

Programme Update



International Federation
of Red Cross and Red Crescent Societies

Nepal

Appeal No. MAANP001

28 August 2008

This report covers the period of 01/01/2008 to 30/06/2008.

In brief

Programme purpose:

The four programmes implemented by the Nepal Red Cross Society work towards achieving the four Global Agenda goals:

1. Save lives and properties and assist affected people of disasters and conflict through effective preparedness and response system (Global Agenda goal 1).
2. Reduce the number of deaths, illnesses and impact from diseases and public health emergencies (Global Agenda goal 2).
3. The volunteer capacity of NRCS is strengthened in self reliance at all levels to better serve vulnerable communities (Global Agenda goal 3).
4. Understanding of the Fundamental Principles and Humanitarian Values is improved (through integration in other core into their programmes and community awareness) (Global Agenda goal 4)

Programme summary:

Focusing on contributing to the Global Agenda goals, its plans and priorities, the Nepal Red Cross Society (NRCS) could smoothly implement the humanitarian programme in Nepal during this period compared to past, as a result of the changed and improved political and the security situation in the country and the field. Response on the appeal so far has been 34.21 percent and the NRCS has revised the appeal activities for this year based on the funding coverage.

Within the health and care programme, all projects were run, monitored and supervised as planned. Under the disaster management (DM) programme disaster preparedness activities were carried out and community-based disaster preparedness (CBDP) units were mobilized at community level. In organizational development, major focus was given on the finalization of the fifth development plan (2008-2010). Similarly 37th general assembly of the NRCS was conducted during this period. Implementation of women development manual, volunteer mobilization policy and Junior/Youth promotional activities were in line with the appeal plan. On promotion of fundamental principles and humanitarian values, NRCS continued the radio programme and other activities such as to disseminate/promote International Humanitarian Law

(IHL) as well as promotion of proper use of Red Cross emblem. The close coordination among the International Federation and International Committee of Red Cross (ICRC) and NRCS created positive environment for the team work and made service delivery further effective.

Financial situation:

The budget for 2008 is CHF 2,605,585 (USD 2.4 million or EUR 1.5 million), while the funding is CHF 1,014,518; which is 39 percent of the budget. Overall expenditure for 2008 was 29 percent.

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

Number of people we help: During this reporting period NRCS provided support to 109,781 people, among them 50,685 (46.2 percent) were women.

As per the global agenda goal the number of the person is as follows:

Global Agenda Goal/ Core Areas	Number of beneficiaries		
	Male	Female	Total
Global Agenda 1: Disaster management	11,000	9,000	20,000
Global Agenda 2: Health and care	5,800	8,700	14,500
Global Agenda :3 Organisational development / capacity building	2,296	1,885	4,181
Global Agenda 4: Humanitarian Value promotion	40,000	31,100	71,100
Total	59,096	50,685	109,781

Our partners: NRCS has vast experience of working with bilateral and multilateral partners. Including the ICRC and the International Federation; the NRCS is currently working with more than 10 partner national societies bilaterally and Federation coordination. Similarly NRCS has partnership with UN agencies, national/international non-governmental organizations, Nepal government and community level originations based on its development plan and cooperation agreement strategy (CAS) principle, the global alliances and operational alliances. Altogether, the National Society is working with more than 25 partners inside and outside of the Red Cross/Red Crescent Movement.

Context

After the 12-year long internal (Maoist) armed conflict in Nepal ended, the ongoing peace process continued with the efforts to make the peace sustainable. The country has gone through different political instabilities while implementing the peace process which culminated in the country shifting from monarchism to a democratic federal republic with the successful Constituent Assembly election and the meeting of the Assembly. Except for certain occasional incidents caused by some agitating armed groups in the Tarai belt and a few road blocked strikes (Banda), the security situation in the country remained peaceful during the reporting period compared to past years. The interim Seven Parties' Government of Nepal successfully completed Constituent Assembly (CA) election in April 2008. This has given a new inclusive representation unlike past elections. The representation of women and ethnic youth groups has increased to 30 percent. The country is implementing a federal democratic republic declaration as the then king left the royal palace in line with the wishes of the people expressed through the constitutional Assembly election on 10 April 2008. Nepal Red Cross Society mobilized Red Cross Action Team to respond to the potential casualties before, during and after the CA polls. NRCS deployed volunteers and staff from diverse backgrounds for better acceptance and safer access to every situation. NRCS put its ambulance service, First Aid services and blood transfusion services on a 24-hour alert position to provide services for any potential emergency situations during the election time. The National Society continued its support services to the conflict affected families with the support of ICRC. The end of the conflict and the resulting normalisation of the security situation will remove past constraints NRCS had in implementation of its programmes.

