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Bangladesh Country Office

Mid-Year Report against Long Term Planning Framework

 International Federation
of Red Cross and Red Crescent Societies

MAABD001

21 September 2012

**This report covers
the period**

**1 January to 30 June
2012**

Health education session in government-owned community health and family welfare centre. The centre was renovated and equipped with Red Crescent Medical team.

Photo: IFRC.



Overview

- Some political unrest has been noted since January 2012 when the main opposition alliance led by Bangladesh Nationalist Party (BNP) has stepped up its campaign of street agitation and it continues to protest against the removal of a constitutional provision that allowed for the appointment of a non-partisan caretaker government to oversee parliamentary elections. Subsequent protest marked with localised violence has been noticed. However, there have largely this has not yet impacted the service delivery of the Delegation.
- One of the biggest achievements was the very first photography exhibition titled *Mindscape* held in Dhaka, Bangladesh on May 8, 2012 in celebration of World Red Cross Red Crescent day. The prime objective of this Photography Exhibition was to observe the notable works of Red Cross Red Crescent partners Bangladesh Red Crescent Society (BDRCS), International Federation of Red Cross and Red Crescent Societies (IFRC), and International Committee of Red Cross (ICRC). This event showcased disaster management and rehabilitation works that have been carried out over the years since 1971 war in Bangladesh.
- The movement coordination meeting has been the key event of the RCRC movement partners. Common challenges and solutions are discussed and agreed to make RCRC movement stronger. BDRCS, IFRC, PNSs, and ICRC representatives attend the meeting which is chaired on rotational basis by the movement partners.
- This is supplemented by the Disaster Management Working Group (DMWG) which is also attended by all the PNSs and IFRC organized by BDRCS. Organizational Development Working Group (ODWG) will also take place in short time.
- Following the Pre-Disaster Agreement drafted in June 2011, all the movement partners have confirmed to sign the latest version in June 2012. The agreement aims to address small and moderate scale disasters in the country by national society, IFRC and other PNSs which do not meet the threshold level of DREF or Emergency Appeal.

- E-newsletter under the knowledge management component in climate change adaption (CCA) project has been launched on 23 July 2012 through a small inauguration at the presence of BRAC University's Vice Chancellor and BDRCS Chairman. The e-newsletter will publish case stories and happenings of climate change in the country along communities' coping strategies in this regard. This will be available in the BDRCS website and interventions through various DM programs in regards to climate change will also be updated in this portal.
- In case of any major disasters, IFRC, BDRCS and other PNSs collate to discuss on the types of humanitarian assistance to affected people. Additionally, assistance is sought from external donors to maximize number of beneficiaries and support.

Working in partnership

Multilateral Partner National Societies through IFRC: American Red Cross, Canadian Red Cross, Hong Kong branch of the Red Cross Society of China, Taiwan Red Cross Organisation.

Other multilateral partners: Department for International Development (DFID), ICRC

Bilateral partner societies: British Red Cross, German Red Cross, Swiss Red Cross

Partnership to be established: AUSAID, European commission humanitarian aid (ECHO), Japanese Red Cross, Netherlands Red Cross, Swedish Red Cross, USAID.

Progress towards outcomes

Business Line 2: To grow Red Cross Red Crescent services for vulnerable people

Measurement				
Outcome/Output/Indicators	Baseline (Where available)	LTPF 4-year target	Actual this report period	Actual to Date
Outcome 1: More effective and timely disaster response and services to vulnerable people through improved systems and mechanisms.				
Output 1.1: Improved response management through decentralization of response capacity and facilities from national headquarters to strategic units.				
Indicator 1.1.1: At least, in number of BDRCS units, response capacity and facilities decentralized.	0	10	1	2
Output 1.2: Increased application of IFRC disaster response tools.				
Indicator 1.2.1: Increased number of NDRT, UDRT, volunteer and some key staff pool with response kits and training.	44	100	0	44
Indicator 1.2.2: BDRCS's house ready with contingency plan, pre-disaster agreement and people with knowledge in DREF, EA, and DMIS.	10	40	5	15
Output 1.3: Updated guidelines, manuals, standards, planning and information system of preparedness for response are in place.				
Indicator 1.3.1: Relief manual, Sphere standards, code of conduct in relief updated/contextualized.	1	6	1	2
Indicator 1.3.2: Web-based information management system for response planning established.	0	1	0	0
Output 1.4: Community based cyclones and floods early warning system strengthened and more accessible for women and children to undertake actions in saving lives and livelihood.				
Indicator 1.4.1: Community based flood early warning dissemination system established and functioning in at least 20 communities.	2	20	0	2
Indicator 1.4.2: Community based cyclone early warning system strengthened.	13	17	0	13

