

Programme Update



East Asia

Appeal No. MAA54001

28 December 2009

This report covers the period from
01 July 2009 to 31 December 2009



Relief supplies were delivered to affected people of the floods that hit Mongolia in July. The International Federation's East Asia regional office provided support in the assessment of needs at the beginning of the operation. International Federation.

In brief

Programmes summary:

The International Federation's East Asia regional office serves to support and build capacities within the national societies of the East Asia region. The region includes China, Mongolia, the Democratic People's Republic of Korea, the Republic of Korea, and Japan. The International Federation has programmes that support the national societies in China, Mongolia and the Democratic People's Republic of Korea (DPRK).

Following the worst floods in decades which hit Mongolia in July, killing 24 people and affecting thousands more, CHF 240,000 in funds was released from the Federation's Disaster Relief Emergency Fund (DREF), to support the Mongolian Red Cross Society's (MRCS) relief efforts with food and non-food items.

In other developments, the East Asia regional disaster management programme continues to provide technical support to DPRK Red Cross, Red Cross Society of China (RCSC) and MRCS in the areas of disaster risk reduction. The programme supports the national societies in reviewing and developing funding plans and proposals and conducting feasibility studies together with the national societies and discussing with potential donors and partner national society interested in supporting disaster risk reduction in the region.

The regional health programme supports the national societies of the region in various health programming, including HIV, blood donor recruitment, and emergency health and water and sanitation. The regional health programme has also been actively supporting the adaptation process of the International Federation's new community-based health and first aid approach in the regional countries.

Regional support to the national societies in communications, organizational development, planning, monitoring, evaluation and reporting, and overall coordination continue to be a priority for the regional office.

Financial situation: The total 2009 budget has been revised down from CHF 3,802,062 (USD 3.51 million or EUR 2.5 million) to CHF 1,001,123 (USD 980,205 or EUR 662,447) to account for a shift in expenditures that were accounted for in the China earthquake appeal budget. Coverage is 101 per cent while expenditure from January to October 2009 is 45 per cent of the total 2009 budget ([see attached financial report](#)). The financial report from January to December 2009 will be issued with the 2009 annual report by April 2010.

No. of people we help: During this reporting period, headquarters and branches of the Mongolian, Chinese and DPRK Red Cross Societies directly benefited through support of the International Federation's initiatives. Indirect beneficiaries include the branch staff, volunteers and communities that gain further knowledge and better services through the workshops and trainings that are held at the regional level. Furthermore, through support from the regional office, the national societies were better able to reduce risks in the communities they serve both from disasters and public health concerns.

Our partners: The International Federation's East Asia regional office works closely with the national societies in the region, their governments, and local communities. Other partners include the American Red Cross, Australian Red Cross/Australian government, British Red Cross/British government, Canadian Red Cross/Canadian government, Danish Red Cross/Danish government, Finnish Red Cross/Finnish government, German Red Cross/German government, Japanese Red Cross, Netherlands Red Cross/Netherlands government, Norwegian Red Cross/Norwegian government, Spanish and Swedish Red Cross/Swedish government. The United Kingdom Department of International Development (DFID) is also a supporter in the region. Close coordination with other Movement partners, such as the International Committee of the Red Cross (ICRC) and the Asian Red Cross Red Crescent Network on HIV (ART) is a key element of our work. Maintaining and building relations within the United Nations system continues to be important, especially with partners such as World Health Organization (WHO), United Nations Children's Fund (UNICEF), The Joint United Nations Programme on HIV/AIDS (UNAIDS), UNFPA and other international and non-government organizations. Furthermore, the regional office works with international media agencies and other partners to promote the work of the Red Cross national societies in the region. The national societies in the region have many Red Cross partners engaged in both bilateral and multilateral projects. The International Federation supports the national societies in their coordination with partner national societies, specifically the CAS established in DPRK and the initiation of the process in Mongolia and the Global Alliance on HIV in both Mongolia and China.

The International Federation, on behalf of the national societies in the East Asia region, would like to thank the abovementioned partners for their generous support.

Context

As the season for influenza-like illnesses picked up in the northern hemisphere, all the countries in the East Asia region have been hit with A (H1N1) cases. As of 9 December, the DPRK has reported nine cases of A (H1N1), with no deaths.

