

Programme update

Myanmar

MAAMM002
4 January 2012

This report covers the period
1 July to 30 November 2011

*A hand-washing game underway in Auk O East village in Magway region in October, in conjunction with Global Hand Washing Day.
Photo: Hasan Hamou / IFRC*



In brief

Programme outcome

- Lives of affected people are saved and improved through timely and effective disaster response and increased community participation in risk reduction activities, supported with corresponding organizational strengthening.
- Safe and healthy living conditions are provided through community-based health and first aid, and promotion in health and care, and water and sanitation
- MRCS becomes stronger at all levels to deliver quality community-based services to the vulnerable in Myanmar.
- Social inclusion and a culture of non-violence and peace are promoted through active humanitarian diplomacy.

Programme summary

The Myanmar Red Cross Society (MRCS) is carrying out response preparedness and disaster risk reduction activities through organization and training of emergency response teams at state and regional levels¹, as well as strengthening its warehouse and logistics management for a more rapid and systematic response to disasters. Lessons learnt and experience gained from the Cyclone Nargis, Cyclone Giri and Shan earthquake operations have provided good references in this regard. More recently in October, MRCS provided a timely response to the Magway floods in line with its contingency plan and standard operating procedure (SoP). The efforts above have been coupled with disaster risk reduction support to communities at-risk.

Community-based health and first aid (CBHFA) *in action* implementation, as a new approach, is slowly progressing, with MRCS capturing essential lessons along the implementation process to serve as a good reference and guidance for replication of the approach in other areas in the future. Additional CBHFA facilitators at township levels have been trained to augment the required support in activities to be conducted with community volunteers. Communicable disease control, first aid, and water and sanitation activities, while

¹ Myanmar consists of administrative structures known as states or regions.

implemented separately from CBHFA, are also integral to CBHFA and are moving towards that direction. MRCS continually contributes to the supply of safe blood through voluntary non-remunerated blood donors mobilized by Red Cross volunteers. With health education sessions, community awareness on communicable diseases has increased and vulnerable people are better able to cite symptoms of diseases and take preventive measures. With good first aid skills gained through first aid training, immediate first aid response by volunteers and communities will help save lives in emergencies either in homes or during disasters.

The Division of Organizational Development of MRCS has been busy with preparations to support Red Cross branches in facilitating community-based projects through a branch capacity assessment, in accordance with a branch development model that has been revised and further developed (based on an earlier model) and recently approved. This effort has been complemented with approved financial guidelines for branches – these guidelines are being disseminated to branches and project staff through training. An income generation unit has also started to draft income generation guidelines and a handbook for branches.

MRCS has continued to exert efforts in media relations, volunteer capacity building, and dissemination of the Fundamental Principles and humanitarian values of the Red Cross Red Crescent Movement.

Financial situation

The total revised 2011 budget of CHF 3.65 million (USD 3.93 million or EUR 2.96 million) was covered up to 94 per cent. Expenditure during this reporting period of July to November 2011 was CHF 2.85 million or about 78 per cent.

Reallocation of funds from the Cyclone Nargis operation

With the approval of partners, approximately CHF 5.3 million comprising the unspent balance of funds from the Cyclone Nargis recovery relief and recovery operation was recently transferred to the annual programme budget. These funds will be used to support MRCS activities over the next few years in areas such as disaster management, water and sanitation, health and care, and organizational development. Details on the sectoral allocation of these funds will be provided in forthcoming annual IFRC programme reports.

[Click here to go directly to the financial report.](#)

No. of people we have reached

Up to 185,854 people benefited directly and 119,382 people indirectly from the IFRC-supported programmes during the July to November 2011 reporting period.

Our partners

MRCS continues to benefit from a number of multilateral and bilateral partnerships. Ongoing key multilateral support comes from Canadian Red Cross, Finnish Red Cross/Finnish government, Hong Kong branch of the Red Cross Society of China, Irish Red Cross, Japanese Red Cross Society, Netherlands Red Cross, Norwegian Red Cross, and Swedish Red Cross. MRCS also works with the in-country partner national societies of Australia, Denmark and France on various bilateral programmes. MRCS's cooperation with the International Committee of the Red Cross (ICRC) continues in the area of communications and support to prosthesis workshops and training. MRCS maintains important partnerships with Burnet Institute, UNICEF², UNFPA³, UNHCR⁴ and UNOPS⁵, as well as the Ministry of Health, Ministry of Social Welfare, Relief and Resettlement, Ministry of Education, Ministry of Home Affairs and local authorities.

On behalf of Myanmar Red Cross Society, IFRC would like to thank all partners and donors for their invaluable support of this programme.

Context

Following the general elections on 7 November 2010, a new central government and state/regional governments were officially put in place between March and April 2011. New ministries at central and regional

² United Nations Children's Fund (UNICEF).

³ United Nations Population Fund (UNFPA).

⁴ United Nations High Commissioner for Refugees (UNHCR).

⁵ United Nations Office of Project Services (UNOPS).

levels have expressed their willingness to support the humanitarian activities and development work of UN agencies and other humanitarian actors. State and regional governments may play a bigger role in future disaster response as demonstrated after the earthquake in Shan State in March 2011. However, the actual level of cooperation extended by various ministries varies from one to another and remains to be determined. Progress has also been seen in visa approval processes for expatriate delegates working for humanitarian missions in the country or visiting Myanmar for the same purpose. While some gaps continue, the progress is noteworthy.

The Cyclone Nargis operation concluded in September, bringing a vast amount of experience and lessons learnt to MRCS and IFRC - these will be helpful when proceeding with the various activities projected for the coming year. The exposure of MRCS as a major responder during Cyclone Nargis has increased the profile of the organization as a main actor in emergency response among the government, the UN system and other stakeholders. The final report on the operation has been published and is recognized by partners especially within the Red Cross Red Crescent Movement.

The Cyclone Giri emergency and early recovery operation has evolved into a 'recovery proper' initiative which has received a significant level of support from Movement partners. This is recognized within the UN coordination system, and the inter-agency initiative involving various actors is expected to be a well-coordinated effort.

The support of the Hong Kong branch of the Red Cross Society of China and Swedish Red Cross for CBHFA implementation, has been extended to 2012 in order to facilitate and achieve the level of community ownership that the project aims for. The Austrian Red Cross-supported water and sanitation project has also received approval for an extension to 2012.

The MRCS partnership meeting conducted on 17 and 18 October with IFRC country office assistance, saw a renewal of support from several of the 12 partner national societies in attendance.

Although there were some delays in the implementation of the annual programmes of MRCS, a good level of overall progress was achieved through the effective management of available resources.

Progress towards outcomes

Disaster management

Programme purpose: Reduce deaths, injuries and impact from disasters.

Outcome: Lives of affected people are saved and improved through timely and effective disaster response and increased community participation in risk reduction activities, supported with corresponding organizational strengthening.

Achievements

Programme component: Response preparedness

Strengthening disaster response capacity

In order to strengthen its disaster response capacity, MRCS has initiated the establishment of emergency response teams (ERT) in all regions. As an introductory step, MRCS conducted the first national disaster response team (NDRT) training in September for 42 participants. The training was facilitated by RDRT⁶-trained staff and supported by MRCS technical programmes, specifically public health in emergencies, first aid, psychosocial support, water and sanitation, and restoring family links. The participants were from six states/regions from various parts of the country, and their selection was based on the recent disaster history of the states and regions. These 42 NDRT-trained participants (including six women) are now establishing emergency response teams (ERT) in their respective states and regions. They are also part of their respective ERTs (each team has a total of six members), acting as team leaders.