Measurement				
Outcome/Output/Indicators	Baseline (Where available)	LTPF 4-year target	Actual this report period	Actual to Date
Indicator 1.4.3: Capacity of CPP volunteers (training, equipment and data base) increased to deliver better early warning service.	34,000	10,000	200	34,200
Indicator 1.4.4: Access of women and children to cyclone early warning increased through provision of awareness campaign, training, equipment and light house at least in five remote islands.	7	5 (new)	0	7
Output 1.5: Community disaster response capacity strengthened.				
Indicator 1.5.1: At least in number of flood and cyclone communities people are able to deal with small scale disaster themselves with their strength of response fund, plan and volunteers	16	20 (new)	2	18
Output 1.6: Improved critical services and livelihood support for most vulnerable people (tribal/indigenous, islands, etc).				
Indicator 1.6.1: Access of vulnerable people in some selected communities to service providers in agriculture, livestock, WatSan and health improved through BDRCS intervention.	16	20 (new)	2	18
Outcome 2: Community's access to basic health care is increased.				
Output 2.1: Over 1,000 volunteers trained in basic health care (including psychological first aid) available in communities and database maintained.				
Indicator 2.1.1: 80% trained volunteers provided emergency health care in an affected area.	0	1,000	200	200
Output 2.2: More vulnerable and strategic disaster prone units have access to trained mobile medical teams.				
Indicator 2.2.1: At least 2 local medical teams per unit participate in medical relief operation if an emergency occurred.	0	Depends on emergency	5	5
Output 2.3: Increased community awareness to respond to emerging and re-emerging diseases (bird flu, swine flu, nipah, anthrax and etc).				
Indicator 2.3.1: 60% of community leaders know the prevention of the outbreak.		200	0	0
Output 2.4: Road accident death decreased due to scaled up Road Safety programme in major highways.				
Indicator 2.4.1: Number of RTA injured persons taken to the health centres by BDRCS volunteers.		180	36	36

Comments on progress towards outcomes

Outcome 1

Output 1.4

Cyclone Preparedness Program (CPP)

CPP has been a neglected area in the last decade. IFRC has been engaging proactively with the present management to address the alarming needs in the CPP. Through the American Red Cross supported ECPP program the communication network of 125 wireless radio stations was rehabilitated along with essential tools like message book etc. To keep up with the preparedness of the coastal community the batteries were supplied for the early warning equipments of CPP. The CPP central control room along with the 3 regional workshops were also renovated to facilitate the coordination and effective delivery of the early warning to vulnerable communities.

IFRC also has been working on strengthening the relationship between BDRCS and Government of Bangladesh (GoB), who are the managing partners of the CPP. Much have been achieved into this strategic area of work which has brought both the key disaster management stake holders at national level closer for addressing larger issues related to humanitarian needs

Flood operation

BDRCS/IFRC launched emergency appeal on 26 August 2011 to assist 10,000 beneficiaries affected by flood in the south eastern and south western coastal district of Bangladesh namely Cox's Bazar, Jessore and Satkhira in terms of food and basic non-food, emergency shelter, water and sanitation, hygiene promotion, and health and care during the

relief phase of the operation. The relief phase started from the end of August 2011 and continued up to early December 2011. During this reporting period, BDRCS/IFRC had concentrated on early recovery activities for the flood affected people which includes Construction of five community latrines along with bathing facilities in Jessore and Satkhira district, Providing of household level latrine materials (four rings and one slab for each house) for 3,000 families in Satkhira and Jessore, Supporting 350 households with cash grant (BDT 10,000 for each households) for restoring lost livelihoods as well as giving them the scope to diversify it and supporting 406 households with cash grant (BDT 30,000 for each households) for repairing their damaged houses and get back the better living condition with dignity.