In recent months, the A (H1N1) virus has spread quickly throughout China. In the second week of November, nearly 90 per cent of flu cases in the mainland were A (H1N1).¹ This brings the total to over 93,000 reported cases including 114 deaths in mainland, Hong Kong, Macao and Taiwan as of 17 November.² However, there is acknowledgement that these figures are likely to represent only a small proportion of the actual number of cases that may have occurred. A vaccination campaign was launched across the country mainly targeting high risk groups. Already, 20.34 million people are inoculated against the A (H1N1) flu nationwide as of 22 November.³

Mongolia reported 1,044 confirmed cases of A (H1N1), including 17 deaths as of 17 November. Intense influenza activity continues to be observed in Mongolia with a severe impact on the healthcare system and the government maintained the second-highest level of alert during most of November. While such extended pandemic mitigation measures may have slowed the rapid epidemic progression in the initial weeks and eased the burden on health infrastructure, the hidden/indirect economic and social cost of such measures is likely to be very high, especially for the large number of families whose livelihoods and food security depend on their daily meagre earnings, services and other small informal sector activities. More information on the situation and response of the MRCS can be found [here](#).

¹ The A/H1N1 influenza cases accounted for 89.4 percent of all flu cases reported in the Chinese mainland the second week of November, almost 3 percentage points higher than the figure of the previous week, China's Ministry of Health.

² Source: Ministry of Health

³ Source: Ministry of Health

South Korea has raised its alert level to the highest in recent months, while in Japan, influenza activity remains elevated but stable nationally, and may be decreasing slightly in populated urban areas.

However, while the degree of under-estimation varies from country to country based on their surveillance system capacity and national reporting guidelines in use, it is widely acknowledged now that these figures are likely to represent only a small proportion of the actual number of cases that have occurred in the region, since many countries have stopped counting individual cases, particularly of milder illness in recent months.

In other respects, in this second half year, the disaster-prone characteristics of the region came to the fore.

China was hit by a series of disasters, including flooding, typhoons, earthquakes, drought and heavy snow.

The floods during the raining season left more than 300 people dead and 100 missing, with up to 67 million affected in nearly all the provinces in the country. At least 260,000 houses collapsed and the direct estimated economic loss is estimated more than CHF 7.7 billion (CNY 46 billion)⁴. The downpours destroyed houses, flooded crops, cut power, damaged roads and caused rivers to overflow.

Typhoon Morakot made landfall in Taiwan on 7 August, killing nearly 500 people and forcing the evacuation of thousands. In mainland China, it killed eight people, toppled more than 10,000 houses and inundated 449,600 hectares of cropland according to the statistics of the Ministry of Civil Affairs of China.

In Mongolia, the flooding in July caused more than 1,975 families to be affected, with 124 of them left homeless. In addition, three bridges and ten power stations were damaged. The most affected areas of Ulaanbaatar were Bayanzurkh and Khan-Uul districts. Particularly, in Bayanzurkh district, which is more populated by *ger*⁵ district residents, over 1,000 *gers* were swept away by the floods according to the local government. A greater tragedy took place in the outskirts when a *ger* collapsed on a family on the steppes of Bayanzurkh district, killing three children. The disaster was minimal in terms of the number of people affected or killed if compared, for example, other neighbouring countries like China – although not if Mongolia's small population is factored in - but it has shown that even small to medium size recurring flood events in poor, *ger* districts of Ulaanbaatar can lead to serious public health concerns, especially among the most vulnerable groups due to their very low coping capacity. The larger issue of ensuring better health for the most vulnerable who often live in informal settlements in the region's rapidly growing cities remains critical to address in regional forums.

In recent months, the political tension on the Korean peninsula has been somewhat reduced. Optimistic developments include the reopening of the six party talks. However, contradictory opinions among international agencies on the food security situation for 2010, based on data from the harvest of different crops in 2009, make it difficult for humanitarian organizations to plan appropriate support.



The Mongolia Red Cross Society has partnered with the Ministry of Health, WHO and UNICEF to help create posters showing H1N1 prevention messages. These were adapted from the International Federation's key messages and are being distributed mostly in targeted communities in six central districts of Ulaanbaatar City. MRCS.

