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# Development Operational Report Quarter 1&2 2013 India Country Office

 International Federation  
of Red Cross and Red Crescent Societies

## DOCUMENT INFORMATION

**MAAIN001**

**Individual responsible for this draft:** Enkas Chau/ Moushomi Choudhury

**Date:** 7 August 2013

## PROGRAMME INFORMATION

**Implementing Secretariat body / host National Society:**

IFRC / India Red Cross Society (IRCS)

**Geographical coverage:**

India

**Number of people to be reached:**

250,000 (direct beneficiaries), 5 million (indirect beneficiaries)

**Project manager:**

**Project Code:**

**Project title:**

**Annual budget (CHF):**

John Roche

PIN006

Capacity Building

21,156

Enkas Chau

PIN020

Preparedness & Resilience

285,320

Enkas Chau

PIN021

Tsunami Funds

709,574

Enkas Chau

PIN023

Monsoon flash floods

904,302

John Roche

PIN101

Delhi Delegation

56,871

Kaustubh KUKDE

PIN161

Disaster management

72,990

John Roche

PIN402

Community Based Health

123,947

**Total annual budget**

**2,174,160**

**Partner National Societies:**

American Red Cross, Belgian Red Cross (Flanders), Canadian Red Cross, Hong Kong branch of the Red Cross Society of China, German Red Cross, Iranian Red Crescent, Japanese Red Cross, Spanish Red Cross, Turkish Red Crescent.

**Other partner organisations:**

International Committee of the Red Cross, British Department for International Development (DFID), World Health Organisation (WHO), UNICEF.

## 1. Executive Summary

Flash floods triggered by cloudburst in Uttarakhand caused widespread devastation in mid-June this year. This has tested the First Medical Responders (FMR) concept which was piloted in Uttarakhand in the last two years. The FMRs have contributed significantly in the response operation, and has raised expectations in other 14 states where the FMR programme has been launched in 2013. The target disaster management (DM) programme state branches have trained FMR instructors at state level following the training of trainers organized by national headquarters. Training of FMR in two districts each in 14 states is being carried out.

The assessment of Viramgam warehouse of the Gujarat state has been completed. The report recommendations if implemented will optimize use of warehouse facilities as well as will improve its operational efficiency.

Due to earthquake in Jammu & Kashmir in May and Uttarakhand flash floods in June, many of the national level activities have been deferred. IRCS will reschedule the activities to complete the same before end of the year.

The three-year **disaster risk reduction (DRR) project in Maharashtra** state for building safer communities has been successfully completed by 30 April 2013. This was followed by a final review of the project with participation of representatives from Indian Red Cross Society (IRCS), the Hong Kong branch of the Red Cross Society of China and the International Federation of Red Cross and Red Crescent Societies (IFRC). **DRR Gujarat** project received no-cost extension approval from American Red Cross for two months until 30 June 2013. Phase II project has been planned to cover the following activities: a) additional mitigation measures, b) final review of the project, c) to document success of the programme through case studies, brochures and calendars etc.

Under the **health & care programmes**, IRCS continues to implement the India tuberculosis programme in 14 districts across seven states. During the reporting period, the National Society supported 974 of the annual target 1,180 patients and their families in accessing the DOTS treatment. Current reports indicate that IRCS will achieve 82 per cent patient adherence rate at the end of second quarter.

During the reporting period the social mobilization efforts to support the measles catch up campaign evidenced the completion of the campaign, covering 18 districts of Uttar Pradesh and Madhya Pradesh. Prior to the campaign the state branch trained 453 volunteers in the aforesaid districts, who in turn reached out to around 942,527 people in the designated catchment areas assigned to IRCS with information on measles, dates and venues of immunization and clarified myths which are prevalent in the target communities. As a result 1,049,990 children have been immunized.

As part of **organization development** programme initiative review of the previous IRCS National Strategic Plan Document (2009-12) was completed during 2012, and a revised version for coming years was drafted and is now under final review and approval by IRCS senior management.

The Annual General Meeting (AGM) of IRCS and the St John Ambulance (India) was held May 2013. The Honourable President presented awards to 26 IRCS and St. John Ambulance, India members, volunteers, and branches in recognition of their committed services.

Besides this, communication support was provided on IRCS activities following the Uttarakhand flash floods and social mobilization of the measles catch-up campaign including the following web stories:

- <http://www.ifrc.org/en/news-and-media/news-stories/asia-pacific/india/flash-floods-bring-devastation-to-uttarkhand-in-northern-india-62541/>
- <http://www.ifrc.org/en/news-and-media/news-stories/asia-pacific/india/young-volunteers-explain-importance-of-vaccination-in-india-61288/>

People reached for reporting period								
Direct recipients						Indirect recipients		Total people reached
Male		Female		Total		Planned	Actual	
Planned	Actual	Planned	Actual	Planned	Actual			Planned
				250,000	1,064,473	5,000,000	948,127	2,012,600

Volunteers during reporting period		
Male	Female	Total
		1,400

**Plans for next quarter:**

**Disaster Management:**

- Training of FMR will continue in the next quarter as well in 14 DM programme states.
- Automation of warehouse packaging and goods handling will be done.
- Proposal on sanitation in Odisha and Uttarakhand will be drafted.

- DM programme review meeting through video conferencing.
- Proposal for DRR programme in Bihar.

#### Health & Care programme:

- Care and support activities for 1,180 Cat II TB patients across seven states.
- A detailed review and process documentation of IRCS contribution in the measles campaign is planned in Q3 with a plan to disseminate the learning at the states and the national level in Q4. The overall planning of the extension phase to undertake the aforesaid activities are under process.

#### Organization Development:

- Follow-up on IRCS progress in endorsement of the draft strategic development plan 2013-2016.
- PMER training for 10 IRCS NHQ programme staff.
- Coordinate and prepare for OD representative from AP zone for visiting and discussing ToR for next plans for IFRC RMS system.