Progress towards outcomes:

Disaster Management

Programme component	Outcomes
1. NRCS disaster preparedness (DP) capacity strengthening	The NRCS capacity in disaster management is strengthened.
2. Community-based disaster management (CBDM)	The disaster management capacity of local communities is further strengthened.
3. Community-based disaster risk reduction (CBDRR)	Effective response services are rendered and disaster risk is reduced

Number of people we helped: The capacity building and risk reduction programmes have targeted to cover around 70,000 beneficiaries of different communities for 2008. Among them, almost an equal portion of male and female beneficiaries have been targeted.

Achievements: Nepal Red Cross Society has been implementing disaster preparedness (DP) capacity strengthening, community-based disaster management (CBDM) and community-based disaster risk reduction (CBDRR) programme. For the effective monitoring and response of disaster situation, NRCS is regularly upgrading the Disaster Management (DM) centre and Geographical Information Systems (GIS) at national headquarters. Likewise, to further strengthen the coping capacity of vulnerable communities, the Disaster Management (DM) capacity of the communities has been further strengthened through the CBDM programme. Similarly, community people are self reliant and conducted the small scale risk reduction activities with great efforts.

Expected outcome 1: The National Society has been strengthening its response capacity through establishing a Disaster Management (DM) centre at NRCS national headquarters. The DM centre has been equipped with the very-high frequency (VHF) radio sets along with repeater tower, 10 GPS sets, mobile sets, rescue kits, GIS map, computer, fax, television and multimedia. The DM centre will convert into an Emergency Operation Centre (EOC) when major disaster strikes. Likewise, NRCS has established a GIS unit under the DM department. The GIS incorporates countrywide disaster management related data and interlinks with the CBDM project implemented districts' map. A final draft of contingency plan focusing on earthquake has been developed and desktop simulation exercise has been conducted involving the governance people of NRCS, senior staff, the International Federation, ICRC and partners national societies (PNSs). The final contingency plan was prepared by the team of NRCS staff and an external consultant; it is based on the NRCS DM policy and Federation guidelines.

Expected outcome 2: NRCS had budgeted for CBDM programme in annual appeal, but the National Society has received only the 26 percent of total appealed amount. This amount will address only DP capacity strengthening and Risk Reduction programme. As a result, CBDM programme was not implemented during the reporting period.

Expected outcome 3: NRCS has been implementing the school-based disaster risk reduction project in Bhaktapur, Syangja, Palpa and Chitawan districts covering a total 40 schools with the financial support of Finnish Red Cross and European Union (EU). During this reporting period, district chapters, volunteers, communities and schools received project orientation. Junior Red Cross/Youth Red Cross (JRC/YRC) circles have been told about entire project goals and activities. Small scale risk reduction activities have been conducted in nine schools out of 40. The students and community people are very enthusiastic about the risk reduction activities and raise local resources to support the project. So far, they have collected a total of CHF 2,723 as school

emergency fund. The emergency fund was used to provide non-food items to the fire victims' of five families in Palpa district. Core groups of students are disseminating the risk reduction skills and knowledge to the community people. Similarly, they are also sharing the skills and knowledge to their colleagues through the peer learning sessions regularly. A total of 1,200 community people and school students received the training during the period. The students, who have been trained in DM training, are disseminating the DRR message by organizing different rallies, street dramas and sometimes, they organized a community level training for the local people by their own efforts. To develop the capacity of the NRCS staff, a total of seven staff members participated in final global DRR lessons learnt workshop in South Africa, building safer community regional lessoned workshop in Kathmandu and climate risk training in Bangkok.

Constraints or challenges:

Agitation and other disturbances in the Terai region resulted in delaying the planned activities. Besides this, the delay in transferring the fund, district and community level programme orientation some planned activities could not be completed on the planned date.