⁴ The numbers is estimated based on the statistics of Office of State Flood Control and Drought Relief Headquarters of China released on July 30, 2009: there are 29 provinces/cities/areas affected by floods, 5.335 million hectare crops destroyed, 67.36 million affected, 307 killed, 113 missing, 260,000 houses collapsed, the direct economic losses is estimated CHF 7.75 billion (RMB 46.5 billion). These figures covers the period from 1 April to 30 July, most of the floods happened during the end of June to July.

⁵ The term "*ger*" refers to the commonly used portable housing structure for the nomadic people of Mongolia that are made of round wooden frames covered by felt.

Progress towards outcomes

Disaster management

Outcomes/Expected results

Programme component	Component outcome
Disaster management planning and organizational preparedness	National society disaster management strategies and contingency plans are developed and implemented, promoting national societies as respected humanitarian organizations with effective disaster management capacity in their country
	Capacity of the three national societies in the region to respond to disasters is strengthened.
Community preparedness/disaster risk reduction	The capacity of East Asia national societies is strengthened to support hazard-prone communities in reducing the impact of disaster through increased awareness and preparedness activities.
Coordination and cooperation	The East Asia disaster management programme is supported through the effective coordination and cooperation with international and external groups.

Achievements

During the past six months, the regional disaster management delegate, representing the International Federation, participated in an International Disaster and Risk Conference in Chengdu, China. Both the Red Cross Society of China (RCSC) and the International Federation gave presentations at the conference focused on Sichuan earthquake response and the International Federation's disaster risk reduction approach worldwide.

In July, the regional disaster management delegate, communication delegate and health delegate all provided support to the MRCS to conduct a needs assessment in their response to the floods in the country, which affected more than 2,000 families in the *ger* districts of Ulaanbaatar. A total of CHF 240,000 in funds was released from the International Federation's Disaster Relief Emergency Fund (DREF), to support the Mongolian Red Cross Society's (MRCS) relief efforts with food and non-food items. A procurement delegate from the International Federation's Sichuan earthquake operation was also deployed to Mongolia to support the procurement.

A delegate from the Asia Pacific zone office's disaster management unit went to Mongolia in November to conduct a DREF operation review and facilitate a lessons learned workshop for MRCS staff on the DREF operation.



Most of the flood-affected families in Mongolia have lost homes and belongings, in a nation where poverty remains widespread. MRCS/International Federation

With support from the regional disaster management delegate in East Asia and the Asia Pacific disaster management unit, the DPRK Red Cross facilitated a disaster response and contingency planning workshop to review and update its contingency plan to align with International Federation guidelines since the population of the country is one of the worst affected by floods in the region. Early warning on flooding and possible mud/landslides in the DPRK has been disseminated. The workshop brought around 20 DPRK Red Cross Society staff from different departments including disaster management, health, water and sanitation and organization development and focused on an introduction to what are the contingency plans, contingency planning process and went on to draft a contingency plan for floods. A follow-up action plan has been developed by the DPRK Red Cross to continue developing contingency plans at the provincial levels.

The East Asia regional disaster management programme continues to provide technical support to DPRK Red Cross, RCSC and MRCS in the areas of disaster risk reduction. The programme supports national societies in reviewing and developing funding plans and proposals and conducting feasibility studies together with the national societies and discussing with potential donors and partner national societies interested in supporting disaster risk reduction in the region. In the DPRK, three years' funding have been received from European Union through the Danish Red Cross to support the DPRK Red Cross disaster risk reduction programme. In

Mongolia, Norwegian, Finnish and Australian Red Cross Societies are supporting the MRCS in its disaster risk reduction programme. In China, the Norwegian Red Cross plans to develop a five-year disaster risk reduction programme to support the RCSC to scale up its community-based disaster risk reduction. In addition, the Finnish Red Cross, the Australian Red Cross and the Hong Kong branch of the RCSC continue their support for disaster risk reduction activities in China.

The regional disaster management delegate continues to work closely with the Asia Pacific disaster management unit and actively participate in regional disaster response team taskforce meetings in Kuala Lumpur. He also supports the field assessments and reviews, and coordinates with the national societies, regional and zone to apply and adapt disaster management tools, including support for contingency preparedness planning.