⁶ Regional disaster response team (RDRT)

NDRT training was conducted for seven days while ERT training is conducted over five days. ERT training has already been conducted in the Yangon, Magway and Tanintharyi regions. Training in the Ayeyarwady and Mandalay regions, and Rakhine State is scheduled to be completed in December 2011.

Disaster preparedness stock

During this reporting period, MRCS procured almost 3,100 standard relief packages containing non-food items (NFI). The procurement is related to the aim of replenishing the society's disaster preparedness stock⁷ at an average of 3,000 packages per year. This replenishment, which covers all of the society's 22 warehouses in strategic locations throughout the country, will facilitate the society's response to disasters at any given time. Distributions of disaster preparedness stock during this reporting period (July to November 2011) include 1,150 packages for flood-affected communities in Magway Region as well as about 1,000 packages for internally displaced people in Kachin State.

The construction and completion of the society's new warehouse in Yangon in September this year is also part of overall efforts to strengthen the society's disaster response capacity.

The new warehouse, which was constructed with the support of Japanese Red Cross Society, is managed by MRCS staff. It is being used to store disaster preparedness stock at Yangon level to facilitate response to disasters in the vicinity, while also existing as part of the society's nationwide network of warehouses.



The new warehouse in Yangon.

Photo: MRCS

Emergency management fund

During this reporting period, the bank account for the society's emergency management fund launched earlier in the year, was opened for the purposes of accumulating the capital amount for the fund. So far, the fund's capital amount stands at about CHF 162,000, consisting of a contribution of CHF 150,000 from Japanese Red Cross Society and CHF 12,000 from MRCS itself.

According to the agreement, the fund can be used by the National Society once the CHF 500,000 ceiling for the capital amount is reached, with only interest generated from the capital account being available for use. The fund will be used to enhance the society's capacity to respond to local disasters through the replenishment of disaster preparedness stock, deployment of assessment teams and the local transportation of disaster preparedness stock. A brochure was developed by MRCS/IFRC and distributed to partners during this reporting period as a means to advocate the usefulness of the fund and to generate support for it.

Strengthening warehouse management

While MRCS planned to upgrade seven warehouses in 2011, only three were selected for upgrading in 2011 as the society's ownership of the remaining four warehouses needs to be confirmed. The upgrading works are in progress and scheduled for completion by the end of the year.



Flood-affected communities in Magway Region receive MRCS relief packages. Photo: MRCS

⁷The annual stock count stands at about 6,700 standard non-food item relief packages

Disaster response

Aside from various small- and medium-scale disasters in the country which MRCS responded to with distributions of disaster preparedness stock, the society engaged in the following larger-scale responses:

Magway Region flood operation

Heavy rains caused flash floods in Magway Region on 19 October, severely affecting 2,650 households in four townships. The flooding also led to 161 fatalities. The townships are Pakoku, Seikphyu, Pauk and Myaing.

MRCS volunteers from the affected township branches responded immediately by giving first aid and health care to affected people. As Seikphyu township has been participating in both the community-based disaster risk management (CBDRM) and school-based disaster risk reduction (SBDRR) projects in 2011, community volunteers actively supported evacuation, search and rescue, and relief activities. MRCS also deployed one senior staff from headquarters to provide support in assessments, coordination, relief operations and reporting. A total of 1,177 households were provided with standard relief packages – these comprised disaster preparedness stock stored in the society's warehouses in Magway and Yangon. See table below for distribution breakdown. IFRC DREF⁸ support is being used to replenish 1,150 relief packages – see [details](#) on the DREF Operation launched on 3 November.

Township	Distributions of relief packages
Seikphyu	600
Pakoku	327
Pauk	200
Myaing	50
Total	1,177

Community shelter kits were also distributed to affected households; each kit was shared by about five families.

Cyclone Giri operations

Relief and early recovery

The final activities of MRCS's overall relief and early recovery operation⁹ for communities affected by Cyclone Giri which hit Rakhine State in October 2010, were completed in the months of June and July this year. They comprised health, and water and sanitation activities conducted in the townships of Myebon and Pauktaw.

The health activities which were supported by Swedish Red Cross, benefited 4,000 families between December 2010 and June 2011. The families are in 30 villages located in both Myebon and Pauktaw townships. The main activities comprised health education on communicable diseases and hygiene promotion extended to the affected families. In connection with this, mosquito nets, oral rehydration salts, and information, education and communication (IEC) materials were distributed to the families. Other activities included the provision of psychosocial support, training of 200 Red Cross volunteers, and the procurement and distribution of first aid kits for the volunteers.

The water and sanitation activities which were funded by AusAID¹⁰ through Australian Red Cross, benefited 3,500 families and children in 60 schools. Conducted between December 2010 and July 2011, the activities consisted of distributions of purified water, rehabilitation of existing water sources, construction of new water sources, construction of latrines, and the distribution of information, education and communication (IEC) materials.

Recovery operation

Following the successful conclusion of the relief and early recovery operation for Cyclone Giri-affected communities, a recovery operation is being planned for Myebon township. The new operation will be conducted in eight village tracts, focusing on livelihood and shelter interventions. The preparatory phase for recovery activities has concluded – this includes assessments conducted with the support of Red Cross Volunteers previously trained during the Cyclone Nargis operation, and the formation of village tract recovery committees with the participation of affected communities and local government representatives. The plan of

⁸ Disaster Relief Emergency Fund (DREF).

⁹ This overall operation which included a DREF operation, as well as support from ECHO (The European Commission's Humanitarian Aid and Civil Protection department), AusAID and the Swedish Red Cross, assisted approximately 14,000 families.

¹⁰ Australian Agency for International Development.

action includes the integration of disaster risk reduction elements into the recovery operation. The actual recovery operation will start in the beginning of 2012 and is scheduled to be completed by June 2012.

Capacity development

Two staff members from the society's disaster management division participated in the following regional events during this reporting period:

Event	MRCs representative/participant	Date	Location
Regional workshop on good practices and policies in community-based disaster risk reduction (CBDRR)	Head of disaster management division	22-23 Oct	Thailand
RDRT-Logistics	Logistics Officer	14-18 Nov	Malaysia

Programme component: Disaster risk reduction

Community-based disaster risk management (CBDRM)

MRCs reached an additional 14 communities during this reporting period out of the 30 targeted communities for the community-based disaster risk management (CBDRM) programme in Magway and Bago regions for 2011. The first 16 communities were reached during the first reporting period of the year (January to June). The total number of people trained in the CBDRM process at village level, during this reporting period (July to November) is 420; 50 per cent of whom comprised women. Training included community mobilization, hazards and vulnerability mapping, as well as the use of vulnerability and capacity assessment (VCA) tools, along with basic counter measures, all of which are aimed at reducing risks at community level. Besides these, participants were trained in early warning, facilitation, coordination and leadership skills. A further breakdown of the CBDRM programme areas and details is given below:

No	Bago-East region			Magway region		
	Township	Village / communities	Potential hazards	Township	Village / communities	Potential hazards
1	Thanatpin	Tar Wa YaeTa Khar	Strong wind	Pwint Byu	Zee Kyun	Land slide, fire, snake bite
2		Ka Mar Se	Strong wind, flood		Ah Nauk Layu Ein	Flood, fire, snake bite
3		Nat Yae Kan	Strong wind, drought		ThaNatWa	Flood, fire, snake bite
4	Waw	Thu Ye Thu Mein	Flood, drinking water scarcity	Yenangyaung	Chaing	Fire, flood
5		Ta Naw Kyun	Drinking water scarcity, flood		PinWa	Landslide, fire
6		Shan Kaing	Flood, strong wind		HpaYeKyun	Landslide, fire
7	Daik U	Hpaung Taw Thi	Strong wind, dengue	Chak	Chaung Tet	Fire
8		Ka Toke Hpa Yar Gyi	Strong wind, dengue		Pa Day Thar	Landslide, fire
9		Thone Gwa	Drinking water scarcity, flood		Let Pan Kyun	Landslide, fire

