

Programme Update



Myanmar

Appeal No. MAAMM002

30 June 2009

This report covers the period
1 January to 30 June 2009



Myanmar Red Cross Society (MRCS) volunteers providing awareness-raising on HIV through the truckers' project in Mandalay division.

In brief

Programme summary:

As the large-scale relief programme came to an end in late 2008, the Myanmar Red Cross Society (MRCS) has transitioned into the recovery phase of programming for cyclone Nargis. MRCS remains committed to ensuring its activities in other parts of the country resume while benefitting from the technical expertise available in-country through the Nargis support. Commitments and plans of action, outside of the Nargis operations, were reviewed taking into account MRCS existing capacities apart from its work in the Ayeyarwady delta area. The MRCS hosted the Nargis Cyclone partnership meeting in Yangon in mid-February, which was well received by the attending 17 partner national societies, and enabled MRCS to have not only direct dialogue on current and future plans and activities, primarily in the delta but also a representation of ongoing work in other parts of the country. MRCS has made headway in some programme commitments, partly brought about through a degree of increased momentum and capacity through the Nargis response operation.

Approaching mid-year, a focus of MRCS to deliver on the Nargis recovery operation remains. In the latter months, the MRCS/International Federation Nargis operations have been faced with emerging challenges (detailed in Nargis monthly situation reports and quarterly operations updates) which continue to require the dedicated attention of MRCS governance and management. Nevertheless, activities in other areas of the country have continued as MRCS continues to surmount the challenge of programme delivery.

Disaster management:

MRCS made headway during the start of 2009 with a revised plan of action for response preparedness measures and community-based risk reduction programming. A completed disaster management review supported MRCS in outlining key priorities for capacity development over a five-year period. MRCS will hold a contingency planning workshop in July to finalize the process started during 2007 and has in addition been part of inter-agency standing committee (IASC) planning for a country-wide contingency plan.

Health and care:

There have been many health and care initiatives facilitated at the start of the year which will benefit MRCS's ongoing programme development and national society profile. As previously identified, the following three key areas will continue to be the focus in an eventual revision of the MRCS health strategy later in 2009: public health in emergencies, community-based health promotion, and first aid and safety. A technical working group for the newly revised community-based health and first aid (CBHFA) has been formed by MRCS, which includes Movement partners, with the objective of working to identify a common programmatic approach. Learning generated from activities in the Nargis-affected area will feed into this. Discussions are underway with the Global Fund for support and collaboration in work on tuberculosis (TB) and malaria.

Organizational development:

Main achievements in this period include the completion of the branch review (incorporating assessments of capacities in the delta), internal MRCS meetings which have led to an outlined plan of action for collaborative discussions on the Seville Agreement and a plan for an MRCS legal base review, later in the year, initial activities to improve human resource management and the launch of the MRCS volunteer insurance and creation of a volunteer database management system.

Financial situation: The total 2009 budget has been revised from CHF 1,446,213 (USD 1.33 million or EUR 948,500) to CHF 1,700,374 (USD 1.57 million or EUR 1.12 million). Coverage is 112 per cent while expenditure from January to June 2009 is 39 per cent of the total 2009 budget.

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

See also Cyclone Nargis [Operations Update No.25](#) (consolidated first-year report).

Our partners: The Myanmar Red Cross continues to benefit from multilateral and bilateral partnerships. The overwhelming response and continued commitment for MRCS support was demonstrated through the Nargis operation, and the interest and participation of 17 partner national societies during the Nargis Cyclone partnership meeting in mid-February 2009. The meeting was well-received, based on feedback from partners and support pledged towards the Nargis operations and longer-term programmes of MRCS. A number of partnerships have been fostered through the Nargis response. Cooperation with the ICRC was maintained in the area of restoring family links in the delta region until March 2009, and support was provided for water and sanitation activities, initial planning of the livelihoods programme, first aid, and dead body management.