DM programme received only 26 percent of total appeal amount for disaster risk reduction project in 2008. Some activities were integrated to the capacity building project; however, latter on, due to the lack of adequate fund it was not integrated in the project.

Working with partnership:

NRCS always considers community participation as key to the success of its community based projects. The field level project activities were conducted through the extensive participation of community people during the period. NRCS is coordinating with UN agencies, World Food Programme (WFP), government organizations and other bodies on a regular basis for effective disaster response and risk management activities.

Presently, the risk reduction project has been implemented with the financial support of Finnish Red Cross. Apart from this, the DM Department has been implementing number of projects with the financial and technical support of different partners. Among them, European Union, Danish Red Cross, Netherlands Red Cross, Belgian Red Cross, British Red Cross, United Nations Development Programme (UNDP), United Nations Children's Fund (UNICEF), WFP, Belgian Red Cross, British Red Cross, Save the Children US and OXFAM GB are the main partners.

Contributing to longer-term impact:

The disaster management centre and the contingency plan have played a vital role to further strengthen the disaster management capacity of NRCS. The GIS could be an effective means to provide the DM related data on time and this will ensure effective disaster management/response. During the monitoring and supervision visit carried out by district chapter and national headquarters, it is found that, the casualties due to the local disasters have considerably decreased particularly after the risk-reduction interventions at a community level. Through the implementation of the DRR project, community resilience is being gradually enhanced. The number of trained human resources has significantly increased at national, district and community level. Pool of such trained human resource at different levels will ensure effective disaster management/rescue and response activities in the aftermath of a disaster. Availability of trained human resources has supported to foster the coordination at local level. The programme progress report and monitoring reports shows that, the Gender sensitization has increased and women are heading the resource generation activities.

Looking ahead:

The contingency plan has been finalised. Upgrading of DM centre and GIS/DM database are taking place simultaneously. The DM centre and GIS/DM database have become a strong means for the information management. The disaster risk reduction interventions have played a major role to enhance the community resilience. The gender sensitization and community

participation have contributed to ensure sustainability of the disaster risk reduction initiatives. In the coming years also, the priority will be given to women participation in project intervention and disaster response ensuring better service delivery and strengthening capacity. More risk reduction interventions are to be carried out to further develop community resilience.

Health and Care:

Programme component	Outcomes
1. Community-based first aid	Capacities of communities are built to manage injuries and illness during normal times and during disasters.
2. Drinking water and sanitation	Incidences of water borne diseases are reduced
3. Maternal and child health care	Contribution to the reduction of maternal and child morbidity and mortality in targeted areas.
4. HIV/AIDS	Contribution to the reduction of new cases of HIV according to the Global Alliance Framework
5. Public health in emergencies	Capacity of NRCS is enhanced to provide emergency health services to the people affected by disaster and conflict
6. Health sector capacity building	Institutional and programme capacity of the NRCS health services is enhanced

Number of people we help: In 2008, the National Society aims to reach 118,000 beneficiaries. During the reporting period, NRCS has reached 14,360 among which 60 percent are females.

Achievements:

Expected outcome 1: Two additional districts, Salyan and Jajarkot, were selected for implementation of CBFA programme. The executive members and staff of the district chapters were orientated on the programme. The CBFA volunteers in the four districts namely Manang, Udaypur, Dolakha and Ramechhap provided First Aid services to 1,342 people. More than 100 CBFA volunteers were mobilized in their local regions during the Constituent Assembly Polls held in April. Reportedly, First Aid services were provided to 18 people. Additionally, 24 members from junior circle and 44 teachers from community schools are trained in First Aid and equipped with First Aid kits.

The CBFA volunteers provided information on positive health behaviours and environment sanitation to 470 people. Altogether 258 people participated in the clean-up campaign days organized in the four districts. At their own initiation, 49 households constructed pit-latrines. In addition 15 washing platforms and 45 garbage pits have been built. 205 people gained basic information on HIV/AIDS.

A total of 169 families gained information on disaster preparedness. During this reporting period, the community people contributed NPR 4,500 to the 'First Aid and disaster fund' operating locally in the four districts.

Information about Red Cross Principles and activities was shared with 245 people in four districts. 16 people have enrolled as life members. Three junior and two youth circles are formed.