No	Bago-East region			Magway region		
	Township	Village / communities	Potential hazards	Township	Village / communities	Potential hazards
10	Phyu	Oke Hpyat	River bank erosion, flood	Seikphyu	Than ZaLon	Landslide, fire
11		Ban Laung	River bank erosion, flood		Ah Shey Kan Twin	Flood, fire
12		Ka Nyin Daing	Flood, strong wind		Saik Khan	Flood, fire
13	Tantabin	Chaung Wa	Flood, strong wind, river bank erosion	Yesagyo	Mee Laung Kyun	Landslide, fire
14		Ohn Pin	Flood, dengue		PaKhan Nge	Land slide, fire, HIV risk
15		Zee Hpyu Thaug	River bank erosion, flood		Taung U	Water shortage

All these 30 communities are utilizing the CBDRM kits received through the programme, to further strengthen disaster preparedness plans at village level. The 62 CBDRM facilitators previously trained and comprising Red Cross volunteers, are making regular field trips to support the trained villagers in revising their vulnerability and capacity assessments and updating their village disaster preparedness plans. Information, education and communication (IEC) materials provided are also helping to enhance the knowledge and skills of the trained villagers as well as their fellow villagers, ultimately contributing to overall risk awareness and risk reduction practices.

The entire CBDRM programme for 2011 has supported 962 individuals (900 villagers and 62 Red Cross volunteers) as direct beneficiaries, whereas 82,500 other villagers are the indirect beneficiaries of this programme.

School-based disaster risk reduction

One school-based disaster risk reduction (SBDRR) facilitators course was conducted during this reporting period in Magway Region for 31 people. This brings the total number of facilitators trained in 2011 to 63, as per the target set for the SBDRR programme.

During this reporting period also, 20 SBDRR teams were formed in 20 schools in the Bago and Magway regions, thus fulfilling the targets for 2011. As a result, a total of 663 direct beneficiaries (63 facilitators and 600 students) and 10,000 indirect beneficiaries (students) have been reached through this programme, as targeted.

Of the 63 facilitators, 29 are women. The facilitators were trained in community mobilization, facilitation skills, and vulnerability and capacity assessments which included village-level hazards and capacity mapping. They were also guided to identify available resources and develop seasonal calendars for schools as well as possible counter-measures to reduce the impact of disasters.

The SBDRR teams have been formed by teachers who comprise the largest group of facilitators. Each team consists of 30 students with equal membership of girls and boys, who are trained in basic vulnerability and capacity assessments which include village-level hazards and capacity mapping. They are also being guided to identify available resources, develop seasonal calendars within their respective communities and possible counter-measures to reduce the impact of disasters. The teams are being encouraged to raise disaster awareness and disseminate preparedness messages among the remaining student population as well as their individual families and wider communities.

The teams have each been provided with an SBDRM kit to be used to strengthen school-level disaster preparedness plans and in awareness-raising activities. Each kit contains disaster risk reduction (DRR) materials such as ropes, life jackets, a stretcher, hand-held loud speaker, buckets, tarpaulins, first aid kits, fire beaters, DRR manual, and information, education and communication (IEC) materials.

Other activities

In conjunction with the International Day for Disaster Reduction (every second Wednesday of October), MRCS mobilized communities and school children in targeted areas for the CBDRM and SBDRR programmes in 2011, to engage in social mobilization activities. In this connection, village-level teams trained in CBDRM repeated VCA exercises for their respective villages and revised their disaster preparedness plans on that particular day. IEC materials were put on display at village level with the support of local authorities. At SBDRR-targeted schools, an essay competition was organized. MRCS also participated at national-level celebrations held in Nay Pyi Taw, the country's new administrative capital.

To support MRCS township branches in strengthening their capacity to manage disaster management programmes, the society's disaster management division, together with the organizational development division, will conduct branch capacity assessments using a checklist that will help determine the type of support needed by branches.

Progress on remaining activities of the Cyclone Nargis recovery operation

As indicated in the final report of the recently concluded Cyclone Nargis recovery operation, updates on remaining activities would be provided in annual programming reports. As such, details follow:

Construction of MRCS township branch offices

On the request of the National Society, branch offices are being constructed in Pyapon and Labutta townships. IFRC support consists of monitoring construction progress as well as the disbursement of construction payments. The buildings are meant to aid the Red Cross township branches in implementing activities for the benefit of vulnerable communities. Construction of the building in Labutta was completed at the end of November. A completion report is being prepared by the Township Red Cross Supervisory Committee and will be submitted to MRCS and IFRC. Construction of the office in Pyapon is 70 per cent complete. The remaining works are expected to be completed by mid-December, in accordance with the targeted time-frame.

Construction of household shelter

A total of 58 household shelters were constructed in the sub-township of Hainggyikun between late October and late November. A remaining 54 shelters are scheduled to be completed by early December. Construction of these houses was delayed because they were provided for communities in remote parts of the Delta, who were recently relocated. The monsoon rains (May to October) compounded the delays, along with a local practice adopted by some communities (of abstaining from construction activities) during the Buddhist Lenten period which ranges from July to October. The houses are part of the extensive household shelter project comprising the construction of 16,376 homes, as part of the Cyclone Nargis recovery operation. Monitoring activities have been conducted by the MRCS township branches and IFRC.

Constraints or challenges

As MRCS disaster management colleagues are based at the society's new headquarters in Nay Pyi Taw, the country's new administrative capital, and thus spend most of their time there, there are now reduced opportunities for discussions with the IFRC delegate on strategies, planning and implementation of activities. However, a collaborative effort has been undertaken by MRCS and IFRC to try to reduce the constraints brought about by the relocation of MRCS staff to Nay Pyi Taw.

MRCS is in the process of getting township Red Cross branches to apply financial guidelines which have been developed for them, with the aim of helping speed up the implementation of activities.

Health and care

Programme purpose: Reduce the number of deaths, illnesses, injuries and impact from diseases, public health emergencies and disasters.

Outcome: Safe and healthy living conditions are provided through community-based health and first aid, with health and care promotion and water and sanitation.

Achievements

Community-based health and first aid (CBHFA)

Implementation of CBHFA in the eight targeted townships (Leiwei township in the new capital of Nay Pyi Taw, Tounggup township in Rakhine State, Pauk Khaung township in Bago Region, and five townships in the Cyclone Nargis-affected Ayeyarwady Region) is going on at different levels.

CBHFA committees

In all of these townships, CBHFA committees have been established with a corresponding village-level CBHFA committee formed for every targeted community – this amounts to a total of 40 village-level CBHFA committees. This was preceded by extensive and lengthy advocacy initiatives, and these entailed MRCS headquarters staff and the township Red Cross branches meeting with local authorities and communities. The advocacy sessions focused on explaining how CBHFA-in-action builds on local capacities and enhances the health, safety and resilience of communities. The respective CBHFA committees which have been established are now tasked with the responsibility of supporting and supervising the local implementation of activities.

As part of its commitment towards using community-based approaches in working with communities, MRCS has adopted the CBHFA-in-action approach, and is in the process of learning lessons from its implementation, to be used as guidance when the programme is expanded to other areas in the future. These lessons will also contribute towards other ongoing community-based efforts.

Trained community volunteers led by a community volunteer leader for each targeted community, are facilitating community mobilization for the purposes of community-level assessments, discussions and action planning, and later on, the implementation of community initiatives. Cumulatively, a total of 796 community volunteers (50 per cent of the total target) have been trained together with 171 community volunteer leaders. The initial training focused on the Red Cross Red Crescent Movement, community organization, community mobilization and community assessments. The 24 master facilitators trained during the early part of the year supported this training.