The MRCS and the RCSC disaster management staff participated in the practitioners' workshop on disaster risk reduction in Thailand, where the RCSC shared experiences in community-based disaster preparedness development in China.

In addition, two staff members from the DPRK disaster management department received emergency response unit training in Kuala Lumpur and staff from RCSC and Japanese Red Cross have received training on regional disaster response team management and logistics.

Constraints or challenges

The scope of the region in terms of size and vulnerabilities to disasters puts pressure on the International Federation to meet the needs of the region in its current capacity. The regional disaster management officer left in October, and a new officer will be instated at the end of December. This gap has left this sector short-handed to meet the needs of this programme and the demands and interest of the national societies.

Health and care

Outcomes/Expected results

Programme component	Component outcome
HIV prevention	Capacity of national societies to design, implement, monitor and evaluate effective HIV programmes has increased
Emergency health and water and sanitation	Capacity of national societies to respond to public health issues and water and sanitation issues in emergencies have increased in emergencies has increased.
Blood donor recruitment	Capacity of national societies to manage non-remunerated voluntary blood donor recruitment programmes has increased.
Community-based health and first aid	Capacity of national societies to provide quality community-based health and first aid services has increased.

Achievements

HIV prevention

In August, the International Conference on AIDS for Asia & Pacific was held in Indonesia, gathering some 5,500 policy makers, HIV practitioners, activists and community members from 65 countries, not only from Asia and the Pacific, but also other regions. As the part of the Asian Red Cross and Red Crescent HIV Network, the East Asian national societies actively participated in this forum. Altogether, 12 participants from East Asian national societies and the Federation East Asia regional office attended the conference where they learnt about the latest global and regional developments and trends in HIV prevention and care and support, and shared their HIV programming experiences in East Asia through presentations and joint booth displays at the conference. A total of six presentations were successfully accepted and made at this conference by the East Asian national societies and the regional delegation. The East Asia regional delegation facilitated the coordination with other Federation regional offices in Asia Pacific for joint representation, booth and forums at this conference and in response to a number of requests, provided coaching and support to the national societies' representatives.

National societies from the region have started to play a more active role in the Asian Red Cross and Red Crescent HIV Network. At this recent conference held in Indonesia, two East Asian national societies (Japan

and China) were elected as members to the Asian Red Cross and Red Crescent HIV Network management team. They will assume their roles from January 2010.

The HIV prevention cross border project implemented jointly by MRCS and RCSC is well underway, despite numerous challenges. Directly impacting the international coordination in this programme include the month-long pandemic mitigation measures in Mongolia that banned public gatherings and travel, tightened security measures and an internet ban in China's Xinjiang region following unrest there. As a member of the project's steering committee, the regional delegation supported the project with monitoring, regional coordination and liaison with the respective UNFPA country offices who are joint partners of this project.

In August, the regional office signed a memorandum of understanding with the UNFPA for another two-year partnership on HIV cross border prevention. Jointly with the UNFPA, in September, the regional programme officer conducted a monitoring visit to one of the project implementation sites on the border in Western China's Xinjiang-Uighur Autonomous region. The scheduled monitoring visit by the regional health delegate from the Mongolian side to Erlian- Zamuun-Uud border crossing point was not completed due the tightened border security measures by the Chinese government related to China's 60th anniversary celebrations. However, the baseline surveys among the Chinese and Mongolian border communities, migrants and Mongolian sex workers were successfully completed by both national societies, which provide a powerful insight into the complex issues of cross-border migration and HIV risks.

Emergency health and water and sanitation

The regional delegation has been closely monitoring the A (H1N1) pandemic situation in the regional countries and has provided support to the national societies in their pandemic mitigation measures and business continuity planning. The RCSC has applied for additional A (H1N1) funding from its government and if granted, it will mobilize its nationwide network of branches and volunteers to complement the ongoing public pandemic risk communication activities of the government. The RCSC was one of China's first organizations outside of the government system to launch pandemic response measures when the first cases of A (H1N1) occurred in mid-October. Under the technical guidance from the regional health programme, the national society has been conducting A (H1N1) public risk communication and focusing on personal staff and volunteer protection and continuity of its essential functions such as blood donor recruitment, thus securing safe and adequate supply of blood during the pandemic. The regional health delegate was deployed to Mongolia to provide technical assistance to the national society during the peak weeks of the current pandemic wave.

