,



clean up campaigns. Promotion of hand washing was also a major activity during this period. Hand washing stands were mounted during public and other social events like funerals and durbars by mother clubs and youths. Educational institutions were also supported with hand washing facilities. Communities benefited from hygiene promotion kits.

The National society reached over 1000 female commercial Sex Workers and their non-paying partners with HIV and AIDS education, counselling, testing and referrals services under the SHARPER project using the Drop-in Centre concept.

A total of over 25,000 Volunteers received training on Ebola/Cholera prevention and control and other health related diseases using the Epidemic Control for Volunteers (ECV) methodology during the period under review. The Volunteers reached 504,769 households with an average of over 3,028,614 reached with social mobilization activities. These activities occurred across the entire country. Social mobilization and risk communication activities have been complemented with TV coverage and radio awareness campaigns (Community and National Radio networks).

Besides these achievements, GRCS will work closely with IFRC, PNSs, MMDA and the UN organizations in country to strengthen collaboration and coordination geared toward improving lives, especially in the most vulnerable and hard to reach communities. In achieving this there is also the need to ensure intra collaboration and Coordination for effective and efficient service delivery to target beneficiaries.

3.4 Partnership Development and Resource Mobilisation

The last Strategic Planning period saw an immense improvement in partnership development and improved relations and resource mobilisation. The Society at the national and district levels deepened its relationships with such entities as Government Ministries, departments and agencies (Ministry of Health, Ghana Health Service, GES, NADMO, Ghana National Fire Service, CSWA, GWSC Municipal/District Assemblies, and Ministry of Agriculture etc). Partnerships were also created with the private sector (Delta Airlines, Ernst Peyer Memorial Foundation etc.) and Tertiary Educational institutions. International and local development organisations such as USAID, FHI360, Right to play, Rotary and Lions Clubs also collaborated with GRCS. The relationship was on developing and implementing joint projects and activities in specific locations to meet specific challenges.

At the international level, GRCS strengthened its relationship with Governments (e.g. China and Japan), International Committee of the Red Cross, International Federation of Red Cross and Red Crescent Societies, Partner National Societies (e.g. Swiss Red Cross, Iranian Red Crescent, Finnish Red Cross, Red Cross of China Japanese Red Cross, and American Red Cross) among others. Within the UN family Ghana Red Cross also collaborated with WHO, UNICEF, UNDP, UNDPF UNHCR, and UNV. These organisations provided technical and financial support to facilitate the implementation of certain actions.

The main challenge with the relationships was that most of the joint activities were of short-term and not strategic enough to provide the medium to long-term development perspective actions on the ground. It is crucial that in the next Strategic plan (2016-2020) efforts are made to develop long-term Memorandum of Understanding (MoU) relationships and projects for implementation.

3.5 Monitoring and Evaluation

Monitoring and evaluation was built into specific project activities implemented. Subsequently the 2011-2015 Strategic period did not see much of monitoring and follow-up support services especially from the national office through the regions and districts as a major stand-alone unit. Activities including monitoring and evaluation were designed, implemented and reports produced based on the project specifics.

Even though the annual Operational Plans have information targets and indicators, there is little evidence on the extent to which broad organisational performance evaluation was conducted during this period. In this context, it becomes difficult to assess the holistic impact of the programme on the beneficiaries and organisation in general because of the short term nature of projects. This Strategic Plan will endeavour to ensure that monitoring and evaluation issues are taken care of within the context of time and resources.

3.6 Organizational Development

Activities under organizational development (OD) sought to strengthen administrative systems and structures as well as capacity issues to enhance the development of GRSC's activities through its organisation structures from national to the community level. Over the period, GRCS continued to pursue its decentralisation process with the regions and districts having some level of autonomy in their decision-making and income generation activities. However, strategies have not been well developed to monitor the level of income generated and the extent to which it is utilised. Issues of skills enhancement have not been well coordinated. It is largely based on needs of staff and volunteers working on the Society's activities. Some of the regional and district offices are also not well capacitated to meet their mandate as expected of them. This Planning period will work at improving actions in the OD domain.