Out of the 40 targeted communities, 14 (35 per cent) have been supported to develop their community plans of action based on the results of the individual community assessments and community discussions. In order to capture the current health and social status of the community before community interventions are implemented in 2012, a baseline survey is due to be conducted in the targeted communities. A survey form which was based on the CBHFA survey template, has been modified to adapt to the local situation and has already been translated into the local language.

Other translated materials that are being used to support the implementation of activities are the CBHFA implementation guide, facilitators' guide, modules and manual, IEC¹¹ materials and PMER¹² tools.

At the community level, interest has been expressed by communities in supporting local activities and this will need some follow-up.

A training session for CBHFA facilitators was also conducted from 21 to 28 November for 25 participants to augment the number of trained facilitators in the targeted areas and other community-based health project areas. It also included a workshop for headquarters project staff and township Red Cross volunteers, and was aimed at developing a common understanding of the CBHFA-in-action approach.

Financial procedures

To support staff and local branch volunteers, training on financial procedures and PMER was conducted from 17 to 20 November. Participants comprised headquarters staff, 2 i-Cs¹³ and Red Cross volunteers from respective CBHFA-targeted areas.

¹¹ Information, education and communication (IEC).

¹² Planning, monitoring, evaluation and reporting.

¹³ Second-in-command i.e. the leader of the township Red Cross volunteer brigade. The head of a township Red Cross branch (the Red Cross volunteer brigade is part of the branch) is the Township Medical Officer.

Lessons learnt

While implementation is progressing, lessons are also being captured – to this end, staff and volunteers have identified that implementation steps can use simple and comprehensive key activities without missing the components required to fulfil CBHFA minimum requirements, thus reducing time and resources. The monitoring of this entire process will help produce more realistic plans in the future.

Branch capacity

A branch capacity assessment is due to be conducted with the organizational development division in order to identify key areas in which MRCS township branches will need support as they monitor and supervise CBHFA activities.

Other activities

One of the CBHFA coordinators participated in the CBHFA lessons learned workshop in Bangkok during the latter part of September.

Four representatives from the Hong Kong branch of the Red Cross Society of China led by the chairperson of the International and Relief Service Management Committee, together with the head of the IFRC country office visited Leiwei township in late August. They observed community activities including household visits and community meetings as well as hygiene promotion activities in a school. The Hong Kong branch of the Red Cross Society of China is supporting CBHFA implementation in this particular township.

Monthly coordination meetings of the CBHFA Steering Committee at headquarters level have also been conducted during this reporting period to discuss the progress of CBHFA implementation.



The workshop for CBHFA facilitators conducted in Nay Pyi Taw in November. Photo: MRCS

The community-based health development project in Magway Region

This project is targeted at 40 communities or villages in the townships of Natmawk and Pwintphyu in Magway Region. It aims to improve the capacity of communities to reduce the incidence of priority communicable diseases by engaging in hygiene and sanitation practices, with the support of township Red Cross branches. In this connection, 832 Red Cross volunteers reached 6,584 households in both townships during this reporting period. The following activities were conducted:

Existing targeted areas

Monitoring and follow-up activities were conducted by Red Cross volunteers in 30 communities where implementation has already been undertaken. Activities included distributions of:

- Latrine pans and pipes to 419 households during this reporting period. Out of the total distribution target of 2,000 households for 2011, a total of 1,849 was reached between January and November. Monitoring by volunteers has shown that 95 per cent of households have constructed their latrines.
- 3,052 rubber boots were distributed to farmers and labourers as protection from snake bites.
- 4,043 mosquito nets (LLIN)¹⁴ were distributed to households to prevent malaria and dengue.

¹⁴ Long-lasting insecticide-treated nets.

Township Red Cross volunteers also visited the villages to check on the use of rubber boots and mosquito nets among targeted households. These monitoring visits are conducted once a month and are complemented with health education sessions featuring specific interventions based on seasonal situations.

About 148 patients (sick and injured) were also referred by the Red Cross volunteers to health facilities, and were provided with support for transportation costs.

New targeted areas

For the 10 new villages targeted for this project, the respective village health committees have been supported to undertake steps identified in their individual community action plans. These included community needs assessments and mapping of water sources requiring rehabilitation. Technical support was provided by the MRCS water and sanitation team.

Monthly volunteer meetings have been conducted at village level while quarterly township-level meetings for steering committees have been conducted to follow up on activities and submit reports.

Other activities or events

In October, a field visit to the two townships was conducted by the MRCS headquarters teams, IFRC, and the Finnish Red Cross regional representative, to observe community activities and meet with volunteers and the respective township steering committees. Finnish Red Cross supports this project.

Two project staff participated in a PMER workshop and financial management training from 17 to 20 November and also participated in the CBHFA facilitators workshop from 21 to 28 November. Both events were conducted at the society's headquarters in Nay Pyi Taw, and were aimed at increasing the understanding of the CBHFA-in-action approach and to learn from experiences and lessons in other project or programme areas.



During a school-based health education session, children learn about life-saving measures to be taken during a choking incident.
Photo: MRCS



A villager collects water from a well in Pa Kyar Htoo village in Natmawk township.
Photo: MRCS

Various health and care projects

Public health in emergencies (PhiE)

With a limited budget to implement public health in emergencies (PhiE) activities for the second half of the year, MRCS focused on the training of 56 Red Cross volunteers from 14 townships in the Bago and Magway regions. They were trained in prevention, control and response to communicable disease outbreaks (dengue, diarrhoea, human and avian influenza, and malaria) during the months of September and November. This activity included distributions of 1,060 pamphlets on hygiene promotion, hand washing posters, and first aid flip charts. The materials are being used in health education sessions conducted by the trained volunteers. Additionally, oral rehydration salts (12,300 sachets) which were procured earlier, were distributed to Red

Cross Brigades and trained Red Cross volunteers, for prevention and treatment of acute diarrhoeal cases. During the Magway floods in October, 8,000 sachets were distributed to identified cases. The PhiE project is also supporting the training of ERT members (*described in the Disaster Management section above*) on PhiE issues.

See also the *Disaster Management section above* for health, and water and sanitation support provided to Cyclone Giri-affected communities.

Tuberculosis project

The tuberculosis project is being implemented in eight townships in the Ayeyarwady Delta (comprising Cyclone Nargis-affected areas), in collaboration with the Ministry of Health's national TB programme.

During this reporting period, 152 trained Red Cross volunteers were actively involved in case detections, referrals of suspected cases, and care and support. The following specific activities were undertaken:

- TB prevention and control messages were disseminated to 9,535 persons.
- Peer education was conducted among 16,474 family members of TB patients/suspected cases and 6,288 members of the general community.
- Among 606 suspected cases which were referred to health centres, 226 (35 per cent) were confirmed as TB cases and were given DOTS¹⁵ treatment, materials and psychological support by trained Red Cross volunteers. Of the 226 confirmed cases, 134 are sputum positive patients. Between July and October, the 226 patients were supported with TB Care kits, cereal, vitamins, handkerchiefs and educational material.
- Monthly volunteer meetings were conducted in every township for the purposes of sharing knowledge and experiences. Red Cross volunteer activities have also been monitored by project staff.

As CBHFA is also being implemented in five Cyclone Nargis-affected townships, follow-up action in reference to TB cases will be continued by the CBHFA community volunteers.