Contributors to this appeal include Australian Red Cross/Australian government, Austrian Red Cross, British Red Cross, Finnish Red Cross/Finnish government, French Red Cross, German Red Cross, Irish Red Cross, Japanese Red Cross, New Zealand Red Cross and Swedish Red Cross. Also contributing to the work of the national society on a bilateral basis are the Danish Red Cross and the French Red Cross.

For the Myanmar Red Cross country-wide commitments, the national society continues to benefit from longer term in-country partner national societies: Danish Red Cross supporting community health projects and the French Red Cross supporting disaster risk reduction and recovery operations. MRCS has agreed a bilateral partnership with the Australian Red Cross, a long-term partner of MRCS, initially in the area of restoring family links. Following the partnership meeting, the Austrian Red Cross have demonstrated interest in an eventual long-term partnership supporting capacity building in the area of water and sanitation. MRCS continues to maintain important partnerships with UNICEF, UNFPA, UNHCR, Burnet Institute and maintains a relation with the ministry of health and the ministry of social welfare and resettlement.

On behalf of Myanmar Red Cross, the International Federation would like to thank all partners and contributors for their response to this appeal.

Context

Myanmar has been rated 135 out of 179 countries on the Human Development Index¹. MRCS continues to see community-based, volunteer-led programmes as its priority - namely in health programming and disaster management. Through the Nargis recovery programme, MRCS have committed to ensure that they are able to

¹ The HDI index 2006

capitalize on the available technical capacity, learn from both the relief and recovery programming phases to continue with the increased positive profile they have gained. As such, MRCS is committed to defining their own eventual transition, including the integration of activities in the delta, to become a stronger national society. Planning for the high level of Cyclone Nargis recovery operations continues to consume much of the Myanmar Red Cross' capacity, particularly around responding to any emerging challenges. The MRCS commenced its anticipated move from Yangon to the new headquarters in the capital Nay Pyi Daw in April. The move is expected to affect the planning and coordination of both the Nargis recovery activities and programming under the Myanmar plan. Heads of division and executive committee members rotate between the two locations every two weeks.

Progress towards outcomes

Disaster management

Programme component: Response preparedness

Outcomes/Expected results

- Improved disaster response assistance through organizational preparedness and institutional development to meet the needs of those people affected by disaster

The beginning of 2009 was an opportunity to review the overall disaster management commitments, current programming and potential opportunities brought about through the large-scale response operation and ongoing Nargis recovery programmes.

To review and analyse national hazards in Myanmar, the MRCS carried out a hazard mapping and ranking at the state and divisional level. As a next step, MRCS reviewed its current available resources in-country and complemented this exercise with an outline of forecasted requirements. MRCS undertook such an exercise, inclusive of analysing the preliminary findings, to outline the commitment to strengthening a targeted response system as well as re-initiating activities to enhance community capacity to cope with disasters at their local levels.

A disaster management review was completed in April with the objective of making key recommendations for a phased disaster management plan over the next three to five years. Two consultants led the review process which factored in travel to Nargis- and non-Nargis affected areas. A workshop with 32 headquarters and branch (state divisional level as well as township) representatives was conducted during the review period to facilitate discussion and feedback on MRCS disaster management activities to date and review the effectiveness of these. MRCS will translate the review into Myanmar and disseminate it within the national society. The disaster management review process is a collective effort of annual programming and Cyclone Nargis operations. MRCS is reviewing the recommendations and will use the upcoming branch representatives meeting, now rescheduled from late May to June, to internally decide on an initial prioritization of activities for the coming year, taking into account the commitment of the high level of Nargis operations. The foreseen disaster management activities will further emphasize the need for and enhancement of the coping capacities of the most vulnerable communities, and take communities and school-level activities as entry points to build safer communities.