## 2. Financial Status

#### Financial status explanation:

- Some budget lines were revised down to reflect the funding situation and operational reality with the integration of India office with the South Asia regional delegation (SARD) office for next two quarters.

Budget and expenditure analysis (CHF)	
A. Annual approved budget	2,174,160
B. Total funding to date	1,798,503
C. Funding to date as % of annual budget (B ÷ A)	83%
D. Year To Date Budget	385,662
E. Total expenditure to date	478,489
F. Expenditure to date as % of YTD budget (E ÷ D)	124%
G. Expenditure to date as % of annual budget (E ÷ A)	22%

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

## 3. Situation/Context Analysis – (Positive & Negative Factors)

The past year has been significant in India, particularly in terms of the challenges in the social sphere of development. Despite well reported economic growth rates and some noted successes in responding to the challenges presented in achieving the millennium development goals (MDGs), the ever present gap between the wealthy and the poor, combined with complex social issues, is having significant impact on the nation's ability to realize broad and equitable development.

Issues related to gender discrimination and gender-based violence has come to the fore, particularly in the latter half of 2012 and beginning of 2013. Individual cases have led to public outcry including large scale demonstrations, and although authorities and civil society groups are eager to see action taken to protect women in public areas, there remains a need to also take longer term social action to change and improve the perception of some established gender assumption, which contribute to the current situation.

Intense cold wave continues to grip northern India after snowfall and rains in many parts since late December 2012 and beginning of January 2013. The cold wave was one of the most severe to hit India in decades, taking the lives of hundreds of people, and causing suffering to thousands more. The Jammu-Srinagar highway has been blocked after snowfall continued during mid-January. Various areas in the valley have suffered from long power cuts. Avalanche warnings have been issued for several areas

**Uttarakhand Flash Floods:** Heavy monsoon rains have triggered flash floods across Northern India, killing over 5,000 people and leaving tens of thousands stranded across the mountainous state of Uttarakhand. Officials

declared that the death toll could increase dramatically as many areas remain inaccessible.

Rescue operations are being hampered by damaged roads, continued bad weather and landslides. Many people are thought to have been washed away by the violent floods that swept down the River Ganges and its tributaries. Many of those affected were Hindu pilgrims and tourists from across the country visiting holy shrines in the province. Military helicopters and some 10,000 soldiers were engaged in search and rescue missions and have evacuated thousands of people, many of whom are still sheltering in temporary relief camps. More than 100,000 people were thought to be stranded.

IRCS is responding to the disaster from its national headquarters in Delhi and through its Uttarakhand state branch in Dehradun. Trucks of relief supplies, including tents and kitchen sets and a water purification unit, were dispatched from Delhi. In Uttarakhand, efforts are being made to mobilize 5,000 FMR – Red Cross volunteers who are who have been trained in emergency first aid and disaster management skills. However, with communication lines down across the state, it is proving difficult to establishing contact with volunteers, many of whom are from affected areas.

The Red Cross continues to work closely with the local authorities, helping in evacuation and rescue efforts as well as setting up relief camps and establishing its restoring family links service to help families who have lost contact with their relatives in the area. ICRC has delivered 1,100 body bags and will be assisting in purchasing and dispatching 1,500 body bags by the end of the week. Activities supported by IFRC will be included in the report in the next quarters.

**Jammu & Kashmir earthquake:** An earthquake with a 5.8 magnitude struck Jammu and Kashmir state on 1 May 2013 which has caused severe damage to houses and other infrastructure in Doda and Kishtwad districts. Preliminary government reports as of 5 May confirmed 11,856 damaged houses and leaving at least an equal number of families in need of temporary shelter. The district administration immediately provided tents and other relief material to the affected families. The stocks available with the authorities are exhausted since the number of people affected is very large. IRCS has mobilized relief supplies like tent and woollen blankets from its disaster preparedness (DP) stock in New Delhi. With support from IFRC DREF, this operation has included replenishment and distribution of the DP stocks and deployment of disaster response teams to earthquake affected areas.

#### 4. Analysis of Implementation

##### Business Line 2 – “To grow Red Cross Red Crescent services for vulnerable people”

Indicators (Examples)	Baseline (where available)		Quarter 1&2			Annual Target	Year to Date Actual	Year to Date % of target
	Date	Value	Target	Actual	% of Target			
<b>Outcome 1:</b> IRCS capacity to deliver relevant, speedy and effective humanitarian assistance and help communities recover from disaster is strengthened (Organizational preparedness – disaster preparedness/disaster response).								
a) 30% increase in number of people reached through IRCS disaster preparedness / disaster response interventions at various levels	2012	124,521	80,939	42,500	52.5%	161,877	42,500	26%
<b>Output 1.1:</b> IRCS national disaster preparedness and response mechanism is strengthened at various levels								
a) IRCS has updated operational contingency plan	-	-	-	-	-	1	0	0%