Output 1.5

Responding to small scale disaster

BDRCS/IFRC has responded few small scale disasters that are not generally taken care of by the big humanitarian agencies as well as by the government. Through the provision of joint disaster preparedness stock in the BDRCS national headquarters/IFRC is supporting these type small scale of disasters across the country. Recent fire incident in Pabna district is one of the examples where BDRCS/IFRC has assisted 50 families affected by fire. But, still there is lack of initiatives from BDRCS to earmark funding for these disasters as discussed in the last year pre-disaster meeting.

Preparedness for response

BDRCS/IFRC has achieved couple of initiatives during this reporting period as a part of preparedness for response. Decentralization of response capacity through construction of new warehouse in a strategic location to keep disaster preparedness stocks is one of that but it need more effort and concentration to materialize the concept of decentralization as proper guideline is still need to finalized. Construction of response coordination center along with modern equipments and facilities in national headquarters to strengthen the response capacity has been taken place in this reporting period but still we need proper handover and guideline to run the show. Finalizing the contingency plan for flood and cyclone is almost ready and awaiting for the testing through simulation which is planned on 2 July 2012. BDRCS has 50 trained NDRT members and they are planning for national disaster response team (NDRT) refreshers course that will be held on 1st week of July 2012. BDRCS has finalized the pre disaster agreement which is now ready to sign by the all party concern

CBDRR

In order to enhance resilience of vulnerable communities to small scale disasters through community preparedness and DRR capacity in flood prone regions of the country, community based disaster risk reduction (CBDRR) programme has been effective since 1997. Until recently, the half yearly CBDRR follow-up had come to end in December 2011 and developments of a concept note on CBDRR new phase was underway early in January 2012. Based on the findings of a Cost Benefit Analysis and the key impacts of the previous CBDRR programs, conducted in 2011, the development of the 'concept note' had been guided and produced with taking into consideration greater local involvement in the planning process and extended consolidation period of the program, over two to three years, in order to render results more sustainable. Unlike traditional approach, the new phase of CBDRR program will extend its services to population at risk in the coastal belt prone to cyclonic hazards. In this regard, a proposal had been shared with KOICA (Korea International Cooperation Agency) for potential funding opportunity in four flood (Gaibandha, Sirajganj, Lalmonirhat and Pabna) and 1 cyclone (Laxsmipur) prone district for 2013-15 and Swedish Red Cross for 2012-2015 for possible funding of similar program in March 2012, however, in 4 different geographical locations of one flood prone, two water-logged regions and one cyclone prone area of Jamalpur, Jessore, Satkhira and Bhola respectively. By June, 20 project communities in total had been selected under KOICA and Swedish funding. While the activities of CBDRR program under KOICA funding begins in January 2013, the program is implanted with an inception phase for conducting a baseline survey and vulnerability capacity assessment (VCA) to analyze the community profiles and needs along with mobilization of staff in 2012. Recently in mid June 2012, Swedish Red Cross has indicated an instalment of CHF 60,000 as the first injection to the CBDRR programme.

CCA

Under the changing climatic variability, Bangladesh is in the forefront to encounter the adverse impact of climate change through increased frequency of recurring hazards and affecting livelihood. The program of Climate Change Adaptation (CCA) has thus been initiated in 2011 in the districts of Manikganj, Gopalganj, Bogra and Noakhali that seeks to improve knowledge and skill of vulnerable HHs in CCA, establish a knowledge management system (KMS) to archive the adaptation mechanisms in the vulnerable communities, identify and demonstrate appropriate CCA measures, enhance BDRCS advocacy role in CCA field. Existing CBDRR expertise and knowledge of the BDRCS will be utilized to achieve the outcomes. All activities in the program recognize and respect indigenous knowledge and traditional practice and wisdom of people so that community's culture of resilience to hazards is enhanced. Recognizing the gaps and key pillars for implementation of the action plan stated in the BCCSAP, BDRCS has adopted program and institutional level strategies to address the adverse effects of climate change and climate induced vulnerabilities. With the aim of archiving the adaptation means in different project location and sharing of knowledge, an e-news letter under knowledge management component has been agreed and is likely to be launched and uploaded on the BDRCS website in mid 2012. Currently, the knowledge Management Framework for BDRCS is under review at IFRC and BDRCS. Additionally, while the knowledge management center is constructed in the national headquarters, the interior design of the space for KMC is underway. The KMC space is intended to store and archive climate change related documents and will be accessible for all groups of people including students and researchers. In regards to the fellowship component in CCA program, dialogue between BDRCS/IFRC and some universities i.e. BRAC and University of Dhaka is under progress. The fellowship program will take on research programs that will be conducted by Graduate students under a set theme, the findings of which will add value to designing of the program.