3.7 Dissemination and Outreach on IHL, Fundamental Principles and Values of Red Cross Society

One of the core mandates of the Red Cross Movement is effective dissemination of International Humanitarian Law, the Fundamental Principles and Values and Ideals of the Red Cross Society and the protection of the Emblem. The Ghanaian population in general may be aware of the Society because of the Emblem and the embodiment of the Society. However, issues relating to operational activities and focus of the Society may be lost on most of the citizens if GRCS does not reposition itself and also do an aggressive dissemination of its activities and principles guiding its humanitarian interventions.

In line with the above, this Strategic Plan shall place emphasis on raising and or deepening awareness of the citizenry about International Humanitarian law, the Fundamental Principles and Ideals of the Red Cross Movement and protection of the Society's emblem. The bottom line is to ensure that the Red Cross as a Movement is better known and explained and, ultimately, GRCS in particular is better appreciated through various publications and publicity, media dialogue, and other diverse means of dissemination. This is expected to result in increased support of communities and other stakeholders to the work of GRCS, respect for humanity and alleviation of human suffering especially of the most vulnerable.

3.8 Youth, Membership Development and Volunteer Management

During the last planning periods, the National Society has witnessed systematic expansion of youth programmes both in scope and coverage. The youth has a total population of 40,537 volunteers and it is increasing day by day.

During this strategic period 2016-2020, more initiatives towards youth, and volunteer development as well as membership expansion, management, retention, facilitation and motivation shall be emphasized. Particular interest will be placed on raising both the numbers and profile of volunteers and members further, to attract and retain more professionals and other categories of persons that may bring additional resources to the Society. Follow-up activities for trained, retained and motivated volunteers and active members shall be critical in this. Expected to be garnered is more quality service and commitment of volunteers and members.



3.9 Communication, ICT and Public Relations

During the life time of the Strategic Plan 2011-2015 not much was invested in this area of our work and this has reflected in inadequate capacity in respect of ICT equipment and human resources. Not much was heard of GRCS activities and efforts and the impacts it has made in target communities. During the life of this Plan period (2016-2020), GRCS will strengthen organizational capacity in communication, information dissemination, learning and sharing for a good corporate image and self-sustenance. This involves up-scaling GRCS' MIS to march the technological advances in this area. It will also include improved GRCS corporate image and networking systems at intra- and inter-offices from national through the regions to the districts and communities. GRCS will take advantage of the penetration of mobile telephony to complement this effort.

4.0 Outcome of SWOT Analysis of Selected Areas GRCS Programmes

This section focuses on assessing the various elements of the Society using the SWOT Analysis framework. The outcome is presented in the matrix below. The analysis identifies the various

elements and proposes strategies to enhance them within this current Plan (2016-2020).