Indicators (Examples)	Baseline (where available)		Quarter 1&2			Annual Target	Year to Date Actual	Year to Date % of target
	Date	Value	Target	Actual	% of Target			
b) IRCS has developed and practicing standard operating procedures for disaster response	-	-	-	-	-	1	0	0%
c) IRCS has documented best practices in the form of at least two case studies	-	-	-	-	-	1	0	0%
<b>Output 1.2:</b> A functional training system for creating and improving disaster response skills in staff and volunteers at all level								
a) The NDRT curriculum is standardized and available for further trainings	-	-	-	-	-	1	0	0%
b) 25 volunteers/staff have been trained using standardized NDRT curriculum	-	-	-	-	-	1	0	0%
c) The FMR concept has been introduced at least in 5 states and FMRs have been trained at district level	2012	1	5	14	280%	5	14	280%
d) IRCS gets an opportunity to send at least 5 participants in international forums			2	0	0%	5	0	0%
e) At least 20 volunteers/staff possess knowledge on the operations/up keeping and use of mobile disaster unit			-	-	-	20	0	0%
<b>Output 1.3:</b> Developed logistics capacity for effective disaster response operations.								
a) Assessment report of IRCS logistics system is in place	-	-	1	1	100%	1	1	100%
b) At least 5 regional warehouses use automatic packaging equipment in place of manual ones	-	-	-	-	-	5	0	0%
c) Real time inventory reports of warehouses are available at NHQ	-	-	-	-	-	7	0	0%
d) Warehousing procedures are standardized and are being followed in 5 warehouses	2012	0	5	In progress	-	5	In progress	-

Indicators (Examples)	Baseline (where available)		Quarter 1&2			Annual Target	Year to Date Actual	Year to Date % of target
	Date	Value	Target	Actual	% of Target			
e) At least 20 IRCS volunteers/staff trained in logistics management			-	-	-	20	0	0%
<b>Output 1.4:</b> IRCS warehousing capacities have been enhanced								
a) 100% of the pledge contributed by the donor towards Vikhroli warehouse reconstruction is utilized	2012	7%	-	-	-	65%	In progress	-
<b>Additional Explanation:</b>								
<p>During the reporting period, two disasters struck: Jammu and Kashmir earthquake and Uttarakhand flash floods. Both disasters required IRCS national headquarters and IFRC's assistance which actually delayed implementation of the planned activities.</p> <p>IRCS has shared the material for standardization of the NDRT curriculum. The next step was to have one to one discussion with the DM focal persons. This has been delayed due to on-going emergency relief operation.</p> <p>Real-time inventory of the project is part of the Resource Management System (RMS) which IRCS senior management has agreed to deploy. In the initial discussion with the senior management of IRCS, it has been decided to go ahead with RMS and inventory management will be part of the RMS. Next step is to sign a MoU on RMS between IRCS and IFRC AP Zone office.</p> <p>IRCS constituted a team of three for the assessment of Viramgam warehouse in Gujarat state. Assessment was focused on the status of infrastructure, storage facilities and tools, usage of land, warehousing procedures, etc. The report has given several recommendations to improve the operational efficiency of the warehouse as well as to optimise the use of available infrastructure.</p> <p>The tendering process for the reconstruction of Vikhroli warehouse/Maharashtra has been completed. The contractor has been selected. The mobilization advance is being released to the contractor. Due to delay in approval of drawings by the municipal authorities and retendering of the construction work has delayed the project. The Hong Kong branch of the Red Cross Society of China has agreed to extend of the project implementation by 12 months i.e. until 31 July 2014.</p>								
<b>Outcome 2:</b> Preparedness and response capacity of IRCS staff and volunteers in health emergencies / pandemics is strengthened and scaled-up in a sustainable manner.								
a) IRCS responds to the needs of the vulnerable in a more timely and effective manner	-	-	Achieved	Achieved	Achieved	Achieved	Achieved	Achieved
<b>Output 2.1:</b> IRCS capacity to address public health emergencies/pandemics is strengthened.								
a) 5,000 volunteers have been trained as Certified First Medical Responder	2012	4,815	808	722	89%	5,623	4,901	87%
b) FMRs and respective state and district branches are equipped with tools like first aid kits	-	-	14	In progress		14	In progress	

Indicators (Examples)	Baseline (where available)		Quarter 1&2			Annual Target	Year to Date Actual	Year to Date % of target
	Date	Value	Target	Actual	% of Target			
<b>Indicator Variance Explanation.</b>								
<b>Additional Explanation:</b>								
<ul style="list-style-type: none"> <li>IRCS has aligned its DM programme activities to the FMR project. In 2013, FMR initiative is being rolled out in 14 DM programme states. The aim is to train at least 1,400 volunteers as FMRs in 2013 in the target states.</li> <li>The standard FMR curriculum has been developed by a group of technical people from IRCS, IFRC and ICRC which is being printed for wider dissemination. With support from IFRC, IRCS conducted FMR master trainers training from 2-8 April 2013. This has helped state branches to have FMR trainers at their disposal at state level for the roll out of the initiative.</li> <li>In early 2013, a DREF operation was launched to assist people affected by the cold wave in north India. IRCS reached 29,700 people and provided blankets to protect them from severe cold weather. The DREF operation supported the replenishment of 10,000 blankets distributed by IRCS from its disaster preparedness stocks. The distribution and replenishment of blankets has been concluded.</li> <li>Assam flood DREF operations update no. 3 was uploaded on the IFRC website (<a href="http://www.ifrc.org">www.ifrc.org</a>) following the completion of replenishment of the stocks distributed in response to floods. Likewise, replenishment of 2,500 family pack items with the support of the Hong Kong branch of the Red Cross Society of China has been completed.</li> <li>IRCS and IFRC representatives visited Viramgam warehouse in Gujarat for logistics assessment on 19 and 20 February 2013. This assessment highlighted key issues related to the development of unused 20 acres of land, maintenance of staff quarters, human resource, equipment and packaging system, insurance and transportation of goods.</li> <li>Request for the release of retention money has been received from the contractor who renovated stores located in main basement of the IRCS HQ compound.</li> <li>IFRC India office facilitated a tie-up between the Singapore High Commission in New Delhi and IRCS where the Singapore High Commission will source first aid kits from IRCS.</li> </ul>								
<b>Outcome 3: IRCS has strengthened capacity in the area of water, sanitation and hygiene promotion</b>								
a) Scaled-up numbers of people are reached by IRCS' water, sanitation and hygiene promotion services	-	-	-	-	-	-	-	-
<b>Output 3.1: Increased number of staff and volunteers trained in water and sanitation and adequate water and sanitation kits pre-positioned.</b>								
a) At least 20 volunteers/staff are trained as national disaster response team (NDWRT) members	-	-	20	0	0%	20	0	0%