Output 1.6**Cyclone AILA Recovery Program**

Cyclone AILA hit the coast since 3 years back and still there is unmet need in the remote locations. Many agencies are working and had worked earlier but subsequent breaching on embankment has resulted limited success on the recovery effort. Hence, BDRCS took this integrated recovery program in a remote isolated location of Dacope upazila of Khulna districts.

The program is designed through an integrated fashion so that it can offer and deliver support and services which combine the various sectoral needs in shelter, WATSAN, health and livelihood, in one particular geographic location. Since there has been less intervention and huge need in water and health sector therefore the program is covering the gap of water and health needs of the whole populations of Kamarkhola union while the sanitation, shelter, livelihood, and DRR components will be targeted to two wards (a ward is constituted of about 400 households) of Kamarkhola union (a union is consisting of nine wards).

Institutional resilience and capacity of the communities has increased as the government union health care centre of Kamarkhola union is renovated by this project and medical teams are working to treat the local patients as well as medicines are provided free. Coordination with government district health department has been made to find out a mechanism to run the health centre even after phase out of the project so that the people of the remote location can have access to medical treatment.

Outcome 2**Output 2.1****Emergency Health**

In lines with the preparedness of the communities and the national societies to affectively face disaster, the health team have been keeping a force of 500 PHiE volunteers trained and ready for action. As a follow up a refresher training was held in April. Apart from this a guideline for PHiE volunteers were also prepared to strengthen the mechanism.

Prevention of Non Communicable diseases (NCD)

A training of 20 staff from three MCH centers is ongoing on providing services to address the risk of Non Communicable Diseases in the communities. There has been a steady growth of NCD in the rural areas. The program is designed to cover 18 centers in total.

HCiD

Taking forward the decision on 'health care in danger' from the last statutory meeting, BDRCS, ICRC and IFRC agreed on working together on this front. A half-day long workshop on 'health care in danger' had taken place with the participation of doctors, nurses, midwives, paramedics of different health program in mid April to mid May 2012. Furthermore, a full-day workshop was also organized on 'nursing in disasters' by two fellows currently doing their assignment on disaster nursing

Output 2.3**Epidemic control for volunteers (ECV)**

Bangladesh has consented to implement ECV as per the Federation model. To give it a strategic advantage, the ECV was shared with GoB counterparts and they were taken on board in the process of ECV tool kit and manual adaptation and training. This will provide an opportunity to the BDRCS to influence the replication of the ECV through the GoB machinery. The ECV documents are in process of being translated into Bangla.

Output 2.4**Road Safety**

Taking into notice the larger mandate of BDRCS in disaster preparedness, the road safety program has been implemented to create a system to respond to the road accident which is the biggest killer in non disaster time in Bangladesh. A total of 18 first aid posts have been developed with 72 trained volunteer positioned through the three main national highways to assist the victims of road accidents. IFRC has been supporting the training of volunteers and awareness among the communities on the services delivery.

Business Line 3: To strengthen the specific Red Cross Red Crescent contribution to development

Measurement				
Outcome/Output/Indicators	Baseline (Where available)	LTPF 4-year target	Actual this report period	Actual to Date
Outcome 3: Strengthened BDRCS Leadership and efficient management through improved structural, human and financial resources and systems.				