HIV project

MRCS's *HIV Project* is conducted in three townships in Mandalay Region and one township in northern Shan State, targeting three specific groups:

- youth aged between 14 and 25
- truck and bus drivers and their assistants, and
- people living with HIV (PLWHIV) and their families

The following activities were conducted during this reporting period:

- a refresher course was conducted in July for 36 Red Cross volunteers comprising 18 volunteers assisting with the *Trucker* target group and another 18 assisting the *Care and Support* target group. The purpose of the training was to update the volunteers on skills and knowledge needed in extending care and support to people living with HIV and their families. Training discussions on basic community home-based care benefited from collaboration with the national AIDS programme and the Myanmar Nurses Association.
- mobilization of self-help groups in the three targeted townships in the Mandalay Region.
- a one-stop service for referrals, blood testing and counselling in coordination with the National AIDS Programme.
- peer education provided by 18 trained peer educators to *truckers* (truck drivers and their assistants) on prevention of further infection and also on care and support, to reduce stigma and discrimination. A total of 440 of these sessions reached 3,755 new beneficiaries (833 men/boys and 108 women/girls) and 2,814 repeat beneficiaries, in both Mandalay Region and northern Shan State.
- distribution of 26,784 condoms, 7,348 IEC posters and pamphlets, and 3,674 purses (for women) containing HIV prevention messages.
- a total of 160 persons (151 men/boys and nine women/girls) were referred to voluntary confidential counselling and testing, out of whom five were found positive (two men/boys and three women/girls).
- provision of nutrition support to 75 people living with HIV (PLHIV) was done during the period – this included one woman PLHIV who needed hospitalization support (Caesarean section). As a means to

¹⁵ Directly Observed Treatment Short course (DOTS).

help reduce stigma and discrimination and to facilitate socialization, the 75 PLHIV visited other areas within the project where they were able to interact with other beneficiaries and their partners.

Voluntary non-remunerated blood donor recruitment

The MRCS voluntary non-remunerated blood donor recruitment project aims to support the availability of a safe supply of blood in Myanmar by mobilizing the youth to voluntarily donate blood. In coordination with the organizational development division which is responsible for youth and volunteer management, reports indicate that 113 university teams with 10,082 members regularly donate blood and promote voluntary blood donation. Activities during this reporting period included the following:

- training of 110 voluntary blood donor recruiters from Magway Region (30), Sagaing Region (30), Yangon Region (25) and Mandalay Region (25).
- meetings for recruiters have been conducted on a quarterly basis for the purposes of sharing knowledge and experiences.
- a total of 5,000 IEC materials and 5,000 blood donor pins were distributed by recruiters during blood donation activities.

Water and sanitation activities

Emphasis on community consultations and discussions with local authorities

During this reporting period, the MRCS water and sanitation team identified the need to increase community consultations and discussions with local authorities in order to select the most vulnerable communities/villages in need of support. To this end, a training session on focus group discussions and PHAST¹⁶ was organized for MRCS volunteers from Magway Region (Yesagyo township) and Mandalay Region (Pyawbwe township). Following this, volunteers conducted focus group discussions within their respective communities, and findings were compiled in a combined report.

These findings, as well as that of the baseline survey conducted earlier in the year, have been shared with local authorities as well as township medical officers (who head the township Red Cross branches). All parties are in agreement with the findings, and as such discussions are now underway with the local Department of Development Authority regarding the specific type of water and sanitation interventions and designs to be undertaken. The focus of efforts will be to improve water sources and provide household toilets in the most cost-effective way.

PHAST tool kits

Participatory hygiene and sanitation transformation (PHAST) activities undertaken by trained Red Cross volunteers and community volunteers were further enhanced with the finalization of a PHAST tool kit adapted from ICRC and UNICEF PHAST tool kits. Volunteers from both townships have been trained in the utilization of PHAST methodology. A PHAST volunteer record book has also been developed based on the CBHFA manual, and has been introduced to volunteers for the purposes of providing a report on PHAST community sessions.



Global Hand-Washing Day was celebrated in Kyauk Tile village in Mandalay Region, where children and adults engaged in a hand stamping game in which they stamped their palms in paint to create a collage of palm prints, followed by a session of hand-washing.
Photo: Hasan Hamou / IFRC

¹⁶ Participatory hygiene and sanitation transformation (PHAST).

Emergency response equipment

The following units of emergency response equipment¹⁷ (ERE) have been rehabilitated to fully-functional level during this reporting period:

- two water purification units
- five water treatment units
- 50 water pumps
- six generators

Spare parts and chemicals have been ordered for the remaining ERE units. In accordance with a plan drafted previously on the pre-positioning of ERE units in seven strategic locations, three units have already been dispatched to agreed positions.

Other activities

- MRCS celebrated Global Hand Washing Day (15 October) between 5 and 28 October, with a good line-up of events, beginning with community-oriented activities in the water and sanitation programme area in the Magway and Mandalay regions. The programme area spans eight villages in two townships. Activities included drawing competitions and hygiene awareness sessions in schools, community-level competitions, and distribution of soap and buckets. Educational video clips on hand washing with soap were also produced by MRCS and broadcast on national television for a week beginning from the day of the global celebration. Preparation for the event also saw close cooperation among various in-country agencies through the coordination of the Water, Sanitation and Hygiene (WASH) thematic group. The group serves as a forum for all water and sanitation actors to coordinate their activities and share information. In connection with Global Hand Washing Day, MRCS was nominated by the group to lead a sub-group which was responsible for receiving, storing and distributing IEC materials and soap donated by the Myanmar Federation of Soap Manufacturers.
- The water and sanitation team responded to the recent Magway flash floods by deploying an ERE¹⁸ unit and distributing water purification tablets and containers.
- The water and sanitation team facilitated water and sanitation sessions during the national disaster response team (NDRT) training (*described in the Disaster Management section above*) held in Yangon and the subsequent emergency response team (ERT) training sessions in several states and regions between the months of August and November.

First aid

Several first aid courses were conducted during this reporting period to enhance the first aid skills of MRCS volunteers and communities in general. They are as follows:

- an Instructors' Course for 58 school teachers in Shan State. The teachers are also expected to conduct first aid training for students and communities in their respective townships.
- in a joint project with the International Committee of the Red Cross (ICRC), MRCS conducted first aid training in southern Shan State for 601 people (294 men/boys and 307 women/girls).
- MRCS also conducted first aid training for staff from external organizations such as the Yangon Region Central Supervisory Committee for Motor Vehicles (Central), University of Civil Services (Phaunggyi) and Department of Social Welfare. This effort reached a total of 3,100 people.

Monitoring of the activities of trained instructors is also being undertaken.

Other activities

- In conjunction with World First Aid Day on 10 September, MRCS conducted a first aid competition among 13 states and regions with six participants per state or region. The competition was a way of determining the level of first aid skills, as well as skills in need of strengthening through a refresher course. An essay competition was also conducted to highlight success stories in actual first aid experience.

¹⁷ Emergency response equipment is the term MRCS uses to refer to water and sanitation Emergency Response Unit equipment used during the emergency phase of the Cyclone Nargis operation, and which were thereafter donated to the society. MRCS has a total of 14 EREs.

¹⁸ Emergency Response Equipment (ERE).

- The first aid and safety services division also facilitated the first aid component in the recent national disaster response team (NDRT) training (*see Disaster Management section above for details*).

CBHFA

The first aid and safety services division will also support the implementation of the CBHFA-in-action approach. To this end, two headquarters staff members participated in the recent township CBHFA facilitators workshop in order to have a better understanding of the programme.

Constraints or challenges

The major challenge in reference to the CBHFA programme is its sustainability, particularly the commitment of communities to continue activities as well as the long-term engagement of CBHFA-trained Red Cross volunteers with communities. As this is linked with volunteer management challenges, closer coordination and consultation between the health and organizational development divisions is needed.