Constraints/ challenges:

Presently the programme is facing funding problems. The CBFA programme has received 54 percent of the appeal. Delay in receiving funds caused postponement of activities; these activities will be conducted on high priority in the next reporting period

Expected outcomes 2 and 3: As the appeal was not adequately funded, planned activities under these expected outcomes could not be implemented during this reporting period.

Expected outcome 4: One facilitators training of trainers (ToT) was conducted in Jhapa district for 22 participants and five community mobilizers were recruited to coordinate and mobilize communities locally. In all three project districts, 606 participatory learning groups sessions (school, community and women's groups) were conducted and 11,672 people benefited from them. Ten peer educators' (PE) networks were established and three PE network meetings were organized. A total of 757 persons benefited from the youth friendly service centre. Among them 51 were referred for voluntary counselling and testing (VCT), anti-retroviral therapy and opportunistic infection (OI) management. A total of 89 persons were tested for HIV in the Red Cross VCT centres. A total of 12,305 pieces of condoms were distributed in the project areas. Monthly staff meetings, two project committee meetings and two coordination meetings were conducted in each project district. Monitoring and supervision at the district level and from national headquarters was regular.

Constraints/ challenges:

Due to low funding all the activities planned for could not be implemented and revision was done based on the funding coverage. The HIV and AIDS project is only 20.33 percent funded. In the HIV and AIDS Prevention, Care and Support Project, sporadic political unrest at local level and low coverage of the funding, meant that some activities could not be conducted as planned and were postponed till the next reporting period. To compensate for the financial shortcomings the field workers were replaced by volunteers who have established networks at the district and local levels. It is expected that this strategy will contribute to the sustainability and increasing ownership at a local level. Despite some difficulties to manage the programme initially with the change strategy, many activities were carried through coordination and cooperation with local authorities and strong efforts have been made to deliver whatever was possible in the context. No problems were encountered later and activities could be carried out as planned.

Expected outcome 5: As the appeal was not fully covered, none of the planned activities under this expected outcome were implemented during this reporting period.

Expected outcome 6: Monthly meetings were conducted in the community with the mothers' group and female community health volunteers as planned. A total 100 health volunteers were trained in Dailekh and Darchula districts. The volunteers generated awareness on health problems and referred people to the local health centres. In total, 256 pregnant women were referred to hospitals in the reporting period for necessary check-ups. Consultative workshops were conducted with district chapters and sub-chapters to identify needs and prioritize the activities at a district and local level. Guidelines and manuals for volunteering concept/activities were developed within the health services. Local-level networks were established to expand services.

Constraints/challenges:

Political unrest at local level in some cases caused delays in executing programme activities. These challenges were addressed through better coordination with district chapters and sub chapters and other concerned stakeholders to mobilize people at the local level.

Working in partnership:

All the activities on HIV and AIDS prevention were implemented in coordination and collaboration with stakeholders at local (local clubs, village development committees, health posts, district hospital, District Health Office and District AIDS Coordination Committee) and national (Ministry of Health (MoH), National centre for AIDS and STD control (NCASC), USAID, Youth Vision, UNDP, World Health Organization (WHO), FHI, ADRA and the International Federation).

ICRC is providing financial support for the emergency First Aid programme and the Belgian Red Cross is supporting First Aid training standardization (FATS) programme implementation. NRCS is mobilising the communities for local resource mobilisation and sustainability of the programme. Implementation was done in close coordination with Belgian Red Cross, Japanese Red Cross, Norwegian Red Cross, ICRC, Federation Global Fund, Care Nepal, WHO, UNAIDS, UNDP, MoH and NCASC.

All the health and care activities are being implemented with coordination and collaboration with different stakeholders. Coordination and collaboration meetings with local (health posts, sub-health posts and village development committees) and international organizations (including USAID, UNDP, WHO, the Adventist Development and Relief Agency (ADRA), the International Federation and community-based organizations were conducted to discuss programme implementation at the local level.

Contributing to longer-term impact:

Field observation, records and focus group discussions suggest a marked increase in people practicing healthy sexual behaviours in the project areas. Increased participation of women in the HIV and AIDS programme has empowered them to make decisions on issues of reproductive health which will definitely contribute to HIV and AIDS prevention among women.

The community-based programme is mainly focussing on addressing the public health problems at the community level through mobilisation of the trained CBFA volunteers. There are visible positive impacts on minimizing the risks and hazards of minor injuries and illnesses in the community. Similarly, through interactions with the beneficiaries and observations, it can be seen that this programme is contributing to raise health awareness in rural low income group population.