Measurement				
Outcome/Output/Indicators	Baseline (Where available)	LTPF 4-year target	Actual this report period	Actual to Date
Output 3.1: BDRCS Legal Base in place and implemented accordingly.				
Indicator 3.1.1: All 68 Branch Chairmen and 1 National Chairman elected, management and governance separated and functioning. Increased number of people trained/oriented (GA delegates, EC members, staffs, volunteers and concerned persons of GoB as well).	No baseline	0	0	0
Output 3.2: BDRCS existing property and income managed in structured and efficient way to avoid pilferage and misuse.				
Indicator 3.2.1: Increased revenue by 60-70% from property development. A committee formed to manage and monitor all assets.	No baseline	0	0	0
Output 3.3: Volunteers' network is strengthened and expanded through establishing mechanism to recruit and train competent RCYs and other volunteers and involving them more actively in ongoing and new initiatives				
Indicator 3.3.1: RC/RC orientation and first aid training provided to students and teachers of 40 schools and colleges across the nation. 220 senior volunteer received ToT. 50,000 RC/RC basic books distributed to schools and colleges.	No baseline	0	0	0
Output 3.4: BDRCS's Five-Year (2011-2015) Strategic Plan is effectively implemented.				
Indicator 3.4.1: Quality of programming and implementation in line with recently developed strategic plan.	No baseline	0	0	0
Outcome 4: BDRCS service delivery improved through re-structuring of human resources and performance based management system as well as improvement of existing financial and IT systems.				
Output 4.1: Restructured BDRCS management by divisions, departments and sections from Headquarters to Branch level.				
Indicator 4.1.1: BDRCS's new organogram is in place and effectively implemented.	0	1	0	0
Output 4.2: A pragmatic HR system and procedure is in place.				
Indicator 4.2.1: Effective automated HR management system in place.	0	1	0	0
Output 4.3: Transparency and accountability of the National Society is improved through more effective training and orientation to staffs and volunteers at all levels.				
Indicator 4.3.1: Code of Conduct and integrity policy signed by all members of governance, staff and volunteer. Branch operation manual is in place.	0	1	0	0
Output 4.4: Strengthened branch capacity and the resource mobilization drive.				
Indicator 4.4.1: At least 50 % of branches are self sustainable.	0	24	0	0
Output 4.5: Financial system from Headquarters to Branch level is in place along with MIS programme.				
Indicator 4.5.1: Unified financial system implemented at all 68 units and national headquarters.	0	69	0	0
Output 4.6: PMER department at national headquarters is in place.				
Indicator 4.6.1: Number of periodic reports and programme updates prepared and published.	0	48	6	6
Output 4.7: Developed communication strategy and planning focusing on 'image building' with ICT section reaching from headquarters to branch level is in place.				
Indicator 4.7.1: Appropriate and relevant IT and information sharing system developed. Digital Divide implemented.	0	1	0	0
Outcome 5: BDRCS service delivery improved through re-structuring of human resources and performance based management system as well as improvement of existing financial and IT systems.				

Measurement				
Outcome/Output/Indicators	Baseline (Where available)	LTPF 4-year target	Actual this report period	Actual to Date
Output 5.1: Appropriate adaptive actions and mitigation initiatives enhanced in household level.				
Indicator 5.1.1: At least % of target households able to undertake appropriate CC/DRR adaptation/mitigation actions.	0	18,000	200	200
Output 5.2: Increased empowerment and resilience of communities through ownership, management and utilisation of their own resources, capacity and services.				
Indicator 5.2.1: At least % of target women takes part and dominate/influence in community development/DRR decision making process.	0	9,000	0	0
Indicator 5.2.2: At least % of communities ready with their own resource, knowledge and skill to combat disasters, poverty and other social ill practices.	0	8	0	0
Output 5.3: Improved readiness with appropriate tools, strategies, knowledge management in DRR/CCA actions.				
Indicator 5.3.1: BDRCS Climate Change stagey developed in accordance to its mandates.	0	1	0	0
Indicator 5.3.2: BDRCS established e-library, offered advance course, conducted research, contextualized VCA in DRR/CCA.	0	1 for each of the component	0	0
Indicator 5.3.3: Number of partnership with key actors established/enhanced in DRR/CCA.	3	10	1	4
Output 5.4: Enhanced Urban Disaster Risk Reduction through school preparedness and community engagement/awareness.				
Indicator 5.4.1: At least % of target school children and community people able to undertake appropriate actions in DRR.	0	8	0	0
Outcome 6: Public Health promotion through community awareness and improvement in quality of care.				
Output 6.1: Community's access to BDRCS Primary Health Care centres is increased in targeted areas.				
Indicator 6.1.1: One hundred persons per PHC centre in the first 3 months enrol for tests of diabetes and high blood pressure.	0	100	100	100
Output 6.2: Awareness of HIV/AIDS among Inject able Drug Users (IDUs) is increased.				
Indicator 6.2.1: Ten IUDs per drop in a centre exchange syringes per month.	0		Not started	
Indicator 6.2.2: Three to five IUDs per drop in a centre test for HIV/AIDS per month.			Not started	
Output 6.3: Cases of anaemia are decreased in targeted areas through appropriate intervention.				
Indicator 6.3.1: 60% of anaemic population will have increased haemoglobin in 3 months time of intervention.	0	10,000	0	0