Table 1: Strengths, Weaknesses, Opportunities and Threats

Strengths	Strategies to maintain Strengths
GRCS is recognized by Act of Parliament as an auxiliary to Government in provision of humanitarian services	Engage and lobby Government for resources and strengthen partnerships with relevant Government sectors
Adherence to the 7 Principles of the Red Cross Movement and unique emblem	Build on the uniqueness of GRCS to articulate and market herself as a leading and neutral humanitarian agency to attract increased funding and support
Comprehensive governance and management structures at all levels exist within the Society	Deepen more strongly existing governance and management structures to enhance high performance of GRCS structures.
Enhanced corporate image of GRCS which attracts partnership and funds from local and external sources	Enhance dissemination of the mission and values, International Humanitarian law, fundamental principles and ideals of the Red Cross Movement to strengthen further the already good image
Nation-wide network of committed volunteers and support from community to national level	Enhance increased support to volunteers to motivate them and sustain the spirit and values of Red Cross
Nation-wide asset base (logistics, land, buildings, volunteers, communication, finance, etc.)	Harness the existing sources of IGAs and develop/acquire other assets to expand resource base
Weaknesses	Strategies to address Weaknesses
Inadequate management of mechanisms for resource mobilisation	Develop innovative resource mobilisation (fundraising) strategy.
Inadequate resource mobilisation and under-funded projects limits range and coverage of activities in all branches	Bring on board from the cadre of GRCS volunteer experts who have the appropriate competences in resource mobilisation
Human resource challenges: attractiveness of the Society as an employer	Enhance trainings, promotion with competitive incentive structures for all staff to sustain a motivated workforce
Weak Information Management system and reporting stifles timely communication and information sharing within agency and to external partners	Improve ICT by installing appropriate technology development, including computers and internet facilities to facilitate quick and faster flow of information within programmes, departments, regions, districts communities and GRCS in general
Limited support to regional/District structures and insufficient staffing limits ability to offer technical backup to regions and district	Strengthen capacities of regions/district units by providing appropriate technical staff and training with and required funding support
Weak volunteer management and support system	Improve the support given to volunteers and ensure facilitation commensurate with work carried out for GRCS programmes
Inadequate M&E partly a result of incoherent programs/projects which limits ability to assess impact	Strengthen M&E and coordination of all GRCS programmes, building synergies across individual programs
Limited support, induction and facilitation of Regional Governing Boards	Improve on the capacity of Governing Boards through trainings on governance and management, facilitation and appropriate orientation of new Board members
Opportunities	Strategies to harness Opportunities
Availability of network of partners that respond to calls in times of disasters and emergencies.	Harness the opportunities for partnership and collaboration to expand the support provided to affected people.
Conducive national policy, Appropriate legal instruments and stable political climate	Harness the policy and stable political environment to expand



Improvement in ICT in Ghana	Improve timely internal communication and information sharing and dissemination to various stakeholders.
Goodwill from the community, Government, and international agencies	Strengthen public relations and good corporate image at all levels
The Head of State as the Chief Patron of GRCS	Harness the collaboration between GRCS and the Presidency for image building
Threats	Strategies to counter Threats
Changing donor priorities	Enhance resource mobilization strategies; employing relevant technical staff able to read the direction of donor interest.
Global economic crisis and dwindling aid	Strengthen capacity of GRCS branches (regions and districts) to mobilise resources.
Inadequate public infrastructure as a hindrance to fast, efficient response to disasters and emergencies	Advocate and lobby Government to improve on infrastructure especially the roads so as to ensure that all the vulnerable people are reached
Emerging competitors in provision of (quality) humanitarian services	Strengthen core programmes of the National Society; areas where GRCS has a niche.
Escalating natural and man-made disasters	Enhance effective risk and disaster mapping and ensure timely information for appropriate planning and effective response

Section IV

Strategic Direction 2016-2020



4.1 Vision

To be the Leading Volunteer-Based Humanitarian Service Provider in Ghana

4.2 Mission

Ghana Red Cross Seeks to Prevent and Alleviate Human Suffering by Mobilising the Power of Humanity

4.3 Core Values of GRCS

The core values of GRCS are:

- Rapid and efficient response to emergency
- Teamwork, Dedicated Service, Competence
- Respect for Human Dignity
- Strengthened Partnerships
- Leadership
- Integrity

4.4 Principles of the International Red Cross and Red Crescent Movement

The principles of the International Red Cross and Red Crescent Movement, which guide Ghana Red Cross Society, include the following:

- Humanity
- Impartiality
- Neutrality
- Independence
- Voluntary Service
- Unity
- Universality

4.5 Goal of Strategic Plan 2016-2020

The broad goal of the Strategic Plan is:

Sustainable improvement in the quality of life of the most vulnerable individuals, households and communities in Ghana

4.6 Strategic Direction for GRCS during 2016-2020

This Strategic Plan 2016-2020 proposes two broad strands of the Society's Strategic Direction in the next five years, namely

(i) Institutional and Organizational Development, and

(ii) Programmes and Projects for Service Delivery. This is aimed at building a more resource and endowed National Society with appropriate systems to be able to effectively and efficiently develop and sustain programmes and service delivery. The suggested changes in the strategic direction are further aimed at enhancing coordination and synergies between and among GRCS' departments, regional, district and community branches.