While some attempts have been made towards integrating the work of MRCS divisions and units, closer coordination and consultation is needed for the purposes of adopting an integrated approach towards CBHFA and all other community-based activities across all programmes.

Organizational development

Programme purpose: Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.

Outcome: MRCS becomes stronger at all levels to deliver quality community-based services to the vulnerable in Myanmar.

Achievements

Following the organizational development (OD) delegate's departure from the IFRC country office in August, the OD function of the country office to support MRCS, became a shared responsibility between the head of country office and the programme coordinator. This reporting period has seen more prominence in the need to strengthen inter-divisional coordination at headquarters level, thus leading to a coordinated approach towards the implementation of community-based projects.

Legal base

Discussions on proposed amendments to the MRCS Act are underway; there are promising chances of approval by Parliament under the new administration of the government.

Branch development

A branch development model (based on an earlier version) has been developed by MRCS with the support of IFRC. It contains a minimum set of requirements aimed at helping all township branches to function effectively. In addition, focus will be given to township Red Cross branches in areas where community-based projects are being undertaken, in that the branches will receive financial support to enhance the sustainability of the activities. The model was finalized and approved by the MRCS Executive Committee during this reporting period. To support the head of the society's organizational development division in this effort, a branch development coordinator was also recruited during this reporting period.

So far, the model has been introduced to 22 townships comprising:

- Eight townships where the community-based health and first aid (CBHFA) programme is being implemented.
- Ten townships where the community-based disaster risk management (CBDRM) programme is being implemented.
- two townships where the water and sanitation programme is being implemented.
- two townships where community-based projects are being undertaken through bilateral partnerships between MRCS and partner national societies.

This has been coupled with the development and approval of branch financial guidelines which have begun to be rolled out through training of headquarters staff who are in charge of relevant projects, as well as 2 i-Cs¹⁹ and Red Cross volunteers in the CBHFA areas.

In order to provide support which branches will need to meet the minimum requirements of the branch development model, a branch capacity assessment will be conducted among all township branches where community-based projects are being undertaken, followed by all remaining branches.

Awareness-raising sessions on the branch development model as well as the society's *Strategic Plan 2011-2015* have so far, reached 56 of all state and regional-level Red Cross structures and 43 per cent of Red Cross township branches.

Red Cross Youth and Volunteers

The following activities have been undertaken:

- A total of 6,260 Red Cross volunteers have been involved in MRCS community-based activities in health and disaster management during this reporting period.
- A total of 113 university Red Cross teams consisting of 10,082 members are regular blood donors (see *Health section above for more details*).
- Standard volunteer management guidelines have been drafted with the aim of retaining MRCS volunteers.
- To recognize the outstanding contribution of Red Cross volunteers including the Red Cross Youth, MRCS showed appreciation to 100 outstanding volunteers for their support during the Cyclone Giri and Shan Earthquake operations.
- The head of the MRCS organizational development division together with a youth member participated in the recent IFRC Southeast Asia Youth Directors Meeting in Brunei.

Financial management

With the Cyclone Nargis operation completed on 30 September, the financial books were closed and the final financial report for the operation was submitted in October 2011. Lessons learnt from the operation were applied in the Cyclone Giri operation, and will also be useful for future operations.

Financial guidelines have been developed and applied to township branches where community-based health and disaster management programmes are being undertaken. These guidelines simplify and standardize the financial procedures for community-based projects conducted in townships and are also applied to bilateral projects. Training in this regard was conducted for CBHFA project staff, 2 i-Cs and Red Cross volunteers, in November.

MRCS headquarters non-finance staff were also provided training in financial procedures to familiarize themselves with existing financial regulations.

The plan to replace the society's accounting software in 2011 has been moved to 2012 due to the heavy workload of the Cyclone Nargis operation. The locally developed accounting software used by hub offices²⁰ during the Cyclone Nargis operation, will be utilized in bilateral projects and at selected branches.

The external audit for the financial years 2001-2008 has been completed. The external audits for the 2008-2009 and 2009-2010 financial years are underway and scheduled for completion in January 2012.

Human resource management

The human resource (HR) unit and its procedures are being gradually recognized by all divisions and units, while full support has been extended by the MRCS governance to implement policies and procedures in accordance with the society's *Strategic Plan 2011-2015*. These are all encouraging developments. During this reporting period, the following achievements or progress were recorded:

¹⁹ Second-in-command i.e. the leader of the township Red Cross volunteer brigade. The head of a township Red Cross branch (the Red Cross volunteer brigade is part of the branch) is the Township Medical Officer.

²⁰ MRCS hub offices were additional structures set up in townships in the Ayeyarwady Delta for the sole purpose of facilitating implementation and support for the extensive Cyclone Nargis operation.

- Assisting the MRCS/IFRC Cyclone Nargis operation transition team in conducting an appreciation party and the provision of recommendation letters for staff, following the completion of their contracts. This follows two appreciation parties held during the first six months of the year for Nargis operation staff who concluded their contracts earlier.
- Development of a draft organigramme for MRCS headquarters.
- Development of leave regulations which have been approved by MRCS leadership, and have since been put in place.
- Development of an induction booklet for new staff – this is an ongoing effort.
- Development of staff regulations which are at the approval stage.
- Translation of HR procedures is scheduled for completion by December.
- An oil and gas company has approached MRCS to share the resumes of health officers, medical doctors, and first aid personnel, who have ended their employment contracts with MRCS.

Income generation

The society's income generation officer was appointed in July 2011.

This was followed by the preparation of the society's income generation policy and guidelines, financial procedures and handbook. They have been based partly on feedback received from a few township branches which have successfully engaged in income-generation activities. The documentation is now being reviewed by the MRCS leadership for the purposes of approval. MRCS is also planning to broaden the income generation unit into a resource mobilization division in order to be more sustainable for the future.

Pre-existing income generation activities undertaken by the society are:

- Production of oral rehydration salts (ORS)
- Printing press service
- Kit shop
- Water purification factory in Nay Pyi Taw
- Rental of office space in Yangon
- Several state and regional supervisory committees and township branches are engaged in their own income-generation activities to support their activities.

New fundraising/promotional activities undertaken during this period comprise:

- Participation in a shopping festival in November at a shopping centre through the installation of two booths for the display of humanitarian activities and the sale of promotional items from the kit shop.
- MRCS donation boxes are now located at the Yangon International Airport and most hotels in Yangon.
- Ongoing efforts include working with the first aid and safety services division to promote first aid training services and first aid kits, as well as possible partnerships with local farming businesses.

Other initiatives undertaken during this reporting period include meetings between the income generation unit and representatives of two Red Cross township branches which have successfully engaged in income generation activities, for the purposes of sharing their experiences and knowledge with other branches. At the same time, data on income generation activities undertaken at township as well as state or regional levels is being compiled. Income generation proposals are also being received from some township branches.

Constraints or challenges

- The need for organizational development funding to be an integral component of programmes could pose a challenge in the early part of the process. However, as long as clear directions are set by the leadership on the mechanism, it will become sustainable in the long run.



A Red Cross volunteer talks to interested youngsters about Red Cross activities on display at the MRCS booth at the Yuzana Plaza sales festival.

Photo: MRCS

- As all job interviews are now held in Nay Pyi Taw, the new location for the society's headquarters, timely coordination is needed between MRCS heads of division and their respective IFRC counterparts, in order to facilitate the necessary travel authorizations required for expatriate staff.
- As job applicants have been required to bear the cost of transportation to Nay Pyi Taw, as well as accommodation, many candidates have withdrawn their applications with the result that MRCS has lost the opportunity to hire skilled staff. As a measure to address this matter, MRCS will provide lodging facilities for job applicants and also reimburse their travelling expenses, as of mid-December 2011.