The regional office kept informed all pandemic focal points in the region on the latest developments of the pandemic in the region and globally and new guidelines/tools available elsewhere through its bi-weekly email updates. It developed and adapted four different staff personal protection guidelines relevant for all Federation-contracted staff in East Asia and supported the country delegations with technical advice and staff guidelines.

In August, the regional health delegate also represented the Asia Pacific zone office at two high-level conferences related to the pandemic (Lancet Conference on Influenza in the Asia Pacific and the International Scientific Symposium on Influenza Pandemic Response and Preparedness). The conferences provided a good platform to understand better the level of global preparedness, particularly in the Asia Pacific zone and identify the gaps and the potential role of Red Cross Red Crescent in filling those gaps through public health interventions.

Jointly with the MRCS health team, the regional health delegate conducted a health assessment during the July floods that affected Mongolia, particularly the capital city of Ulaanbaatar and supported the health component of the MRCS' response operations.

Blood donor recruitment

Through close collaboration and joint planning with the Southeast Asia regional office, the East Asia regional office facilitated blood donor recruiters from East Asia to be invited to an annual meeting of regional blood donor recruitment network of Southeast Asian national societies. Altogether, ten representatives from four regional national societies and the International Federation offices attended the network meeting in December in Indonesia and learned from the rich expertise of Southeast Asia's network and shared their country programme experiences.

The MRCS conducted a self-assessment of its blood donor recruitment programme using the GAP guidelines and it received feedback from the GAP's global technical panel.

Community-based health and first aid



A community-based health and first aid workshop was conducted in China in July, the first of its kind adapting into Chinese the new International Federation approach to holistic programming at community level. International Federation

Following the guidelines from the regional office and the International Federation's health and care department in Geneva, three regional national societies (Mongolia, DPRK and China, including Hong Kong branch) have successfully celebrated the World First Aid Day, traditionally held every second Saturday of September. The reports of country celebrations are profiled in respective country appeal reports and will also be featured in the International Federation's global annual report on World First Aid Day. In total, it is estimated that nearly 15 million people and over 30,000 Red Cross staff and volunteers were actively involved in celebrating this event in these countries. Under the global theme of 2009 celebration ("First Aid for Humanity"), people from all segments of society and youth have received key messages and demonstrations on how simple first aid skills can save lives in everyday and crisis situations and prevent injuries.

The regional health programme is actively supporting the adaptation process of International Federation's new community-based health and first aid approach in the regional countries. To better support this process, the regional health programme officer also attended the global lessons learnt and monitoring and evaluation meeting on community-based health and first aid, held in Indonesia in October. The regional health delegate attended the regional community-based health and first aid master facilitator workshop for Central Asia, held in December in Bishkek. The workshop was an opportunity for her to learn the master facilitation skills.

meeting is ongoing. The planned regional health mapping as a follow up to the regional health team meeting was postponed due to the time constraints and emerging regional priorities. This will be completed in early 2010, before the next regional health team meeting, when the 2009 annual reports and statistics from the regional national societies will be available.

The report of the first regional health team meeting conducted in 2009 March was finalized and planning for the next year's

The regional health unit arranged for all staff of the regional office to take first aid training from the Beijing branch of the RCSC.

Constraints or challenges

During the second half of the year, the A (H1N1) pandemic in the region caused limitations on the implementation of the programmes at both country and regional levels. First, two regional health staff members were heavily engaged on providing guidance and ensuring that appropriate staff protection measures are in place for delegation staff during the A (H1N1) pandemic. This involved close monitoring for influenza-like illnesses and any potential complications among the delegation staff, arranging vaccinations, procurements and other measures. At the same time, some of the national societies' activities were delayed due to variety of reasons related to the pandemic (pandemic containment measures, staff absenteeism, diversion of key staff to the pandemic response measures, etc.). This situation is likely to continue for the remaining months of winter and early spring.