Building capacities of Red Cross volunteers in the long-term will contribute to the sustainability of the programme especially in remote districts like Dailekh and Darchula where the accessibility to health care services is limited and challenging.

Looking Ahead:

With challenges coming up, there is a need to focus on interventions that have a holistic approach. Emphasis will be given to diversifying funds. Within the National Society, there is a plan to integrate some health activities with disaster management, community development programmes and humanitarian values.

The main focus will be given on completing all the activities planned for the year and strengthening the monitoring system by developing standard indicators at all concerned levels.

To strengthen the capacity on delivering health services, there is a strong need to integrate capacity building of health projects in terms of trainings and equipment in components under health. There is a plan to integrate capacity building into CBFA and HIV and AIDS.

Organizational Development/Capacity building:

Programme component	Outcomes
1. Community development	The basic health and livelihoods conditions of the most vulnerable communities are improved and the capacity of community organizations and NRCS at all levels is strengthened
2. Volunteering promotion and development	The network of volunteers is systemized and improved at national and district levels

3. Junior/Youth Red Cross organization development and service	The capacity of Junior/Youth members is strengthened to effectively deliver humanitarian services of the movement.
4. Resource mobilization	Dependable and regular financial resources are generated for sustainable service delivery
5. Institutional communication system development	The communication work of the NRCS is strengthened
6. Planning, monitoring and reporting system development	NRCS capacity on planning, monitoring and reporting is improved
7. Gender and women development	Participation of women at all levels of the national society is increased

Achievements:

Nepal Red Cross Society has recently endorsed its fifth development plan for 2008-2010. This plan has prioritized the national and international issues like diversity, climate change and integration of Humanitarian Values in all programme areas. Similarly the NRCS is one of the National Societies where Operational Alliance is being implemented for the community-development programme. Considering the response towards the Appeal 2008/09, the National Society has revised its appeal plan 2009/10 and made it compatible with its strategic plan, global alliance on HIV/AIDS and Operational Alliance.

Expected outcome 1: The number of people helped 2008 is 556, including 385 women.

The community development project in Dhankuta district continued in this reporting period. The project will be phased out in 31 December 2008, after completing its five years project cycle.

The community groups formed and trained under the project, continued their services in the project area, based on clearly defined roles and responsibilities. The project report reveals that the trained traditional birth attendances provided their services to 114 women. Their services included antenatal check-up, nutrition education and advice to take tetanus vaccination etc. Similarly, community based First Aid volunteers provided immediate First Aid services to 111 injured and sick people. The health volunteers organized three meetings to share the problems and constraints they faced during rendering their services to community people. Health and sanitation volunteers counselled 356 targeted people to maintain their personal, household and environmental sanitation.

A nine member water users committee was formed to start the construction work on the proposed gravity-fed drinking water scheme. A meeting among all nine members of water users' committee decided to collect NPR 3,000 from the beneficiaries of the scheme for establishment and maintenance of the proposed scheme.

More than 60 percent women that enrolled in self-help groups in previous years have been depositing their saving in their respective groups during reporting period. The skill based trainings provided to the women group members last year generated enough income for covering the education cost of their children.

Community development programme of NRCS has been entered into Operational Alliance roll-out with the objective to harmonize the programme framework in different areas.

Third community development programme (CDP) Operational Alliance meeting which was held in Helsinki (Finland) decided to harmonize the programme framework in nine different areas of the programme. The nine harmonized areas of the programme were CDP log-frame including performance tracking system, activity-based budgeting including standard unit cost, log-frame based progress reporting system, log-frame based financial reporting, standard framework for monitoring and evaluation systems, standard Terms of Reference (ToR) for situation analysis and baseline surveys, evaluations and impact studies, common audit based on single Terms of

Reference (ToR), annual review and lesson learnt including joint planning, action research on cross cutting issues and impact studies.

Expected outcome 2: The number of people helped during 2008 is 2,000.

A total of 10 district chapters have formed Red Cross volunteer action teams. A two-day orientation was organized for 17 leader volunteers. All district chapters are highly committed towards preparing a database of the volunteers. A total of 70 district chapters (out of a total of 75) have mobilized the local volunteers at the time of chapters and sub chapters' assembly. At the time of Constituent Assembly (CA) election, district chapters mobilized the First Aid and other emergency service volunteers.