Humanitarian values

Programme purpose: Promote respect for diversity and human dignity, and reduce intolerance, discrimination and social exclusion.

Outcome: Social inclusion and a culture of non-violence and peace are promoted through active humanitarian diplomacy.

Achievements

During the July to November 2011 reporting period, efforts continued to be invested in media relations, volunteer capacity building, and the dissemination of Red Cross Red Crescent Movement principles.

With the experience gained from the Cyclone Nargis operation, the MRCS communications division is now assisting other divisions/units to strengthen their reporting and communications capacities.

Media relations and publicity

MRCS activities were publicized on about 200 occasions in the local media (print and broadcast) during this reporting period. The following are some of the publicized events which were made possible thanks to media relations, including media trips, which the communications division has been investing heavily in:

- a programme on the community-based revolving fund pilot project in the Ayeyarwady Delta - one of the livelihood initiatives under the Cyclone Nargis operation - was broadcast twice on the MRTV4 channel in September.
- a documentary on home-based care which Red Cross youth volunteers are providing to the elderly, was broadcast on the MITV channel.
- MRCS activities on World First Aid day and basic first aid information were aired on Shwe FM Radio.
- two hand washing TV spots produced jointly by MRCS, the Central Health Education Bureau and the Ministry of Health, were broadcast on 10 October on various TV channels, in commemoration of Global Hand Washing Day (15 October).
- the MRCS Partnership Meeting held on 17 and 18 Oct was broadcast on national television, and featured interviews with the MRCS president, the IFRC head of country office, and the Finnish Red Cross representative, among others.

Capacity building

The following capacity building initiatives were undertaken during this reporting period:

- Following the reporting training provided to Red Cross volunteers during the first half of 2011, a Reporting lessons learnt workshop was organized in July for the purposes of developing proper reporting guidelines to enable all branches to promptly record activities during future disasters and emergencies.
- Up to 92 volunteers (42 from six townships in Eastern Bago Region and 50 from seven townships in Rakhine State) were trained as branch communicators in September and November. In line with the need to link training received to application in regular activities, 30 communications inputs were submitted by these trained volunteers and included in the MRCS news journal for the July to November period. Similarly, in reference to 141 volunteers from 20 disaster-prone/community-based disaster risk management (CBDRM) townships who received communication training in March, August and November respectively, 46 communication inputs were received from these volunteers between June and November.

- The head of communication division participated in the Global Communications Forum jointly organized by IFRC and ICRC on 12-14 September in Geneva. A total of 123 Movement communicators around the world attended the forum including seven from Southeast Asia.
- With IFRC support, ten headquarters staff attended basic database training at a computer training centre. Two staff members were from the communication division while the rest were from other divisions and units.
- Two-day photography training for 35 headquarters staff was held in the last week of November. Targeting mainly programme staff, this training is aimed at enhancing regular reporting and communications products produced within programmes, as well as for wider MRCS use.



Training for branch communicators underway in Sittwe township in Rakhine State, in November. *Photo: MRCS*

Dissemination

The MRCS communication division has continued with its countrywide dissemination activities through its own arrangements as well as with ICRC support. A total of 4,780 people in all states and regions were reached during this reporting period – they included Red Cross Volunteers, students, military officers, local authorities, Red Cross branch leaders, teachers, and government officers.

Other events

In conjunction with World Humanitarian Day organized by UN OCHA²¹ on 19 August in Yangon, the MRCS President delivered a keynote address on behalf of all in-country humanitarian organizations. The society also put up a small photo exhibition and distributed dissemination brochures at the event.

A familiarization trip to the Ayeyarwady Delta, focusing on the achievements of the Cyclone Nargis operation, was organized in late August for the new IFRC regional communications manager.

Constraints or challenges

In view of the possible resignation of the head of the communication division as well as two staff members, MRCS will face challenges in sustaining current communications and reporting efforts if the recruitment of a suitable replacement to manage the division does not take place before the departure of the current head of division.

Working in partnership

Close coordination between MRCS and the IFRC country office is maintained through daily, weekly and monthly meetings. Coordination among Movement partners is facilitated through monthly meetings between MRCS, IFRC, ICRC and in-country partner national societies (PNS). IFRC also hosts monthly coordination meetings with the three in-country partner national societies and ICRC. IFRC facilitates the partnerships between MRCS and partner national societies such as Japanese Red Cross Society through the implementation of tripartite agreements in the areas of first aid. IFRC also continues to provide standard services to the in-country delegations of Australian Red Cross, Danish Red Cross and French Red Cross, in accordance with the administrative service agreements signed with them.

Ongoing key multilateral support for MRCS comes from Austrian Red Cross, Canadian Red Cross, Finnish Red Cross, Hong Kong branch of Red Cross Society of China, Japanese Red Cross Society, Norwegian Red Cross and Swedish Red Cross. MRCS also works with longer-term in-country partner national societies of Australia, Denmark and France on various bilateral projects. MRCS's cooperation with ICRC continues in the area of communications and support to prosthesis workshops and training sessions.

²¹ United Nations Office for the Coordination of Humanitarian Affairs.

MRCS also has important partnerships with UNICEF, UNFPA, UNHCR, UNOPS and Burnet Institute, and has maintained close relationships with the Ministry of Health, Ministry of Social Welfare, Relief and Resettlement, Ministry of Education, Ministry of Home Affairs, local authorities, and international and local non-governmental organizations. It is also a member of the national TB programme, as well as a member of the national AIDS/malaria technical working group. MRCS has become a sub-recipient of the malaria programme and is also supported by the TB programme, funded by the Global Fund to Fight AIDS, Tuberculosis and Malaria.

MRCS along with IFRC is also participating in the disaster risk reduction (DRR) working group meeting chaired jointly by UNDP and the government. Besides this, MRCS and IFRC jointly participate in the inter-agency shelter, WASH, DRR and health thematic working groups. With the support of IFRC and the involvement of all partners, MRCS has completed the translation of the Sphere²² handbook. It is expected that the national language version of the handbook will be in place during the first quarter of next year.

On 17 and 18 October, a partnership meeting was organized by MRCS with the support of the IFRC country office. The objectives of the meeting were:

- to provide an update on the wider humanitarian context in Myanmar and discuss the implications on MRCS and partnerships.
- introduce the MRCS Strategic Plan 2011-2015.
- share experiences and achievements from the Cyclone Nargis operation and other local disasters, and explore opportunities for the application of lessons learnt to future disasters.
- discuss MRCS programming approaches and priorities, and explore potential new areas of cooperation, support and resourcing.

Participants included representatives from Australian Red Cross, Austrian Red Cross, British Red Cross, Canadian Red Cross, Danish Red Cross, Finnish Red Cross, French Red Cross, Japanese Red Cross Society, Taiwan Red Cross Organization, Swedish Red Cross, Thai Red Cross and Singapore Red Cross. There were also participants from the Ministry of Health, Ministry of Education, Ministry of Social Welfare, Relief and Resettlement, and the UN. The day after the conclusion of the meeting saw a field visit to a township in the Ayeyarwady Delta to enable visitors to observe the impact of the Cyclone Nargis operation's recovery interventions. Side meetings between MRCS, partners and the IFRC country office were also conducted to discuss specific commitments.

Learning from the Cyclone Nargis operation has also been used in the form of a case study presented in Kuala Lumpur in November, for the International Diploma in Humanitarian Assistance course – the presentation was a joint effort between the MRCS President and the IFRC head of operations for the Asia Pacific zone office. Another gathering attended by both the MRCS president and the IFRC head of country office for Myanmar, was the disaster management workshop for heads of office from the Asia Pacific zone, which was also held in Kuala Lumpur during the latter part of this reporting period.