Indicators (Examples)	Baseline (where available)		Quarter 1&2			Annual Target	Year to Date Actual	Year to Date % of target
	Date	Value	Target	Actual	% of Target			
b) At least 25 volunteers/staff are trained on sanitation in development programmes	-	-	-	-	-	25	0	0%
<b>Output 3.2:</b> Capacity to support communities to access improved water and sanitation facilities is strengthened and their knowledge of hygiene increased.								
a) Maintenance, warehousing and deployment procedures for water and sanitation equipment developed and implemented in at least in one warehouse	-	-	1	In progress		1	In progress	
b) Standard operating procedures for the deployment of NDWRT are in place and operational			SOPs for NDWRT	In progress		SOPs for NDWRT	In progress	
c) 10 communities have benefited with community based water, sanitation and hygiene promotion initiative	-	-	-	-	-	-	-	-
<p><b>Indicator Variance Explanation:</b> Output 3.2 (c): ToR for the consultant for drafting a project proposal on sanitation with the focus on sustainable development using sanitation marketing is underway. As the funding is not secured yet, the targets for this activity are to be revised in coming months.</p> <p><b>Additional Explanation:</b> IRCS has shown its willingness to improve its emergency WASH response mechanism and work on community based sanitation programme. Visit of the IFRC WatSan delegate in Odisha state in December 2012 provided direction on the roll out of the sanitation programme. IRCS is internally discussing its potential role in the country to address the significant sanitation and hygiene issues at community level. IRCS has water purification units of many different manufacturers based on different purification methodologies. IRCS is streamlining its emergency water purification equipment. IRCS in future will maintain only two or three types of water purification machines which will be suitable for deployments in various contexts.</p>								
<b>Business Line 3 – “To strengthen the specific Red Cross Red Crescent contribution to development”</b>								
<b>Outcome 1:</b> The resilience and capacities of people at risk of disasters are increased and their vulnerability is reduced in target areas ( <i>Community preparedness – DRR “building safer communities”</i> ).								
a) Community Disaster Management Committees (CDMCs) are implementing CBDRR programmes in all target communities.	N/A	N/A	8	8	100%	8	8	100%



Indicators (Examples)	Baseline (where available)		Quarter 1&2			Annual Target	Year to Date Actual	Year to Date % of target
	Date	Value	Target	Actual	% of Target			
b) Increased participation of community members in CBDRR activities (in terms of % of community members participated).	N/A	N/A	60%	85%	175%	60%	85%	175%
<b>Output 1.1:</b> Increased community awareness on DRR as per the local hazard context in target communities.								
a) At least 60% of target community members participated in DRR awareness raising activities.	N/A	N/A	60%	85%	175%	60%	85%	175%
<b>Output 1.2:</b> Reduced impact of local hazards and risk factors in the target communities.								
a) At least 3 small scale mitigation measures implemented.	N/A	N/A	2	13	550%	2	13	550%
<b>Output 1.3:</b> Preparedness and response capacity is strengthened in target communities.								
a) Community Disaster Management Committees (CDMC) are formed and functioning in all target communities.	N/A	N/A	2	2	100%	2	2	100%
b) Specialized community task force teams formed and trained in 2 new target communities.	N/A	N/A	2	2	100%	2	2	100%
c) All target communities have a community contingency plan.	N/A	N/A	2	2 (1 approved CCP)	100%	2	2 (1 approved CCP)	100%
d) Strength of core group of CBDRR trainers is increased by 20.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
e) Hazard maps developed / updated in target communities.	N/A	N/A	2	2	100%	2	2	100%
f) Basic response equipment pre-positioned in target communities.	N/A	N/A	2	2	100%	2	2	100%
g) All target communities have community disaster response teams.	N/A	N/A	2	2	100%	2	2	100%
<b>Output 1.4:</b> Knowledge and experience on DRR issues are effectively shared and replicated								
a) At least 2 community exchange visits / joint meetings held with the participation of key stakeholders.	N/A	N/A	2	2	100%	2	2	100%