A logistics capacity assessment, which focuses on reviewing current warehouse capacities and management and communication systems, was initiated at the start of the year and is expected to provide the picture of 20 of the MRCS warehouses by the end of June. Currently nine assessments have been completed. Initially, support will be made available for repair and maintenance of five warehouses. MRCS recognized the need to review and further strengthen capacity building in logistics from learning stemming from the Nargis response. As such, warehouse upgrading and improved management is one of the priorities of MRCS in order to ensure improved logistics management, including the strategic provision of disaster preparedness stocks to 20 warehouses in the country. Immediate repair work was provided for two warehouses (Kyauk Phyu and Botataung) prior to the rainy season. All 20 warehouses have received basic documents to manage these warehouses during the reporting period. Specifically, MRCS has capacity to stock around 15,000 family disaster preparedness stocks, especially non-food items. Stocks will be mobilized for communities affected by local disasters such as fire, floods, landslides and storms. MRCS anticipates that the current disaster preparedness stocks can be fully utilized during the current monsoon season and are planning to replenish these stocks for 5,000 families towards the end of this year.

The UN Logistics remain interested in capitalizing on MRCS country-wide presence and supporting capacity building. An initiative which had been put on hold due to Nargis in 2008 and is being discussed this year in light of MRCS own logistics assessment.

Furthermore, MRCS will also train a select response team on key Federation tools, with the objective of improving communication use and coordination between headquarters and different states/divisions. Up to 12 CDMA telephones, which have comparatively high coverage, will be installed in high-risk disaster-prone areas for MRCS use during 2009. Two townships in the delta, Maubin and Kyauk, already have a CDMA telephone in place and a total of 35 phones have been procured and distributed to the field through the Nargis response.

Two MRCS staff members have been recruited during this reporting period. This now totals six staff that the Federation supports to boost capacity in MRCS disaster management programming. MRCS is in the process of hiring an additional two. Of the six staff members, the Cyclone Nargis operation covers the cost of five staff and the annual appeal, one.

Work towards completing the MRCS national contingency plan, an activity put on hold during 2008, has been resumed. This area of work may eventually take longer than planned due to the need to engage in government dialogue. Nevertheless, an MRCS workshop is scheduled for July to further discuss and also set out a realistic timeframe for its finalization. MRCS recognizes the contingency plan as a milestone in promoting effective response preparedness which is systematic and effective. Similar to MRCS' national society plan, the UN office for the coordination of humanitarian affairs (OCHA) started to facilitate an interagency standing committee (IASC) country-wide contingency plan at the start of the year. As such, MRCS is engaged in both a national level contingency planning process in addition to that of the IASC country-wide planning process. The Federation disaster management delegate participated in the meetings, together with the MRCS head of the disaster management division as frequently as possible, and has supported the drafting of an International Federation response plan in the area of shelter, in accordance with the Global commitment for emergency convenor role. The plan is now being reviewed with other partner agencies to ensure mainstreaming of issues such as gender and environment. The contingency plan was expected to be 'live' from early May but has encountered several setbacks. The International Federation is currently awaiting a revised time schedule to be outlined by OCHA.

Programme component: Disaster risk reduction

Outcomes/Expected results:

Increased resilience of individuals and communities reducing their vulnerabilities to disasters

Myanmar is not usually considered a disaster-prone country compared to some of its neighbours such as Philippines and Indonesia. Small to medium-scale hazards in the past and now the ravages of Nargis in 2008 have nevertheless highlighted the need for effective response preparedness measures alongside strengthened community-based activities to empower their own disaster risk management. Prior to Cyclone Nargis, MRCS was involved in supporting community-based risk reduction activities, primarily through the community-based disaster risk management (CBDRM) programme. The national society now wishes to review this programme with the intention of assessing how it can be further strengthened, and to scale up for better preparedness and mitigation initiatives at community level.

MRCS and the International Federation disaster management delegate have started to review the community-based disaster risk management (CBDRM) manual, placing increased emphasis on mobilizing communities. Linked to this, the facilitator's handbook is being reviewed and updated.

A total of three CBDRM training-of-trainers sessions and 108 CBDRM multipliers course have been planned by MRCS in 2009. The training sessions will be undertaken together with township Red Cross volunteers who will put their training to use by working with communities to identify their risks and management options in six villages within their township, calling on Federation tools such as vulnerability and capacity assessment (VCA). To date, two training sessions have been completed from which 50 communities (from 14 townships) were reached by the end of May, including South Rakhine state with 65 participants from six townships. Some of the associated costs are being met through the Nargis response to promote learning and ensure that MRCS capacity is increased.