Humanitarian values

Outcomes/Expected results

Programme component	Component outcome
Promotion of humanitarian values and Fundamental Principles	Advocacy and international representation.
	Capacity-building in principles and values / gender of national societies staff and volunteers.
	All national societies in the region have increased the capacity of their information departments.
	Enhancing understanding and sharing of best practices.

Integration of humanitarian values and gender into operational disaster management and health programming	Further development of tools and mechanisms to enhance principles and values-based programming.
	Further development of gender into programming.
Anti-discrimination and violence prevention/reduction programmes	Mapping of national society programmes which target discrimination, marginalization or exclusion of communities who fall outside the traditional health and disaster management programme areas.

Achievements

The communications delegate played a key role in the DREF operation following the floods which hit Mongolia in late July, killing at least 24 people and affecting thousands more. The communications delegate travelled to Mongolia together with the regional disaster management delegate to report first hand on the impact of this disaster.

Working closely with the International Federation's office in Ulaanbaatar and the MRCS, the communications delegate was able to supply such outlets as CNN, BBC, APTN and Reuters TV with high quality photos and video. These brought the story to international attention and played a role in the rapid replenishment of the DREF. The delegate was also able to meet keen demand for interviews from networks including Al Jazeera and BBC.⁶

The trip also served a capacity building purpose, allowing the communications delegate to work closely with MRCS' video cameraman, helping him to produce the kind of product demanded by international outlets; useful feedback was also obtained from Reuters TV on the footage provided to them, permitting lessons to be learned for future disaster coverage.

This also helped to further reinforce cooperation with Reuters TV on the Mongolia story, following on from their coverage of MRCS' work with vulnerable beneficiaries under the social care programme during a trip to cover the 24 May presidential elections. The resulting footage was used by international media outlets including BBC World.

Coordination is under way to organise a media visit by the Finnish media and other media to Mongolia in order to raise visibility around the EU/Finnish Red Cross-supported work to ramp up the social care programme. The communications delegate and the head of office of the Mongolia country office held a preliminary meeting with the Beijing correspondent of the key Finnish daily Helsingin Sanomat, and a similar meeting is planned with Finland's YLE television.

In DPRK, the communications delegate has not yet been able to make a follow-up visit to the country since November 2008. However, contact was facilitated between APTN's bureau in the country, a video journalist from the company who visits the country six times a year, and the International Federation country office and national society. This will lead, it is hoped, to APTN coverage of DPRK Red Cross work.

The delegate has also been working with the International Federation's country offices in the region to produce stories about the International Federation's work in the country, which are expected to be used on the International Federation website or other outlets such as upcoming editions of the zone newsletter.



The International Federation hosted a CAS meeting for partners of the DPRK Red Cross Society in Beijing in October. All members to the CAS agreed to another three years of support. International Federation.

Following the CAS meeting for DPRK in Beijing, at which the delegate provided communications support to the DPRK Red Cross, a further visit to the country, possibly in early 2010, is under discussion.

The communications delegate, working with the DPRK Red Cross and the International Federation's country office in Pyongyang, is engaged in writing an information sheet about the national society's humanitarian diplomacy in interactions with the government towards country's March 2007 Red Cross Law. This will possibly be used as an example to share with other national societies.

⁶ The report: <http://edition.cnn.com/2009/WORLD/asiapcf/07/21/mongolia.floods/index.html>
http://news.bbc.co.uk/2/hi/in_pictures/8162695.stm

Working in partnership

The International Federation's East Asia regional office works closely with the region's national societies and their partners to help coordinate Red Cross activities in the region. At the continued request of the RCSC, the East Asia regional office plays a special role in coordinating the Movement's multilateral support to the earthquake operations.

The International Federation's East Asia regional office also hosts representatives of four partner national societies in its Beijing and Chengdu offices in China, as well as the Global Road Safety Programme representative for China. These partner national societies are American Red Cross, Canadian Red Cross, Japanese Red Cross and Netherlands Red Cross.

There are a number of other coordination mechanisms in place in the region, namely the cooperation strategy agreement (CAS) led by the DPRK Red Cross in the DPRK as well as the HIV alliances in both Mongolia and China. The East Asia regional office also coordinates closely with the ICRC on various issues in the region, including annual Partnership and Leadership Meetings for all East Asia national societies.