4.7 Broad Objectives of SP 2016-2020

- a. Enhance institutional and organizational development for efficient and effective service delivery, and self-sustainability.
- b. Scale up programs and projects for service delivery to most vulnerable and affected individuals, households and communities to prevent and alleviate human suffering

4.8 Strategies of SP 2016-2020

4.8.1 Objectives and Strategies for Institutional and Organizational development

Objective 1: Develop and diversify resources available to GRCS for sustainable delivery of service

Strategies to achieve Objective 1 include:

- a. Expand options and opportunities for generating resources targeting Government, donors, corporate bodies and communities for support
- b. Increase access to resources through grant soliciting and management
- c. Enhance capacity building of staff, management and governance in resource mobilization and management including proposal development, granting and IGAs
- d. Strengthen emerging and existing local sources of IGAs at district, regional and national level to stimulate local fundraising
- e. Expand resource base by strengthening and exploiting Assets and other commercial development.
- f. Advocate for incorporation of GRCS activities in the national and local government's annual budgets, and for basket funding of activities.
- g. Engage government for review of the GRCS Act to include tax reliefs, exemptions, direct financing of programmes and core cost.



Objective 2: Strengthen organisational development to effectively and efficiently plan and implement programmes and projects

Strategies to achieve Objective 2 include:

- a. Assess and revisit existing policies, procedures, rules and programs for improved performance.
- b. Strengthen performance of Governing Boards through appropriate capacity building and support services
- c. Strengthen the capacity of branches for effective and efficient service delivery
- d. Expand office buildings and other infrastructures including equipments at headquarters, regional and districts to enhance performance.

Objective 3: Strengthen GRCS core cost funding, managerial systems and procedures for effective organisation and administration of the Society

Strategies to achieve Objective 3 include:

- a. Review and strengthen the managerial functions/systems (planning, organizing, directing, and controlling) for effective attainment of GRCS goals
- b. Strengthen procurement, transport and warehousing management systems
- c. Enhance audit function at headquarters, regional and district levels of GRCS
- d. Enhance human resource management, development and appraisal and reward systems at all levels of the National Society to sustain a highly motivated staff
- e. Develop and institutionalize unit/departmental performance appraisal systems to regularly assess plan implementation by units
- f. Review and strengthen core cost management

4.8.2 Objectives and Strategies for Programme/Project Development and Implementation

Objective 1: Improve the health status of vulnerable and affected communities by reducing morbidity and mortality arising from common diseases and health emergencies

- a. Build community capacity to manage public health emergencies and disease outbreaks

- b. Mobilize general public for donation of adequate and safe blood
- c. Mitigation of the spread of HIV and AIDS, STIs, TB and other infectious diseases through education for prevention, access to treatment, care and support of infected and affected persons
- d. Reduce stigmatisation on people affected with infectious, contagious diseases and other disabilities.
- e. Increase social mobilization and access to health services to reduce morbidity and mortality from malaria, immunisable diseases and other common diseases.
- f. Improve access to adequate and potable water and improved sanitation at targeted households, institutions and communities.
- g. Improve access and increase awareness to reproductive health services.
- h. Increase awareness on non-communicable disease through health education and regenerative activities.
- i. Improve Maternal and Child health through safe delivery, antenatal and exclusive breast feeding using trained volunteers including mothers clubs to carry out house to house education.
- j. Improve and increase eye care services in the communities.

(All these strategies will be implemented using the CBHFA and the BENCOM methodology among others)

Objective 2: Strengthen community resilience and institutional capacity to ensure disaster risk reduction, response and impact reduction

- a. Design effective risk mapping for timely and appropriate response to human-induced and natural disasters
- b. Respond effectively and timely to all disasters affecting the most vulnerable communities.
- c. Assisting families, who are scattered, separated and without news in times of disasters and in specific social cases through an efficient and operational relief services
- d. Develop and implement appropriate disaster risk reduction interventions for the vulnerable communities including food security and environmental management
- e. Build capacity within GRCS in addressing climate change to enhance effective risk reduction including



Objective 3: Ensure there is adequate knowledge in first aid skills and provide services to residents in the country.