Expected outcome 3: The number of people helped is 2000 including 800 female.

This project has been implemented in five districts (Panchather, Ilam, Chitwan, Surkhet and Doti) and is being gradually expanded to other districts as well, to strengthen the Junior/Youth organization and systematize their voluntary activities. This is being done by implementing the youth volunteer management manual empowerment activities. This manual is the policy and process based guide book to facilitate in involving the Junior/Youth members in Red Cross activities as volunteers.

Manual for systematically organising Junior/Youth seminars and camps has been developed and is in the process of distribution in the districts. This manual is a separate book developed as the handbook that facilitates to conduct activities like national, districts, sub-chapters level Junior/Youth seminars and Junior/Youth camps. Similarly, the evaluation of the Junior/Youth organization and service project has also been completed during this reporting period.

Myagdi district chapter and Prakash Secondary School jointly hosted the 28th National Junior/Youth conference at Beni Bazar from 27 April till 28 April 2008. More than 400 participants including 133 Junior/Youth representatives of 45 districts, district level government authorities, NRCS management and governance body, local level leaders, ICRC and UNICEF representatives attended the conference. "Through leadership skills development, the juniors and youths need to develop their capacity for taking future leadership that would play a significant role to give an image of a good society" said NRCS Secretary General Dev Ratna Dhakhwa in the inaugural ceremony.

The seminar recommended ways and means for organizational development focusing on the progress of 2007 and planning the current year and future with concrete actions. The conference ended with Beni Declaration reiterating the assurance to continue the previous commitments and new commitments for the programmes and priorities of 2008, adding in the focus on youth participation in various activities as trained volunteers.

Expected outcome 4, 5 and 6: As the appeal was not adequately funded, planned activities under these expected outcomes could not be implemented during this reporting period.

Expected outcome 7: The number of people helped is 125, including 25 men.

Dailekh, Gulmi and Arghakhanchi districts where the project has been implemented in 2006 and 2007 were identified as the follow-up and phased-out districts for 2008. Activities like; revival of women development committees, organizing gender training, monitoring and follow-up visits and providing financial support to the project staff are being carried out. These activities strive to provide technical inputs and contribute to maintain the sustainability of the intervention in the project districts. The operational plan for 2008 was developed and one-day orientation for 16 volunteers and staff members of the concerned districts and headquarters was also conducted at the national headquarters to discuss several issues related to the project.

A total of 91 women have regularly been saving money in saving groups and mobilizing it to support needy women. In addition, 62 vulnerable women also received the financial support through income generation activities from previous years' fund.

Challenges/constraints:

Due to the CA elections, frequent strikes and transportation blockades in Terai area of Nepal, the procurement and transportation of materials for the construction of basic sanitary units and drinking water schemes of community development programme and national seminar of Junior/Youth could not be carried out as planned. Retention of huge number of motivated Junior/Youth members remains a challenge. Due to the very limited funding (18.38 percent) for women development programme, many activities have been curtailed down drastically. Delay in fund transfer from the Federation further postponed the scheduled activities.

Working in partnership:

Funding partners of community development programme include Finnish Red Cross, Norwegian Red Cross, Danish Red Cross, Belgium Red Cross, Flanders and Swedish Red Cross Societies. Swedish Red Cross is also supporting two twinning-cooperation programmes with the Gota region bilaterally. Similarly, the funding partners of volunteering promotion and development, Junior/Youth Red Cross organization development and service and Gender and women development programmes include Swedish Red Cross, Finnish Red Cross through the Federation and ICRC. Rest three programme have no funding partners.

Contributing to longer term impact:

The project report revealed that the community development programme has contributed to improved health and reduced illnesses among the targeted beneficiaries through changing behaviours in health and sanitation. Health promotion activities and control of common diseases through awareness and counselling activities contributed to overall community well being and decrease in vulnerability in health, as per the local health post report. Direct participation of the targeted local communities' people helped to built community ownership in order to ensure sustainability. The quality participation of the Junior/Youth members in humanitarian activities has contributed to the empowerment of the Junior/Youth members which have significantly supported to achieve the goals set.