Further capacity building is required around the use of and reporting on VCA work. MRCS will be recruiting a GIS assistant to work on VCA reporting. Mitigation activities have been completed at Khaing Taung village in Labutta township during this reporting period. This mitigation activity will support the reduction of risks for around 40,000 individuals. MRCS has agreed on four posters and one emergency hand book as information, education and

communication (IEC) material, modified for the local Myanmar context, to disseminate awareness on hazards. The IEC materials will be sent for printing shortly, and are planned for distribution at the end of July.

MRCS is part of the disaster risk reduction (DRR) cluster in-country chaired by UNDP. Similarly MRCS is part of DRR Myanmar action plan development committee. That action plan is being developed for the government of Myanmar. The head of the MRCS disaster management division, the CBDRM programme coordinator and the International Federation disaster management delegate attended a regional workshop to develop the Southeast Asia disaster risk reduction framework in May. The regional office will finalize the framework and national societies will be called upon to adapt their DRR programmes as necessary.

An introductory climate change workshop is planned for the end of June for which the International Federation has invited a staff of the climate change centre, based in the Netherlands. MRCS will use this workshop to orient senior leadership and management on climate change adaptation and the possible opportunities for MRCS in this role.

Achievements

- Harnessing learning from the Nargis operation, MRCS has identified a state and divisional level mapping of national disaster hazards, including the anticipated scale of those, to feed into a review of its disaster preparedness plan.
- The completion of a comprehensive disaster management review will now enable MRCS to prioritize their activities in the area of response preparedness and community-based disaster risk management programmes.
- The initiation of the logistics assessment and analysis of findings will lead to a plan to reinforce and strengthen MRCS national warehouse capacities.
- Two CBDRM training-of-trainers (ToT) sessions were completed reaching the total number of 65 beneficiaries from Rakhine as well as Ayeyarwady
- MRCS reached 50 communities out of 108 as planned for 2009. Out of 50 communities, 33 communities are situated in Rakhine South and 17 from the Ayeyarwady division. A total 990 people were trained in the Rakhine area on the CBDRM process whereas 510 were trained in the Ayeyarwady division.

Constraints or Challenges

The continued challenge moving forward is to balance the level of activities which MRCS can facilitate outside of the delta. The disaster management division continues to be absorbed in Nargis recovery programmes to a large extent and as such, the emphasis on disaster management country-wide activities in the next months will need to be balanced. Considering such a challenge, MRCS has managed well to undertake planning and slow scale initiation of disaster management activities. MRCS will review the selection criteria of training participants to promote a good involvement of active state and township volunteers and community members, placing emphasis on continued activities following training-of-trainers sessions to build safer communities. This will require increased MRCS collaboration between divisions and revisiting data systems as well as encouraging follow-up monitoring after training has been conducted.

The disaster management delegate, recruited in October 2008, was able to rejoin the country office in mid-January following one month working at the Southeast Asia regional office in Bangkok, while awaiting visa clearance.

Health and care

Programme Objective

Through the motivation, support and mobilization of its nationwide network of volunteers the Myanmar Red Cross Society promotes a healthier and safer environment for people of Myanmar giving priority to the most vulnerable communities and individuals. The capacity is increased through scaling up first aid, health/hygiene promotion (proactive health), psychosocial support, and water and sanitation activities

Programme components in MRCS

Health and care activities remain a large component of MRCS to promote and improve conditions for vulnerable communities. The MRCS health team is now working under three main programmes, namely:

- Public health in emergencies,
- Community-based health promotion
- First aid and safety

Moving from a project to programmatic approach

Findings from the health forum in Myanmar held in the third quarter of 2007, coupled with a review of MRCS's community-based first aid (CBFA) activities, completed in December 2008, demonstrated that the CBFA activities in MRCS reach communities significantly and that they are aware of the importance of first aid in their communities. However the MRCS recognizes that further monitoring and development of their CBFA activities are required to measure and increase the longer term impact of such first aid training efforts.