- a. Strengthen capacity in first aid training skills for instructors and first aiders.
- b. Increase First aid training for the general public
- c. Increase the number of commercial first aid training to corporate organizations, institutions and individuals.
- d. Increase first aid and ambulance services at events.
- e. Improve on Emergency Response and first aid services for accidents victims.
- f. Develop and improve sale of first aid kits to the general public.
- g. Revise first aid training manual, First aid book and community health and first aid book.

Objective 4: Strengthen GRCS' capacity and role in dissemination of Values and Principles of the Red Cross Movement and International Humanitarian Law

- a. Strengthen capacity of GRCS staff and volunteers at all levels to distribute materials and communicate more effectively on values and principles of the Red Cross Movement and International Humanitarian laws to target audiences
- b. Enhance capacity of GRCS' in sharing and dissemination of values and principles of the Red Cross Movement and International Humanitarian laws to all humanity
- c. Enhance capacity of GRCS' Branches to document and efficiently share/disseminate best and promising practices in humanitarian work.



Objective 5: Strengthen communication and sharing of information for enhancing synergised organisational processes within GRCS and for external visibility and accountability

- a. Support documentation, publication, and communication of GRCS objectives, principles, core values and activities
- b. Enhance communication for increased interaction between management and employees

- on all matters concerning policy, plans, conditions of service, health and welfare
- c. Improve networking systems across communities, districts, regions and national and with other partners to make use of existing expertise within and outside the Society
 - d. Enhance stakeholders' recognition of GRCS as lead agency in humanitarian work through which resources can more effectively be channelled to serve the needy

Objective 6: Stimulate initiatives for GRCS mothers Club, youth, volunteer and membership development and management for increased self-reliance

- a. Mobilize, recruit, develop, and retain the youth as the most active volunteer force to respond to their vulnerabilities and needs of other vulnerable people in the community
- b. Mobilize, recruit, develop, and retain mothers clubs as an active volunteer force to respond to health promotion, gender issues, their vulnerabilities and needs of other vulnerable people in the community.
- c. Mobilize, recruit, and expand a professional volunteer membership alongside a strengthened wider volunteer force for the Society.
- d. Develop and implement membership management systems to raise quality of membership for improved productivity and self-sustenance

Objective 7: Advocate for removal of barriers in policies and programmes that prevent the poor and vulnerable from having access to improved services

- a. Develop internal capacity for policy analysis as a basis for engagement with national and local governments towards pro-poor policies to focus on needs, equity, sustainability and accountability
- b. Develop advocacy strategy and implementation framework to guide advocacy actions and processes
- c. Strengthen citizens capacity to engage duty bearers/local government and demand for improved services and accountability

Section V

Cross-Cutting Themes

5.1 Cross Cutting Themes

These are themes which are fundamental to the work of GRCS. They cut across all the elements – Mission, Vision, and objectives of the Society at different levels of operations. Recognising these issues and integrating them into programmes and activities for implementation are critical to achieving programme outcomes. Two of these are Gender and managing the learning outcomes of any activity implemented

5.2 Mainstreaming Gender into Programmes and Projects

GRCS considers crucial mainstreaming gender into all its programmes and projects from design through implementation to monitoring, evaluation and reporting processes. This is based on our experiences from our work in the communities that any form of challenge affects women and men differently. They also have different capacities to respond to these challenges. In the area of disaster management, there is the realization that not only were women among the most affected by natural and human-induced disasters, but that they were also the people requiring most support in the post-disaster environment since they bore primary responsibility for care of the young, the elderly, the sick and those living with disabilities. The breakdown of infrastructure, displacement and isolation, collapse of family and social support networks all specifically added to women's burdens in their social roles, while increasing women's vulnerability, especially to sexual and domestic violence. The loss of male bread winners and the male heads of household and/or livelihoods also contributed to increasing women's burdens and responsibilities.

Most women do not have adequate skills - including literacy, and resources- combined with their lack of experience in the public sphere, makes it difficult for them to engage with relief and emergency response mechanisms that do not pay adequate attention to these realities. Women are most present in areas of employment within the agricultural and informal sectors, which are often the worst affected by disasters; thus the rates of unemployment among women after a disaster are inordinately high.