Comments on progress towards outcomes

Outcome 3

The final draft of BDRCS 'Red Crescent Law' has been sent to the Ministry of Health (line ministry) for final preparation and submission to cabinet. The Ministry of Health is yet to organize an internal inter-ministerial meeting with the relevant ministries before the law is tabled in cabinet. BDRCS is maintaining close liaison with the relevant personnel within the line ministry to keep up the momentum. A joint IFRC Governance unit and ICRC Legal base supported BDRCS in June 2012 through an inter-ministerial meeting which was held with senior representatives from 5 ministries. The meeting came up with full support for the change process and clear steps for the future reform of the Red Crescent Law. The IFRC Governance unit will support the process by organizing a meeting between the IFRC President and the Secretary General to meet with the Prime Ministers of Bangladesh at the highest level. BDRCS will facilitate its governing board (GB) to meet with various Ministers and MPs and Prime Minister before the draft is tabled in cabinet. Focal persons were identified by ministries of health and law and these will work to carry out the required amendments with the BDRCS management and IFRC.

BDRCS is improving its strategies and organization in volunteer development as 64 senior Red Crescent Youth (RCY) volunteers from 16 units received the train the trainer course in first aid. They will, in turn, facilitate RCY co-curriculum programme in the educational institutions within their respective units' area. BDRCS has taken this programme serious as it will help it to develop a leadership carder at an early age who will serve the society in the years to come. In the last two quarters, BDRCS has reached 350 youth leaders for RCY co-curriculum programme with the Ministry of Education.

Work on final Strategic Plan (SP) was completed and during the last quarter it was translated into Bangla and it has been sent for final printing.

Outcome 4

The governing board of BDRCS has approved the implementation of HR reform process by establishing a High Powered Committee. At the Committee's first meeting a number of steps were agreed to, on how the HR reform was going to be implemented based on HR consultant recommendations report. These are, finalizing structuring of the society based on the new organogram, appropriate number of sanction positions, recruitment of external HR expertise for development of Unit operation manual and the establishment of the planning, monitoring, evaluation and reporting (PMER) section and ICT section to operate under Planning and Development department. Recruitment has already taken place for the appropriate sections. Significant work has already been done by the two new employees. Through these small steps it is envisaged that the society will be able to tackle its difficult and sensitive human resource issue step by step. It is also important to note that the society is still seeking alternative ways to reduce its HR contractual outstanding debts, a fundraising dinner targeting well to do people and business community is under way.

Since the arrival of the new OD delegate in June, work has started on how to implement the HR reform with the OD working group having been reconstituted and held its first meeting.

In order to increase BDRCS's skills capacity, young people were targeted through the youth chief workshop. The Planning and Development department was able to provide assistance basic planning and reporting skills to representatives of all 68 branch/unit level youth leaders. The strengthening of youth capacities is in alignment with BDRCS strategic plan and efficient implementation of activities at branch/unit level. This will facilitate volunteer youth recruitment, training motivation and deployment. The workshop's main objective was to orientate youth leaders on their role and responsibilities in formulation of plans and how to execute them which would lead to a bringing a wider impact on the work of Red Cross Red Crescent movement.

BDRCS will now roll out this process to the 68 unit level branches. Consultants have been hired in June to start working immediately as of 1st of July 2012. The consultants together with BDRCS technical support from the OD advisor who has recently taken up his position will assist the branches in developing their own four-year development plan in alignment with BDRCS's SP and integration of these plans with national headquarters level's department plan. Through this process it is envisaged that communication monitoring and coach of the branch structures by national headquarters technical staff will increase there by enabling the units to be more effective in their service delivery to the vulnerable communities.

No significant work has started in improving the financial system from Headquarter to branch level at the moment but plans are being worked out to improve the financial management systems of the 68 branches in training the branch secretaries and to equip the branches with working computers to enable them to send required financial information to headquarters.