Contributing to longer-term impact

The society's Strategic Plan 2011-2015 provides for a community-based approach as well as the need to address gender and climate change issues. In this regard, the society's health and disaster management programmes are considering these matters in all components of their programmes. The practice of capturing lessons learnt and the emphasis of monitoring and evaluation in all interventions, as adopted in the Cyclone Nargis recovery operation, is now gradually becoming part and parcel of MRCS's entire package of activities which is laudable, in order to better assess the impact of activities.

In disaster management in particular, the continued interest in learning is helping MRCS to review its relevant documents and consider engaging in 'soft and hardware' activities in order to strengthen its preparedness and response measures to reduce the impact of disasters.

In health, the proper documentation of the steps required in the implementation of the CBHFA-in-action approach, will lead to the refinement of the approach and lessons learnt which will in turn benefit new communities when the programme is expanded in the future.

²² Humanitarian Charter and Minimum Standards in Disaster Response (Sphere).

The strengthening of Red Cross branches through the branch development model is a strategy that will contribute significantly to the sustainability of community activities.

The work being put together to revise the MRCS Act, upon finalization and approval by the government, will facilitate the projection of a more independent image of the National Society, which will further support all its activities.

Based on MRCS Strategic Plan 2011-2015, the IFRC country office has developed its long-term planning framework (LTPF) 2012-2015 to support the strategic directions of the National Society. A plan of action for 2012 based on the LTPF is presently under finalization. The IFRC country office has also submitted project proposals to a number of partner national societies for funding support for the 2012 plan of action and beyond.

Looking ahead

With the commitment of MRCS to becoming more community-based in its activities and the strengthening of its branches to support the process, the most vulnerable groups will be better reached and take a more participatory role in increasing their resilience against adversities. This community-based approach will assist in ensuring the sustainability of activities following the completion of programmes and projects.

Through its aims to strengthen its resource mobilization efforts, MRCS aspires to reach a level from which it will have a solid foundation to support an increasing number of activities for the benefit of vulnerable communities.

The emergency management fund (EMF) as well as the emergency response team (ERT) structure will support MRCS in maintaining an effective disaster response system. Its existing standard operating procedure (SOP) and contingency plan will be updated on a regular basis so that beneficiary selections, the mobilization of trained volunteers and staff during emergencies, and coordination mechanism will be further improved and made more relevant.

A comprehensive mechanism is also required to strengthen the management capacity of township branches for the purposes of strengthening the effectiveness and relevance of community-based programmes.

How we work

All IFRC assistance seeks to adhere to the [Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations \(NGOs\) in Disaster Relief](#) and the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable.

IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

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IFRC's work is guided by [Strategy 2020](#) which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of nonviolence and peace.

Find out more on www.ifrc.org

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International Federation of Red Cross and Red Crescent Societies

MAAMM002 - Myanmar

Interim Report

Selected Parameters	
Reporting Timeframe	2011/1-2011/11
Budget Timeframe	2011/1-2011/12
Appeal	MAAMM002
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure						Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL	
A		B						A - B
BUDGET (C)		2,126,311	716,946	365,422	85,123	363,548	3,657,350	
Relief items, Construction, Supplies								
Shelter - Relief	70,500	304,713					304,713	-234,213
Construction - Facilities	208,125	142,394					142,394	65,731
Construction Materials	184,074			47,598			47,598	136,476
Clothing & Textiles	222,238	266,904	-342				266,562	-44,324
Food			1,733				1,733	-1,733
Water, Sanitation & Hygiene	70,127	241,860	19,543				261,403	-191,276
Medical & First Aid	62,414	39,338	6,585				45,923	16,491
Utensils & Tools	68,000	12,014					12,014	55,986
Other Supplies & Services	280,696	-22,363	2,480				-19,883	300,579
Total Relief items, Construction, Supplies	1,166,175	984,861	29,998	47,598			1,062,457	103,718
Land, vehicles & equipment								
Land & Buildings	81,854	45,010		26,936			71,946	9,909
Vehicles	64,470	530	981				1,511	62,959
Computers & Telecom	25,460	4,959		786	1,741		7,486	17,974
Office & Household Equipment	13,050							13,050
Total Land, vehicles & equipment	184,834	50,500	981	27,722	1,741		80,943	103,891
Logistics, Transport & Storage								
Storage	117,099	51,848	343	155			52,347	64,752
Distribution & Monitoring	80,877	98,469	6,423	6		92	104,989	-24,113
Transport & Vehicles Costs	28,898	27,524	8,308	813		3,970	40,616	-11,718
Logistics Services		17,680				1,200	18,880	-18,880
Total Logistics, Transport & Storage	226,874	195,521	15,074	975		5,262	216,832	10,042
Personnel								
International Staff	364,470	61,185	88,121	34,873		111,367	295,546	68,924
National Staff	87,531	4,574	5,561	344		20,414	30,894	56,636
National Society Staff	343,391	60,374	76,817	39,885	8,059	1,736	186,871	156,521
Volunteers		45,181	27,387	2,020	156		74,744	-74,744
Total Personnel	795,392	171,315	197,885	77,122	8,215	133,518	588,055	207,337
Consultants & Professional Fees								
Consultants			3,224	1,286		2,650	7,159	-7,159
Professional Fees	13,125	167		715			881	12,244
Total Consultants & Professional Fees	13,125	167	3,224	2,000		2,650	8,040	5,085
Workshops & Training								
Workshops & Training	446,258	79,757	66,497	38,308	12,784	13,191	210,537	235,721
Total Workshops & Training	446,258	79,757	66,497	38,308	12,784	13,191	210,537	235,721
General Expenditure								
Travel	105,923	25,390	9,881	5,887	90	2,255	43,503	62,419
Information & Public Relations	185,098	60,468	23,164	7,486	3,847	2,456	97,422	87,676
Office Costs	54,100	6,187	7,679	2,915	3,335	2,573	22,690	31,411
Communications	25,635	14,611	1,978	1,562	529	9,106	27,785	-2,151
Financial Charges	72,731	20,168	-5,086	8,912	-986	-167	22,842	49,889
Other General Expenses	523	485	19			982	1,486	-963
Total General Expenditure	444,009	127,310	37,635	26,763	6,815	17,205	215,728	228,281
Contributions & Transfers								
Cash Transfers National Societies	150,000	150,000					150,000	0
Total Contributions & Transfers	150,000	150,000					150,000	0
Operational Provisions								
Operational Provisions		-30,764	100,383	19,826	4,231	32,677	126,353	-126,353
Total Operational Provisions		-30,764	100,383	19,826	4,231	32,677	126,353	-126,353

International Federation of Red Cross and Red Crescent Societies

MAAMM002 - Myanmar

Interim Report

Selected Parameters	
Reporting Timeframe	2011/1-2011/11
Budget Timeframe	2011/1-2011/12
Appeal	MAAMM002
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure						TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination			
A		B						A - B	
BUDGET (C)		2,126,311	716,946	365,422	85,123	363,548	3,657,350		
Indirect Costs									
Programme & Services Support Recov	228,383	112,366	27,357	15,620	2,196	13,293	170,832	57,551	
Total Indirect Costs	228,383	112,366	27,357	15,620	2,196	13,293	170,832	57,551	
Pledge Specific Costs									
Pledge Earmarking Fee		9,249	2,535				11,784	-11,784	
Pledge Reporting Fees	2,300	4,247	2,367	83	3		6,700	-4,400	
Total Pledge Specific Costs	2,300	13,496	4,901	83	3		18,484	-16,184	
TOTAL EXPENDITURE (D)	3,657,350	1,854,527	483,936	256,018	35,985	217,795	2,848,261	809,089	
VARIANCE (C - D)		271,784	233,011	109,404	49,138	145,753	809,089		