The disaster management and health programmes of the regional office works closely with the national societies in the region and coordinates with other international organisations, government agencies and the UN system in the region, to actively share experience in disaster response information, disaster risk reduction activities, public health concerns and other health in emergencies, and other critical issues.

Contributing to longer-term impact

While organizational development is not a separate programme sector within the International Federation's regional support plan, it is a critical component of our work. With specific input of the zone organizational development coordinator and the regional delegate for planning, monitoring, evaluation and reporting (PMER), national societies continue to get tailored support from the region. In this half of 2009, both the zone and regional offices provided ongoing support to the national societies in Mongolia and China to continue to work on intensified capacity building projects.

In addition, the PMER delegate designed and conducted a specialized workshop for the Mongolian Red Cross Society on PMER tools and applications. A toolkit and training package will be developed and rolled out in 2010. The same will be offered in China and DPRK, in consultation with national societies, partners, and the ICRC.

The national societies in the region have developed their own capacity to actively respond to disasters in their countries. They have taken the role to ensure that response preparedness is in place and each national society in the region has played an important role in assisting its respective government in disaster response. National disaster response teams have been established and have been well functioning whenever disasters have occurred.

Additionally, all the national societies in the region have developed their disaster risk reduction strategies and are focused on reducing the risks in vulnerable communities and scaling up their community- based disaster risk reduction programme.

The support of the International Federation has facilitated some of this capacity building, through the translation of specific tools, the planning of specific workshops and trainings in key approaches, and providing opportunities within the region, and beyond, for experience and information sharing.

The extent of the World First Aid Day celebrations has been steadily increasing from year to year. This year alone, as mentioned above, an estimated 15 million people and over 30,000 Red Cross staff and volunteers were actively involved in celebrating this event in the region's countries. Behind these numbers, what it really indicates is the increasing recognition in the region of the importance of first aid education for the whole population, which is very much in line with the International Federation's revised First Aid Policy of 2007 to make first aid accessible for all. The regional office has been actively disseminating the International Federation's first aid policy and guidelines at different regional and country forums in the past years.

Bringing together partners and coordinating opportunities for collaboration and linkages is an important role for the regional office. This effort will continue to be strengthened in the years to come.

Looking ahead

In 2010, the regional disaster management programme will be focused on supporting national societies in the region as they develop the contingency planning process and giving technical support to national societies to further develop their own disaster response teams. The programme will also support regional national societies to continue scaling up their disaster risk reduction activities and coordinate disaster risk reduction initiative with other regions.

In the next year, the International Federation hopes to take advantage of the fact that the region is a host to a very high-profile global event (Shanghai World Expo 2010 from May through October) and its potential global media outreach. The regional office will also coordinate closely with the RCSC on the planning of celebrations of two important health issue days which are widely celebrated by the Red Cross Red Crescent, such as the World First Aid Day and World Blood Donor Day.



The International Red Cross and Red Crescent pavilion for the 2010 Shanghai Expo has officially been handed over to RCSC in September from the Bureau of Shanghai World Expo Coordination. The picture shows the artistic rendition of the pavilion.⁷

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.

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<Interim financial report below; click here to return to title page>

⁷ Photo from Shanghai Expo website: <http://en.expo2010.cn/a/20090923/000002.htm>