In an effort to improve its performance BDRCS has recruited a reporting officer under PMER and since February BDRCS has been able to produce and publish its monthly activity reports. The distribution of the published reports is underway this will also encourage the branches to do more and reach further in their service delivery to the most vulnerable communities as they get a motivational encouragement through this process. The monthly activity report will also act as coaching process for the branches secretaries.

Through the Delegation support BDRCS was able to project a positive image of the Red Cross Red Crescent Movement during 8 May celebration. The PMER facilitated the process of organizing photo exhibition as part of World Red Cross Red Crescent Day by providing in-depth support in collecting related information on the selected photos from various programmes and projects composing suitable captions for those photos. This was a huge success both internal and external as it helped to portray the work of the BDRCS through out the country.

BDRCS has requested to be the pilot national society in having an internet database called resource mapping system (RMS). The society has already signed the service agreement required by the service provider. Fields to be included in the database have been identified and are being currently discussed with all stakeholders with BDRCS. The database system will allow BDRCS to have a full knowledge of its capacity and resources at its disposal. This system will be launched shortly after data capturers have been trained.

BDRCS is moving a step further in its quest to share its knowledge within the society itself and other national societies through the Digital Divide. Computers and IT equipment have been distributed to six out of eight branches/units intended for the quarter as part of first phase under 30 branches to be reached in 2012. The project will cover all the branches/units on a gradual manner. In order to make this a reality two-day training on basic usage of computers was

developed and conducted for the representatives of those six respective branches/units by the ICT section with support from IFRC. Once the branches are connected and regular interaction with them through the internet it will become easier for them to send not only reports of service delivery but also best practice humanitarian stories being done in their communities. This will definitely enhance the BDRCS'S website updates. The process to upgrading website has started. Contents from related departments, based at the national headquarters, have been collected and compilation of the contents is underway and will be uploaded to the website shortly.

Outcome 6

Output 6.2

HIV/AIDS prevention programme

HIV/AIDS prevention and mitigation proposal writing is going on. Fund is not available at this moment.

Output 6.3

Blood

BDRCS, through its existing five blood centers has been catering to 15 per cent of the blood demand of the country. With the aim of catering to 40 per cent of the blood demand of the country, BDRCS is coming up with four new blood centers at Rajshahi, Barishal, Natore and Magura. IFRC has been supporting the cause of recruitment, retention and recognition of the blood donors through various activities.

Business Line 4: To heighten Red Cross Red Crescent influence and support for our work.

Measurement				
Outcome/Output/Indicators	Baseline (Where available)	LTPF 4-year target	Actual this report period	Actual to Date
Outcome 7: BDRCS image and profile is further improved and its due space in national and international area as a leading humanitarian agency in Bangladesh is reclaimed and sustained.				
Output 7.1: Adherence and promotion of auxiliary role and mandates of BDRCS in national policies and DRR platform enhanced.				
Indicator 7.1.1: Level of BDRCS involvement in national level policy dialogues and forums. Number of projects/tasks entrusted to BDRCS by the government.	0	4	0	0
Output 7.2: Well-functioning DMWGB to facilitate and promote community priorities in DRR/CCA from policy to implementation.				
Indicator 7.2.1: Level of involvement of DMWGB in DRR/CCA policy making, no. of decisions made and implemented	0	4	0	0
Output 7.3: BDRCS visibility at national/international level is improved through effective communication and profiling strategy.				
Indicator 7.3.1: Number of reports published in a year	2	16	1	3
Output 7.4: Partnership with strategic actors for implementation of HFA, IFRC S2020 priorities established.				
Indicator 7.4.1: Number of new partnership developed and level of resources generated.	3	8	0	3

Comments on progress towards outcomes

Outcome 7

Through the Delegation support BDRCS was able to project a positive image of the Red Cross Red Crescent Movement during 8 May celebration. The PMER facilitated the process of organizing photo exhibition as part of World Red Cross Red Crescent Day by providing in-depth support in collecting related information on the selected photos from various programmes and projects composing suitable captions for those photos. This was a huge success both internal and external as it helped to pottery the work of the BDRCS through out the country. The Vice Chancellor of Dhaka University has communicated through his speech, to the international committee to declare 8 May as International Humanitarian to celebrate globally with no warfare and violence.

Business Line 5: To deepen our tradition of togetherness through joint working and accountability.