Climate change is not gender-neutral; particularly women are the ones who are hardest hit when they meet with the changes in the access and quality of natural resources. If there is no clean drinking water or fuel to home, they have to walk longer, often over rough terrain to get it. Women are the last to eat in the family. Therefore, if there is less food, there will be no leftover for them. In addition they are often exposed to polluting substances of inferior fuel. This is worsened by the fact that the woman's body carries the reproductive organ, making her extra sensitive during and after pregnancy.

Within the context of this Strategic Plan (2016-2020), GRCS will devote particular attention to some of these issues as raised above. Some of the specific programming interventions will include reviewing its internal policies and strategies to make them 'gender-compliant'. This will be supported with training for all persons involve in GRCS programmes and activities from the Headquarters to the community level. All programmes, projects and activities will have gender issues clearly identified and integrated into them with clear budget lines to support the activities. Baseline studies and reporting systems will be reviewed to include gender disaggregated data and

monitoring indicators and these are expected in all reporting processes.

5.3 Knowledge Management and Learning

GRCS will dedicate resources within this strategic period towards learning arising from its interventions at different level of operations. It will build skills to facilitate documentation of project outcomes and impacts, what works and what does not work and use the lessons to enhance implementation of existing programmes and also to inform in new programme designs. Learning outcomes identified will also be used to inform advocacy and communication actions. Learning will be shared across and among Units/Departments at both horizontal and vertical levels to ensure that learning becomes a tool for building capacity of staff. In this regard, GRCS will invest in managing knowledge accruing from the learning process.

5.4 Monitoring and Evaluation Framework (M&E)

Monitoring and Evaluating programmes and interventions will be integral part of any actions that will be implemented by GRCS within this Strategic Plan. This is because information from this process form essential part of learning and knowledge management. Current monitoring systems will be enhanced with improved technology and human resource. A national M&E framework developed at the headquarters linking the national to office programmes and activities at regional and district levels. The purpose of the M&E framework is to facilitate accountability of programmes implemented at all levels

Each programmatic area/department will develop its M&E plans based on agreed format and indicators which will be aggregated at the national level. The M&E processes would be participatory and will provide space to empower people to question the quality of work and resources used. It will be designed to achieve the following objectives:

- To determine the levels of progress in respect of projects/programmes being implemented by GRCS towards realization of goals and objectives by determining changes that have occurred;
- To document best practices (and bad practices) for learning and sharing and using result to refine programme implementation processes
- Account to impact groups and other stakeholders resources used for programme implementation

Monitoring of programmes will be done at regular interval but on continuous basis. For high risk programmes, monitoring will be frequent on monthly basis. For programmes with medium to low risks, monitoring will be quarterly basis. Each monitoring process will produce a report indicating whether the overall programme objectives are being achieved, the challenges and recommendation for improvement.

Monitoring progress will be related to expenditure on the progress to determine the burn rate on quarterly basis. This is to ensure that activities are implemented in line with budget. Appropriate participatory monitoring tools will be developed as part of the M&E framework. Mid-term evaluation and specific project evaluations will be conducted internally and by external consultants to assess programme and project outcomes.

5.5 Risk Management

The following are the key risk areas that could seriously affect our ability to deliver on the objectives laid out in this Strategy. This is not a comprehensive risk register.

a. Income

This strategy for fundraising is mainly through programme-related funding and core cost funding from partners. The key risks that could impact on our ability to deliver this are:

- i. **Predictability of Income:** In the world of dwindling resources and intense competition among NGOs/CSOs and in particular relief organisations, it is difficult to predict how much GRCS could realize. As part of this Plan, GRCS has prepared a detail budget and financial plan based on the actions outlined in the document. In addition to this, GRCS will develop a fund raising strategy to guide her in resource mobilisation process. GRCS will approach its traditional partners for funding support whilst working to attract new sources from both in-country and at international levels. It will be an efficient organisation capable of adding value to all resources received.
- ii. **Donor Fund Management:** Successful Donor fund management inspires credibility and confidence among the donor community. GRCS has good experience in this direction. However, the donor regulations keep on changing emphasizing more on Value for Money (VFM). GRCS will build its capacity and capacity of its Staff to understand donor processes and regulations and fund management.
- iii. **Planning and Budgeting:** GRCS need to plan for the intended shift in resource allocation. This will inevitably involve a move away from the current historical approach to budgeting towards a more strategic, outcome-led approach.
- iv. **Corruption:** The strategy envisages that local interests and planning structures will become increasingly important to us. Our work at all levels could be affected by corrupt practices (whether perceived or real) that are common with other sources of funding. In this regard GRCS will update its systems and procedures in respect of financial management. Where appropriate new policies and strategies including Conflict of Interest Policy will be developed to enhance programme and financial management and reporting. This will be geared toward making the Society more transparent and accountable to its constituents.
- v. **Economic Situation:** The current economic situation poses challenges in respect of programme budgeting and financing. Continuous increase in inflation may lead increase in prices of goods and services. This will have considerable impact on programme implementation especially where budget is denominated in Ghana Cedis. GRCS will negotiate with funding partners to denominate programme budgets in currency which is fairly stable and can support programme delivery even during inflationary period. Programme budget will also monitor the trends in inflation through Consumer Price Index and other mechanisms to ensure that programmes can withstand the pressures of price increases.

b. Volunteer Expectation and Apathy

The ability of the Society to achieve objectives outlined in the Plan, especially at the district and community level depends on the number and quality of its volunteers. Occasions have arisen

where the Volunteers have demanded incentives for which the Society as a whole was not able to meet. This caused some levels of apathy among the volunteers, especially in communities where other organisations are supporting their volunteers. GRCS will continue to work with these existing volunteers to deepen their understanding and appreciation of the role they play in their communities and the humanitarian values and principles underlying our actions. New strategies will be developed to recruit, train and retain new volunteers.