The Gender and women development project has contributed to raise the gender awareness in Red Cross staff and volunteers and contributed to empower the vulnerable women through the skills and gender trainings and the financial support for income generation communities. This has also contributed to the increase the women participation at different levels of NRCS organization and programmes.

Looking ahead:

Community development programme has entered into the Operational Alliance and will continue to be rolled out. It will further contribute to reduce the vulnerability in the communities and bring positive difference in people's lifestyles.

Humanitarian Value Promotion

Programme component	Outcomes
Principles and humanitarian values promotion	Understanding of the Fundamental Principles and Humanitarian Values is improved (through integration in core programmes and community awareness)

Achievements

Expected outcome 1: This programme has reached up to 71,100 people. This includes 63,000 people from the weekly Red Cross radio programme, 1,500 people from monthly Nepali bulletin and 1,000 individuals and organizations from the quarterly English newsletter including government ministries/departments, UN agencies and Embassies in Kathmandu.

NRCS Fifth Development Plan (2008-2010) has clearly mentioned Humanitarian Values and Fundamental Principles as a basis for all NRCS actions so as to ensure integrity and impartial image of NRCS. Integrated model of humanitarian values (HV) programme has made some progress in the reporting period. Disaster management, community development, Junior/Youth and health have integrated HV components in their programme activities. DM, community development and Junior/Youth departments have allocated separate budgets for HV promotion. Budgets have been allocated for radio programmes and youth camps where groups from diverse backgrounds like single women, disabled, people living with HIV/AIDS traditionally untouchables and other minorities will be invited to participate. Health department has supported the collection of success stories for promoting humanitarian service and humanitarian values.

NRCS has a weekly radio programme supported by different programmes like DM, HIV/AIDS and community development. The radio programme targets dissemination of fundamental principles and success stories of communities working together and their efforts of reducing discrimination. Twenty five radio programmes were aired during the reporting period. The radio covered HV and Red Cross services in the vulnerable communities. The National Society's website was updated with five issues of Nepali bulletins and one issue of English newsletter, to help dissemination of HV and Red Cross services. A total of 5,400 people visited NRCS website and 200 persons visited Nepal Red Cross library for research and study on Red Cross.

A total of 15 communication focal people from seven departments of the NRCS headquarters have been trained in building their capacity in reporting on humanitarian values. More specifically they were trained in photography on how to capture good pictures of humanitarian actions. Non-discrimination and inclusive behaviour among community people was also promoted through community-based programmes. In this reporting period, 3,443 people were oriented on Red Cross Principles, knowledge and International Humanitarian Law.

Constraints or Challenges

Appeal in 2008/2009 totals CHF 44,000 regarding humanitarian values. But there is no funding externally. However, through integration with community development and disaster management programmes, some activities have been carried out in the reporting period. Although there have been efforts to integrate HV component for resource sharing and better results, HV appeal as such could not be funded. Shortage of human resource is another constraint.

Working in partnership:

The ICRC has supported the operation cost of Communication and Humanitarian Values department for implementing dissemination programme. The International Federation's SARD office has supported the salary of the communication officer. The International Federation and ICRC have provided technical and financial support. Equal access (a local NGO) has supported the NCRS technically to broadcast radio episodes through its network.

Contributing to longer-term impact:

The publications, orientation programmes and integrated activities are providing information against stigma and discrimination. Those activities contribute towards the Global Agenda goal 4. Participation and hearing of diverse community have started in all programmes.

How we work

The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".

Global Agenda Goals:

- Reduce the numbers of deaths, injuries and impact from disasters.
- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

Contact information

For further information specifically related to this plan, please contact:

- In Nepal: Umesh Prasad Dhakal, executive director, NRCS; email: umesh@nracs.org; phone: +977.14.27.0650; fax: +977.14.27.1915
- In Nepal: Andrea Reisinger, Federation representative; email: andrea.reisinger@ifrc.org; phone: +977.14.28.5843; fax: +977.14.28.6048
- In India: Al Panico, head of regional office; email: al.panico@ifrc.org; phone: +91.11.2411.11 25; fax: +91.11.2411.1128.
- In Malaysia: Jagan Chapagain, deputy head of zone; email: jagan.chapagain@ifrc.org; phone: +603.2161.0892; fax: + 603.2161.1210

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