Measurement				
Outcome/Output/Indicators	Baseline (Where available)	LTPF 4-year target	Actual this report period	Actual to Date
Outcome 8: More effective coordination and management at the IFRC country office to support more integrated programmes and harmonised services of all RCRC partners in the country.				
Output 8.1: Support the roll-out of S2020 and assist the BDRCS with back up services of HR, Logistics and Finance.				
Indicator 8.1.1: Number of partners working with IFRC country office and services provided to them.	3	6	0	3
Output 8.2: Coordination with Movement Partners and other stakeholders in Bangladesh and representation in international events are effectively maintained.				
Indicator 8.2.1: Number of movement coordination meetings held and decisions taken in a year.	12	48	6	18
Indicator 8.2.2: Number and size of operations/programmes coordinated by IFRC in Bangladesh.	2	No target	1	3

Comments on progress towards outcomes**Outcome 8**

The final draft of 'Red Cross Law' was prepared with support from the Bangladesh Government Law Ministry. If the draft is approved and enacted by the Parliament of Bangladesh, the Bangladesh Red Crescent Legal Base revision will bring BDRCS in line resolution number 2 of 2011 of the International Conference. The draft was prepared using the Government Law format which was agreed by both the JSC and BDRCS. This will help to reduce the delay in approval once it reaches cabinet. The final text was approved by the GB, JSC, and General Assembly at the AGM. It has been sent to the Ministry of Health (line ministry) for necessary preparation for amendment. A joint IFRC Governance unit and ICRC Legal base supported BDRCS in June 2012 through an inter-ministerial meeting which was held with senior representatives from five ministries. The meeting came up with full support for the change process and clear steps for the future reform of the 'Red Cross Law'. IFRC Governance unit will support the process by organizing a meeting between the IFRC President and the Secretary General to meet with the Prime Ministers of Bangladesh at the highest level. BDRCS will facilitate its GB to meet with various Ministers and MPs and Prime Minister before the draft is tabled in cabinet. Focal persons were identified by Ministries of Health and Law and these will work to carry out the required amendments with the BDRCS management and IFRC. The Ministry of Health will organize an inter-ministerial meeting with the relevant ministries and the BDRCS. BDRCS is maintaining close liaison with the relevant personnel within the line ministry and is following it up. The impact of the revision of the 'Red Cross Law' will assist the BDRCS in its humanitarian work with others stakeholders like international donors and improve its image and auxiliary role to GoB.

Stakeholder participation and feedback

BDRCS-Federation is increasingly involving community people in the programs both in planning and implementation stage. VCA in CCA, CBDRR and AILA recovery programs has strengthened the all relevant stockholders participation during the planning phase. At the same time provision of community committee in different programs has ensured community people participation. Some program component itself is designed to ensure stockholders participation, like, beneficiary co-contribution in shelter plinth rising in AILA recovery programme. There has been partnership with Solidarities International and IFRC-BDRCS for the joint beneficiary selection in flood operation in Satkhira.

Climate change programme is partnering with Flood Forecasting and Warning Centre (FFWC) for the discrimination of flood warning messages in the community.

Partnership agreement with government has been made in Khulna Dacope for the smooth operation of the family health care centre under the cyclone Aila project.

Key Risks or Positive Factors

Key Risks or Positive Factors	Priority High Medium Low	Recommended Action
Legal base: 'Red Cross Law'	High	Geneva Office to contact Bangladesh Embassy to lobby with the Prime Minister's office

Lessons learned and looking ahead

- PMER cycle requires careful planning/monitoring at all levels. Indicators should be SMARTer in the future than those currently in place.
- Experience and lessons learned from the pond re-excavation through cash for work approach in AILA recovery program will help to prepare more effective cash for work programming in future.
- BDRCS/IFRC regularly maintains liaison, coordination and shared all relevant information with the Government and other stakeholders with a view to proper utilization of recourses as well as to avoid the overlapping of DRR related activities. This would help for smooth and effective implementation of project activities in future.
- Experience from medical team deployment in remote locations in AILA project as well as in flood will help BDRCS to review their existing medical team deployment procedure and technical requirement

Financial situation

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

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 \(NGO's\)](#) in Disaster Relief and the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable.

The 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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Saving lives, changing minds.



The 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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