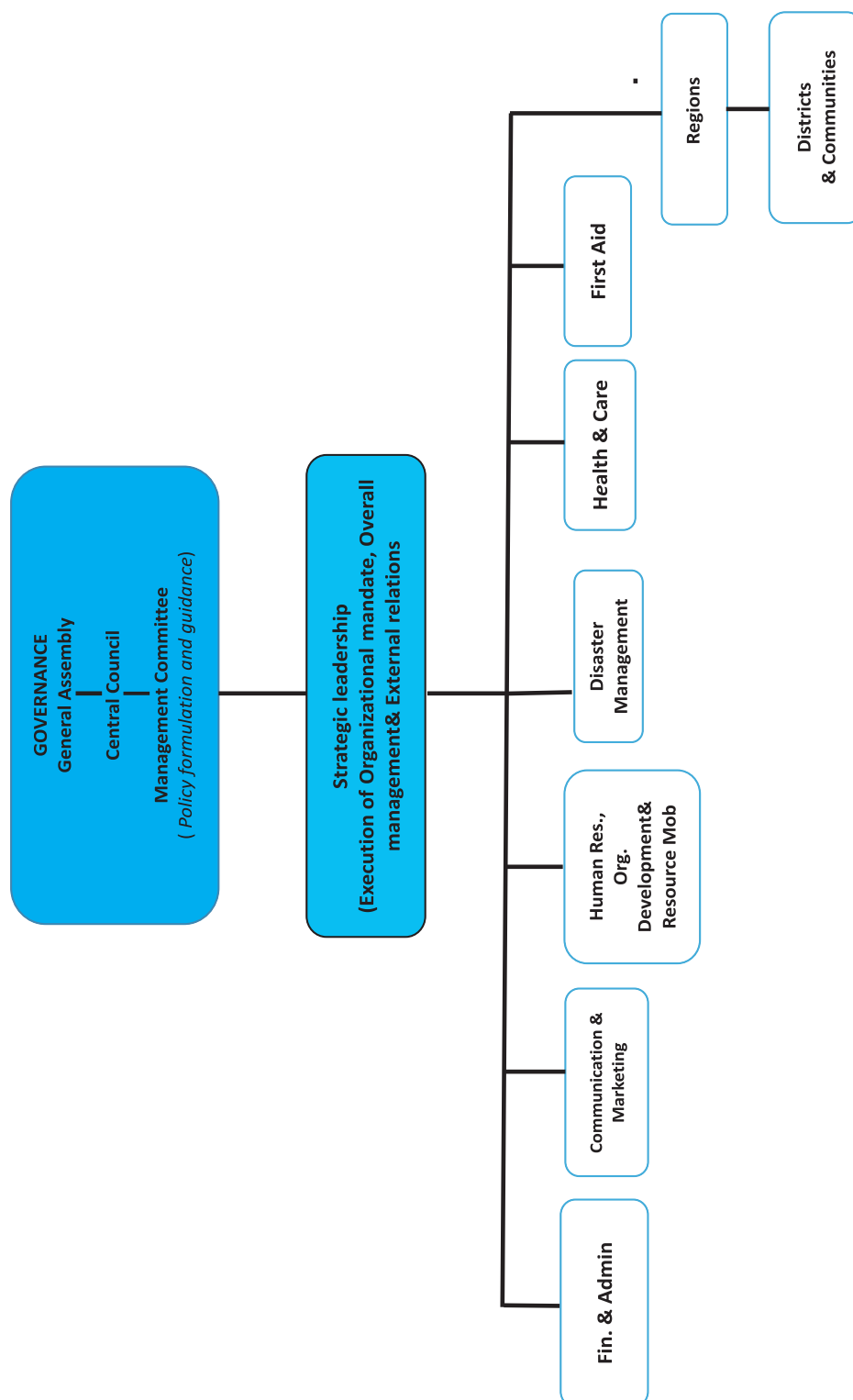
c. Levels of Expectation

There is a high degree of expectation from GRCS' stakeholders and partners especially when disaster strikes. The levels of expectation can only increase as we implement our new strategy. GRCS will develop mechanisms to manage this expectation in the context of resource availability.

d. Political Environment

Ghana is noted for its stability and ability to manage most of the internal conflicts which have occurred. This notwithstanding, there are locations in the country which are considered as 'conflict hotspots'. These conflicts are mostly related to Land litigation, Chieftaincy disputes and during political elections. The year 2016, marking the beginning of the implementation of this Strategic Plan is also an election year. This period may be characterized by tensions among political parties and their members. These tensions could affect stability of project communities and thereby delay project implementation processes. Women, children and persons-with-disabilities are most affected when tensions lead to violent attacks. It is important to factor this instability and insecurity of the environment into this planned period.

GRCS Program Based Organisational Structure



Appendix

OD	-	Organizational Development
GRCS	-	Ghana Red Cross Society
PM&E	-	Planning, Monitoring and Evaluation
DM	-	Disaster Management
H&C	-	Health and Care
ICRC	-	International Committee of the Red Cross
NDPC	-	National Development Planning Committee
DACF	-	District Assembly Common Fund
DDF	-	District Development Facility
MMDA	-	Metropolitan and Municipal District Assembly
WFP	-	World Food Program
GSGDA	-	Ghana Shared Growth Development Agenda
MTDP	-	Medium Term Development Plan
JMP	-	Joint Monitoring Programme
MDG	-	Millennium Development Goal
MICS	-	Multiple Instructor Cluster Survey
CHPS	-	Community-based Health Planning Service
OPD	-	Out Patient Department
NHIS	-	National Health Insurance Scheme
NCCP	-	National Climate Change Policy
NCCAS	-	National Climate Change Adaptation Strategy
UNFCCC	-	United Nation Framework Convention on Climate Change
NGO	-	Non Governmental Organization
NADMO	-	National Disasters Management Organization
CBHFA	-	Community-Based Health and First Aid
MNCH	-	Maternal Neonatal Child Health
LLBN	-	Long Lasting Bed Nets
NCD	-	Non Communicable Disease
ECV	-	Epidemic Control for Volunteers
IFRC	-	International Federation of Red Cross
PNs	-	Partner National Society
UN	-	United Nations