Indicators (Examples)	Baseline (where available)		Quarter 1&2			Annual Target	Year to Date Actual	Year to Date % of target
	Date	Value	Target	Actual	% of Target			
b) Good practices on DRR issues are documented and shared internally and externally.	N/A	N/A	2	8	400%	2	8	400%
<b>Output 1.5:</b> Capacity and skills of volunteers and staff have been enhanced to deliver DRR programme at Community level								
a) At least 20 new volunteers and staff have been trained on FMR to respond at community level.	N/A	N/A	20	60	300%	20	60	300%
<p><b>Indicator Variance Explanation:</b>  <b>Output 1.3.d. Strength of core group of CBDRR trainers is increased by 20</b> - This activity was not budgeted for in 2013 and could not be conducted.</p> <p><b>Additional Explanation:</b></p> <ul style="list-style-type: none"> <li>The final joint internal review of <b>DRR Maharashtra programme</b> was conducted by IRCS and IFRC with participation from the Hong Kong branch of the Red Cross Society of China. The review focused on evaluating the three-year programme outcome and impact, identifying the lesson learnt through entire project, strength and weakness was quite positive and the recommendations will help for sustainability and future DRR programme planning. The report is being reviewed by IRCS before finalization.</li> <li>Four case studies have been published under DRR Maharashtra on good practices and programme impact.</li> <li>In order to ensure sustainability of development initiatives, 121 self-help groups (SHG) have been formed in six communities of Maharashtra and 109 community level business initiatives have been started by these self-help group with the help of Community Disaster Management Committee and Red Cross volunteers. SHGs are empowered to run these businesses and expand it to further level.</li> <li>Approximately 74 per cent of the target community members participated in DRR awareness raising activities at the end of the three-years programme implementation period.</li> <li>The final internal review of <b>DRR Gujarat programme</b> was conducted in June 2013 by IRCS and IFRC. The review focused on evaluating the phase I DRR programme outcome and impact, identifying the lesson learnt through entire project, strength and weakness was quite positive. The recommendations will help for sustainability and future IRCS DRR programme planning.</li> <li>One case study, one brochure, one leaflet and one calendar have been published under DRR Gujarat.</li> <li>In Gujarat, approximately 85 per cent of target community members participated in DRR awareness raising activities at the end of the phase one project implementation.</li> <li>In Gujarat, two Community Disaster Response Team (CDRT)/FMR groups have been formed and 60 CDRT members were trained, out of these 25 CDRT members are identified to help in implementing mitigation measures and awareness activities on DRR. So far, 13 mitigation measures have been completed such as, renovation of community toilet (six units), construction of six individual toilets, installation of one bore well, one water pump, as well as one power connection for the toilet, one water storage tank, construction of one septic tank, plantation of 400 trees, one fencing wall and 20 tree guards, six dustbins and two garbage collector-cycles, repairing and plumbing work of two individual toilets, two drainage connection to sewerage line, 38 wall paintings and five hoardings etc.</li> <li>One trained FMR in Gujarat has saved a victim of road traffic accident by giving CPR on the spot and sent the victim to the hospital.</li> <li>Preposition of search and rescue tools and first aid kits has been done in each of CDMC in both the communities.</li> <li>Two Community Contingency Plan (CCP), with hazard and vulnerability map being revised and updated in the CCP, were developed by those communities. One of these plans was endorsed by the local authority, whereas the other being situated in a slum area with the CCP can only be concluded by community themselves.</li> </ul>								

Indicators (Examples)	Baseline (where available)		Quarter 1&2			Annual Target	Year to Date Actual	Year to Date % of target
	Date	Value	Target	Actual	% of Target			
<ul style="list-style-type: none"> <li>A total of 9,484 community people participated in DRR activities and awareness programme (direct and indirect beneficiaries)</li> </ul>								
<b>Outcome 2:</b> Vulnerability to TB is reduced by scaling-up support to national HIV control programmes and revised national TB control programme.								
a) IRCS demonstrates TB programming in line with the revised national TB control programme, IRCS strategic plan and IFRC's Strategy 2020.	N/A	N/A	Yes	Yes  (2 quarterly patient adherence report submitted as per RNTCP guideline)		Yes  (4 quarterly patient adherence report submitted as per RNTCP guideline)	Yes	
<b>Output 2.1:</b> Further TB infections are prevented.								
a) At least 1,180 category-II most vulnerable TB patients receive IRCS services for care and support.	N/A	N/A	1,180	957	81.1%	1,180	957	81.1%
b) At least 98% of observed TB patients completely adhered to treatment without default.	N/A	N/A	98%	96.3%	98.2%	98%	96.3%	98.2%
<b>Output 2.2:</b> HIV and TB stigma and discrimination is reduced								
a) At least 14,000 community members are reached with TB related stigma and discrimination messages.	N/A	N/A	10,000	9,748	97.5%	14,000	9,748	69.6%
<b>Output 2.3:</b> IRCS capacity to deliver and sustain scaled-up HIV and TB interventions is strengthened								
a) IRCS have 170 trained volunteers at targeted state/ district branches.	N/A	N/A	170	170	100%	170	170	100%
b) IRCS has a new strategic plan for HIV and AIDS (2013-2016).	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
c) PMER and finance management orientation workshop for 29 TB programme staff.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
d) IRCS has documented best practices in the form of at least two case studies.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Indicators (Examples)	Baseline (where available)		Quarter 1&2			Annual Target	Year to Date Actual	Year to Date % of target
	Date	Value	Target	Actual	% of Target			
<b>Indicator Variance Explanation:</b> Nothing to report.								
<b>Additional Explanation:</b> IRCS continues to implement the India TB programme across 14 districts in seven states. During the reporting period, the National Society is supporting 974 (annual target 1,180) patients and their families in accessing the DOTS treatment. Current reports indicate that IRCS will achieve 82 per cent patient adherence rate at the end of Q2. Additionally, 3,765 community members were directly reached through the community awareness meetings.								
<b>Outcome 3:</b> Increased capacity of communities and volunteers that are prepared and able to respond to health and injury priorities in target communities ( <i>Community based health and First Aid in action - CBHFA</i> ).								
a) At least 75% of the target communities have increased awareness levels on preventive health issues.	N/A	N/A	N/A	N/A	N/A	75%	N/A	N/A
<b>Output 3.1:</b> IRCS capacity is strengthened to address community health risks like measles and non-communicable diseases.								
a) At least 1100 IRCS staff, volunteers and members trained on social mobilization around measles.	N/A	N/A	1,100	494	45%	1,100	494	45%
b) IRCS has a cadre of 500 volunteers working on prevention and control of NCD.	N/A	N/A	N/A	N/A	N/A	500	N/A	N/A
c) IRCS is running programmes in at least 10 Indian districts to prevent and control NCD in its various forms.	N/A	N/A	N/A	N/A	N/A	10	N/A	N/A
<b>Output 3.2:</b> IRCS has the capacity to train and operationalize a cadre of Home based care giver in the capital of India.								
a) IRCS launches a three-month long course on home based care.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
b) At least 50 IRCS volunteers trained on home based care for aged and terminally ill.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Indicators (Examples)	Baseline (where available)		Quarter 1&2			Annual Target	Year to Date Actual	Year to Date % of target
	Date	Value	Target	Actual	% of Target			
<b>Indicator Variance Explanation:</b> Nothing to report.								
<b>Additional Explanation:</b>								
<ul style="list-style-type: none"> <li>12 Red Cross staff, 17 master trainers, 453 Red Cross volunteers and 12 (others) have been trained across 18 project districts in two states during phase I,II, III &amp; IV of the measles catch-up campaign.</li> <li>Approximately 942,527 community members were reached during phase I,II, III and IV of the campaign across 18 districts in two states.</li> <li>Approximately 1,049,990 children between the age group of nine months and 10 years were reached during phase I, II, II and IV of the measles campaign.</li> <li>Approximately 342 personnel from health, department women and child development, NRHM, department of education and other NGOs participated in various task force meetings during phase I, II, II and IV of the campaign period.</li> <li>48 street plays, 14 dramas and 160 other behavioural change communication activities were conducted across 18 project districts in two states. During these community awareness activities 506,155 pieces of IEC materials/leaflets on measles vaccination were distributed.</li> <li>A detail review and process documentation of IRCS contribution in the measles campaign is planned in Q3-4 with a plan to disseminate the learning at the states and the national level in Q4. The overall planning of the extension phase to undertake the aforesaid activities are under process.</li> </ul>								
<b>Outcome 4:</b> IRCS has improved capacity to develop and implement strategies, structures, policies and procedures that enable better programme implementation.								
a) IRCS has gone through OCAC (organizational capacity assessment certification) by 2013.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
b) IRCS has highlighted an effective volunteer management system in its service delivery.	N/A	N/A	In VNRBD and in disaster response	In VNRBD in disaster response	In VNRBD and in disaster response	N/A	In VNRBD and in disaster response	In VNRBD and in disaster response
<b>Output 4.1:</b> IRCS' four-year strategic plan (2013-2016) developed.								
a) IRCS strategic plan for 2013-2016 developed.	N/A	N/A	100%	60%	60%	100%	60%	60%
<b>Output 4.2:</b> IRCS structures, systems and procedures with regard to finance and human resources are strengthened.								
a) IRCS Finance and human resource plans developed based on IRCS' strategic plan for 2013-2016.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>Output 4.3:</b> IRCS has a well-managed volunteer management system.								
a) IRCS has a finalized volunteering policy.	2007	draft	N/A	N/A	N/A	N/A	N/A	N/A