International Federation of Red Cross and Red Crescent Societies

MAA54001 - East Asia region

Interim Financial Report Jan-Oct 2009

Selected Parameters	
Reporting Timeframe	2009/1-2009/10
Budget Timeframe	2009/1-2009/12
Appeal	MAA54001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL
A. Budget	237,701	251,658	0	351,337	160,428	1,001,123
B. Opening Balance	114,451	102,382	0	147,550	134,338	498,721
Income						
<u>Cash contributions</u>						
<i>China Red Cross (from Chinese Government)</i>				32,612	32,612	65,224
<i>DFID Partnership grant</i>	43,959					43,959
<i>Japanese Red Cross</i>	49,382	49,382				98,763
<i>Norwegian Red Cross (from Norwegian Government)</i>	29,390	14,695		29,390	10,019	83,493
<i>Sweden Red Cross (from Swedish Government)</i>				67,862		67,862
<i>Unidentified donor</i>		0				0
C1. Cash contributions	122,730	64,076		129,864	42,631	359,302
<u>Outstanding pledges (Revalued)</u>						
<i>Sweden Red Cross (from Swedish Government)</i>				73,105		73,105
<i>UNFPA</i>		10,748				10,748
C2. Outstanding pledges (Revalued)		10,748		73,105		83,853
<u>Other Income</u>						
<i>Services</i>					64,578	64,578
C5. Other Income					64,578	64,578
C. Total Income = SUM(C1..C5)	122,730	74,825	0	202,969	107,209	507,733
D. Total Funding = B + C	237,181	177,207	0	350,519	241,547	1,006,454
Appeal Coverage	100%	70%	#DIV/0	100%	151%	101%

II. Balance of Funds

	Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL
B. Opening Balance	114,451	102,382	0	147,550	134,338	498,721
C. Income	122,730	74,825	0	202,969	107,209	507,733
E. Expenditure	-117,511	-115,267		-185,702	-28,059	-446,538
F. Closing Balance = (B + C + E)	119,670	61,940	0	164,817	213,488	559,916

International Federation of Red Cross and Red Crescent Societies

MAA54001 - East Asia region

Interim Financial Report Jan-Oct 2009

Selected Parameters	
Reporting Timeframe	2009/1-2009/10
Budget Timeframe	2009/1-2009/12
Appeal	MAA54001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure						Variance
		Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL	
A		B						A - B
BUDGET (C)		237,701	251,658	0	351,337	160,428	1,001,123	
Supplies								
Shelter - Relief	79,504							79,504
Construction Materials	152,759							152,759
Clothing & textiles	150,670							150,670
Seeds,Plants	68,949							68,949
Water & Sanitation	1,707,500							1,707,500
Medical & First Aid	2,675,050							2,675,050
Teaching Materials	121,417							121,417
Utensils & Tools	69,264							69,264
Other Supplies & Services	487,834							487,834
Total Supplies	5,512,948							5,512,948
Land, vehicles & equipment								
Vehicles	72,247							72,247
Computers & Telecom	4,000							4,000
Total Land, vehicles & equipment	76,247							76,247
Transport & Storage								
Storage	91,461		122				122	91,339
Distribution & Monitoring	585,169							585,169
Transport & Vehicle Costs	140,592							140,592
Total Transport & Storage	817,223		122				122	817,101
Personnel								
International Staff	1,213,491	68,224	54,869		150,571	1,506	275,169	938,322
National Staff	184,946		5,386		12,200		17,586	167,359
National Society Staff	226,296							226,296
Consultants	37,436							37,436
Total Personnel	1,662,169	68,224	60,255		162,771	1,506	292,755	1,369,413
Workshops & Training								
Workshops & Training	498,960	10,743	12,369		158	10,556	33,826	465,134
Total Workshops & Training	498,960	10,743	12,369		158	10,556	33,826	465,134
General Expenditure								
Travel	116,697	16,616	7,505		4,383	13,793	42,298	74,399
Information & Public Relation	82,730	13,482	906		4,610	166	19,164	63,566
Office Costs	95,394		465			-166	299	95,094
Communications	92,173	532	1,765		957	196	3,448	88,725
Financial Charges	2,296		50				50	2,247
Other General Expenses			221		151	185	557	-557
Total General Expenditure	389,290	30,629	10,911		10,102	14,173	65,816	323,474
Contributions & Transfers								
Cash Transfers National Societies			22,905				22,905	-22,905
Total Contributions & Transfers			22,905				22,905	-22,905
Programme Support								
Program Support	622,668	7,915	8,090		12,071	1,824	29,899	592,769
Total Programme Support	622,668	7,915	8,090		12,071	1,824	29,899	592,769
Operational Provisions								
Operational Provisions			614		600		1,215	-1,215
Total Operational Provisions			614		600		1,215	-1,215
TOTAL EXPENDITURE (D)	9,579,503	117,511	115,267		185,702	28,059	446,538	9,132,966
VARIANCE (C - D)		120,190	136,391		165,635	132,369	9,132,966	