Indicators (Examples)	Baseline (where available)		Quarter 1&2			Annual Target	Year to Date Actual	Year to Date % of target
	Date	Value	Target	Actual	% of Target			
b) IRCS has draft volunteer management guidelines in place.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<p><b>Indicator Variance Explanation.</b></p> <p><b>Indicator 4.0.a. IRCS has gone through organizational capacity assessment certification (OCAC) by 2013</b> - This activity will not be implemented in 2013. It will be included in the 2014 plan of action.</p> <p><b>Indicator 4.3.a. IRCS has a finalized volunteering policy</b> - This activity will carried out once the IRCS strategy plan 2013-16 is finalized.</p> <p><b>Indicator 4.3.b. IRCS has draft volunteer management guidelines in place</b> - Implementation of this activity will be shifted to Q4 as current priority and focus is on the Uttarakhand flood operation.</p> <p><b>Additional Explanation:</b></p> <ul style="list-style-type: none"> <li>Review of the previous IRCS National Strategic Plan Document (2009-12) was completed in 2012. The new strategic plan has been drafted in collaboration with the regional OD manager, and submitted by IRCS to its senior management for final review and approval. The revision builds on the successes and challenges of the past four years rather than being a radical redraft. Due to delay in finalization of strategic development plan, other related activities are also affected.</li> <li>IRCS has taken significant steps towards the use of the IFRC RMS system, which may later be used to manage its volunteers in terms of database, training record, and other aspects of the volunteer management cycle. Following this awareness session on RMS, IRCS is moving one step forward on adopting it. To facilitate this process OD representative from AP zone may visit and discuss ToR for next plans.</li> <li>IFRC-SARD represented the IRCS in the south Asia regional OD forum in March 2013. OD support plan and working modality has been discussed with IRCS.</li> <li>VNRBD and blood donor recruitment is quite effective. Red Cross volunteers trained in first aid and FMR hence also demonstrated a significant impact through their in the field. However, the challenge lies in addressing the capacity with exact number of volunteers by category.</li> </ul>								
<b>Business Line 4 – “To heighten Red Cross Red Crescent influence and support for our work”</b>								
<b>Outcome 1:</b> IRCS’ recognition and influence with the wider humanitarian community and relevant actors enhanced.								
a) IRCS NHQ takes measurable steps in increasing its capacity to carry out both public awareness of key, identified issues, and advocacy within the humanitarian sphere.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>Output 1.1</b> The capacity of the IRCS to carry out advocacy in the humanitarian sphere is strengthened.								
a) IRCS senior management is oriented towards effective advocacy and engage in	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Indicators (Examples)	Baseline (where available)		Quarter 1&2			Annual Target	Year to Date Actual	Year to Date % of target
	Date	Value	Target	Actual	% of Target			
advocacy activities with external partners and relevant humanitarian actors/agencies.								
b) Partnerships and MoUs are established between IRCS and relevant organizations on key identified issues.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>Output 1.2</b> IRCS is supported in strengthening its image and visibility through the development of a comprehensive communications strategy and development of communications capacity.								
a) A comprehensive communications strategy developed implemented by the IRCS NHQ.	N/A	N/A	Yes	In progress	N/A	Yes	In progress	N/A
b) IRCS national headquarters have developed resources marketing and knowledge sharing materials to support and to illustrate the effectively implementation of its activities the communications strategy.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
c) IRCS NHQ leverages its web presence with the goal of both increasing visibility of its activities, inspiring branches nationwide to engage in online communication.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>Indicator Variance Explanation-</b> Nothing to report.								
<b>Additional Explanation:</b> Nothing to report.								
<b>Outcome 2:</b> Financial sustainability and a strengthened capacity for fundraising in the IRCS is ensured.								
a) IRCS NHQ has taken significant and measureable steps in modernizing its resource mobilization capacity.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>Output 2.1:</b> The fundraising unit/taskforce at IRCS national headquarters is strengthened.								
a) A fundraising unit/task force at IRCS is developed.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>Output 2.2:</b> A resource mobilization strategy for IRCS is developed and implemented.								



Indicators (Examples)	Baseline (where available)		Quarter 1&2			Annual Target	Year to Date Actual	Year to Date % of target
	Date	Value	Target	Actual	% of Target			
a) Resource mobilization policy, guidelines and strategy are developed and implemented.	N/A	N/A	1	1	100%	N/A	100%	100%
b) Increase in contributions from public and corporate direct donations throughout 2013.	N/A	N/A	INR 20 million	INR 15 million	75%	N/A	100%	75%
<b>Indicator Variance Explanation:</b> Nothing to report.								
<b>Additional Explanation:</b>								
<ul style="list-style-type: none"> <li>IRCS was assisted in raising a grant of GBP 85,165 from Vodafone Foundation to assist 2,200 families through distribution of non-food items for the Uttarakhand flash flood response. Technical guidance has been provided by the IFRC India office.</li> <li>Donations from cooperate and state branches for Uttarakhand floods.</li> </ul>								
<b>Outcome 3:</b> Promotion of Fundamental Principles and Humanitarian Values and their integration with IRCS programmes.								
a) All programmes and trainings include elements of dissemination of the Fundamental Principles and humanitarian values.	N/A	N/A	Yes	Yes	100%	Yes	Yes	100%
<b>Output 3.1:</b> The application of principles and values in planning and implementing all programmes is increased with a particular emphasis on young people of tomorrow's leaders today.								
a) Programme design, implementation, and monitoring and evaluation conform to the Fundamental Principles and humanitarian values.	N/A	N/A	Yes	Yes	N/A	Yes	Yes	N/A
<b>Indicator Variance Explanation:</b> Nothing to report.								
<b>Additional Explanation:</b>								
<b>Outcome 3.a)-</b> Humanitarian values and awareness on the Red Cross Movement was integrated and became instrumental as an important component of all programme related capacity building trainings.								
<b>Business Line 5 – “To deepen our tradition of togetherness through joint working and accountability</b>								
<b>Outcome 1:</b> Coordination of IRCS programmes and support of Movement partners results in improved programme implementation.								
a) Increased efficiency and effectiveness of IRCS harmonized programmes.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>Output 1.1:</b> Clearer collaboration and integration between IRCS programmes.								
a) Increased number of inter-programme initiatives developed by	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Indicators (Examples)	Baseline (where available)		Quarter 1&2			Annual Target	Year to Date Actual	Year to Date % of target
	Date	Value	Target	Actual	% of Target			
IRCS national headquarters.								
<b>Output 1.2:</b> Strengthened partnerships with Movement partners.								
a) Increased number of programmes delivered by IRCS with support of Movement partner.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>Output 1.3:</b> IRCS has strengthened capacity to respond to the digital divide through the development of a minimum set of ICT solutions.								
a) IRCS utilizes digital video conferencing to build links and collaborate with 12 state branches and external organizations.	1 January 2012	N/A	12	12	100%	12	12	100%
b) Increased use of ICT by IRCS NHQ in daily business.	2011	N/A	N/A	N/A	N/A	N/A	N/A	N/A
<b>Indicator Variance Explanation:</b> Nothing to report.								
<b>Additional Explanation:</b> <b>Output 1.3:</b> In order to link DM programme 12 state branches with the national headquarters through video conferencing facilities, the procured equipment were dispatched to the state branches. Furthermore, IFRC will provide technical support for initial deployment and online training of the same. This activity will further enhance the IRCS national headquarters connectivity with its DM programme state branches.								
<b>Outcome 2:</b> IRCS has improved capacity to ensure quality performance and accountability.								
<b>Output 2.1:</b> IRCS supported with strategic and operational planning, management, monitoring, evaluation and reporting of programmes.								
a) PMER components are included in all programme/project proposals.	N/A	N/A	4	4 (DM, health, OD & HV programme)	100%	4	4	100%
b) At least 10 IRCS staff are trained in PMER.	N/A	N/A	0	0	0%	10	0%	0%
<b>Indicator Variance Explanation.</b> Nothing to report.								
<b>Additional Explanation:</b>								
<ul style="list-style-type: none"> <li>As part of the mid-term review process the LTPF 2012-15 with focus on India programmes was revised and submitted to IFRC zone office. Given the integration the revision discussions were held with IFRC programme teams to discuss timelines and responsibilities for timely revision and submission of the LTPF 2012-2015 to IFRC zone office.</li> <li>In the regional PMER meeting that took place in June 2013 in Sri Lanka, a presentation was made by the IFRC India Office on the existing and future PMER working modality and HR capacity at country office/NS level. Besides this, the success, challenges and issues around PMER at country office and NS was discussed.</li> </ul>								

## 5: Stakeholder Participation & Feedback

Keeping in mind the participatory approach, participation of beneficiaries in programming is at the foundation of Red Cross Red Crescent activities, IRCS has a wide network of volunteers throughout the country. These volunteers are members of the communities where IRCS implements its various interventions. The needs assessment at the start of any programme intervention is carried out in close coordination with volunteers at the local level. Based on their coordination and direct link with the community members needs are identified in target communities.

These priorities are then shared at the state/district branch and national level who then mobilize the resources to address the needs identified as priorities. It should be noted as well that all the needs assessments mentioned above form a critical aspect in informing the design and shape of the proposed project. In each of the assessments communities not only form part of those being interviewed to provide critical information for gaps identification and programme design, but are part of the process in data collection through community mobilization.

The Red Cross volunteers also participate in identifying the most appropriate techniques for delivering programme specific awareness messages in their local neighbourhoods.

These continuous engagements with communities form the hallmark of acceptance and enhance the legitimacy of IRCS work as the lead grassroots movement in humanitarian service delivery across India and particularly in the proposed intervention areas.

Likewise, IRCS project staff at national, state and district branch level are involved in annual programme planning especially for training strategies, IEC/curriculum development and programme implementation. Also, the draft annual work plan is developed in consultation with and shared with national headquarters, state/district management and programme team for their feedback.

## 6. Partnership Agreements & Other Key Actors

Nothing to report.

## 7. Cross-Cutting Issues

The IRCS programme delivery follows a cascade approach. Whereby, the project staff are trained first as master trainers who then train the Red Cross volunteers and mobilize them to conduct the outreach knowledge dissemination sessions in the target project communities. This cascade approach leads to a much more inclusive and pervasive contact at the community level at the same time capacity building at the grass root level.

Specifically, in the IFRC-supported programmes the much emphasized IRCS “integrated programme approach” integrates several cross cutting initiatives. The Red Cross volunteers under the CBDRR are trained in vulnerability mapping, so that they are aware of both health and disaster risks in their villages, in order to understand the inter-relating impacts of various natural hazards in their local areas. Besides this the livelihood groups for income generation themselves have been formed with gender equity as a priority; the average ratio of females to males 55:45.

Project design across all the technical sectors has ensured that there is appropriate and effective gender representation. At the same time, the special needs of women survivors are recognized and prioritized. When selecting household beneficiaries, marginalized groups such as widows, female headed households, people with disabilities, the elderly, orphans, schedule castes and minorities are sought out and targeted.

## 8. Human Resources

HR status 31.12.2011				HR status at the end of 2 <sup>nd</sup> quarter		
Name	Delegates	Local Staff	Total	Delegates	Local Staff	Total
IFRC CO	2	12	14	2	8	10

## 9. Exit/Sustainability Strategy Summary

Sustainability is the paramount driver of plans and activities. IRCS with a strengthened organization structure and network of 732 branches spread across India works together with the IFRC and other National Societies from all over the world “to improve the lives of vulnerable people by mobilizing the power of humanity.” The first part of this mission statement, “to improve the lives of vulnerable people”, captures these objectives while adding a dimension of capacity building and sustainability to its on-going core programme implementation.

Given its present capacity, IRCS is making positive progress towards strengthening existing and building on more partnerships with government bodies such as the NDMA, NIDM, MoHFW, MoE etc, partner with UN, international and national organizations. In effect to this, IRCS has made considerable progress in mapping/assessing the fundraising scenario within the country and is working towards putting in place a resource mobilization strategy for the national society with technical support from IFRC India office. The way forward is to work closely with corporate organization and optimize on corporate social responsibility (CSR) for securing funding and sustainability for its core services.

The IRCS national headquarters have been actively raising resources within and outside the country to support its activities. New donors and partners are getting engaged with IRCS while the traditional partnerships are maturing.

## 10. Update on Monitoring and Evaluation events

IRCS takes the responsibility for day-to-day monitoring of its core sector programmes. The programme managers ensure appropriate accountability, transparency and financial management of the on-going programme operation.

Trainings are provided to programme staff on standard planning, monitoring, evaluation and reporting procedures with technical support from the IFRC country office. Monitoring and evaluation plans are integrated into the programme implementation work plan on a monthly/quarterly basis. Monthly/quarterly narrative reports (reporting against indicators) and financial reporting is done by programme managers. Joint monitoring visits are carried out in programme areas by the IRCS and IFRC teams’ in order to monitor progress, identify problems/challenges and, wherever possible and necessary, resolve these. Likewise, review meetings are conducted to map the progress and challenges of programme activities.

In addition, technical managers work closely with their counterparts in the National Society to provide appropriate technical advice, as agreed with IRCS, and ensure that project cycle processes are carried out. Additionally, SARD continues to provide support for resource mobilization and to further strengthen the reporting, monitoring and evaluation systems of the programmes.

Specifically, under the **DRR Maharashtra programme**, the final review was carried out from 15-19 April jointly by IRCS, IFRC and a representative from the Hong Kong branch of the Red Cross Society of China. The review focused on evaluating the three-year programme outcome and impact, identifying the lessons learnt through the entire project. The reviews findings were quite positive and the recommendations suggested will help for sustainability and future DRR programme planning. Likewise, an internal review of the **DRR Gujarat programme** phase I was carried out jointly by IRCS and IFRC, focusing on evaluating the Phase I DRR programme outcome and impact, identifying the lesson learnt through entire project. The review findings were quite positive. The recommendations suggested will help for sustainability and future DRR programme planning.

## 11. Key Lessons

The new FMR concept which was rolled out in Uttarakhand in 2011 has shown good results during Uttarakhand flash floods emergency phase.

Following has been achieved:

- i. FMRs helped their communities in emergency phase by rendering services like first aid, family news service, navigation assistance etc.
- ii. This resulted Red Cross presence in the field since the onset of disaster.
- iii. Right information helped to scale up the emergency relief operation in short span of time.

Learning:

- i. In the future, more emphasis is required for management of FMR volunteers - which includes deployment procedures, database management, insurance, etc.
- ii. Procedures are required to be introduced for the payment to FMRs for travel and food.
- iii. In order to retain and maintain FMRs, they should be linked to routine activities of branches.

## **12. Report Annexes**

[Annex 1: Finance Report \(Validated, from BO\)](#)