Therefore, the national society established a technical working group in March for community-based health and first aid in action (CBHFA). The national society also sent two participants to the master training for CBHFA that was organized by the International Federation regional health team in April 2009.

This technical working group has been conducting monthly meetings to initiate a broader and more comprehensive approach to injury and disease prevention and health promotion by applying the concepts of CBHFA in action. This process will support MRCS to tackle its commitment towards a programmatic approach through reviewing current approaches in the field of community-based health and looking at a standardized approach to the production of and use of materials

Programme component: Public health in emergencies (PHiE)

Outcomes/Expected results:

- Red Cross staff and volunteers have the capacity to respond to potential epidemics in five states and divisions prone to natural disaster (Yangon, Ayeyarwady, Rakhine, Tanintharyi and Mon)
- Additional inclusion: The MRCS is an effective member of the government of Myanmar's national plan for response to the threat of a human influenza pandemic
- High risk groups³ are knowledgeable about the avian influenza virus and its symptoms, and can take measures to prevent the spread from poultry to humans, in targeted townships in three states and divisions (Magway, Yangon and Ayeyarwady)⁴

Achievements

A new deputy head of health has been appointed as the focal person on public health in emergencies to supervise the activities together with the new programme field officer (PFO).

- The deputy head of health has been brought directly into MRCS public health preparedness planning with the ongoing plan for human influenza pandemic. MRCS has had prior experience through its work on planning for the human avian influenza (HAI) and has been able to adapt this as necessary. Through the present planning for the H1N1 influenza, MRCS has clarified that any preparedness and response role would be restricted to hygiene promotion and awareness raising activities. As apart of its preparatory role, awareness training on human influenza has been organized in the Yangon division in June with another training for Mandalay division in June as well. Additional states/divisions will also be included in training in July. In addition, a small supply of personal protection equipment (PPE) has been located in two warehouses in May (one in Upper Myanmar and one in Lower Myanmar) as part of the preparedness for human influenza.
- The programme field officer has been collecting together all existing training, and information, education and communication (IEC) materials relating to public health in emergencies in order to assess these documents in view of developing a training manual, toolkits and IEC materials that can be used for future training sessions. The materials collected so far are sourced from International Federation⁵, the ministry of health, UN organizations and various non-governmental organizations working in public health in emergencies.

The programme field officer ran a trial on some of these materials when he worked jointly with the training department who were conducting a community-based first aid training of trainers for 36 participants from six townships from Rakhine state. He also joined a community-based disaster management training also in

³ Refers to backyard poultry farmers and wet market/poultry store holders)

⁴ The MRCS has originally planned to conduct avian influenza (AI) awareness training sessions in six states/divisions; however, owing to the late appointment of a programme field officer and the current heightened threat of a human influenza pandemic, the national society has decided to target only avian influenza awareness where they are currently conducting community-based health programmes (i.e. Magway and the Nargis-affected states of Ayeyarwady and Yangon)

⁵ CBFA in Action and Epidemic Control Manual for Volunteers

Rakhine reaching a further 32 participants. Topics covered were malaria, dengue, diarrhoea prevention and human influenza including H5N1 (avian influenza) and H1N1 (swine influenza).

- MRCS in collaboration with the Mentor Initiative, an Italian non-governmental organization, conducted a two-day training session in Yangon on 23-24 January. The training was for health officers and Red Cross volunteers from the nine Red Cross hubs and township branch offices that were affected by the Nargis Cyclone. The programme field officer for public health in emergencies participated in this training along with the health coordinator for MRCS. This training was followed up in February for several more Red Cross volunteers in each of the nine townships. The programme field officer was one of the co-facilitators in two of the townships.
- In February, one of the deputy heads of health attended the '*Strengthening Community-based Management of AHI*' in Yogyakarta, Indonesia. The visit focused on the school-based project for introducing change in bio-security practices for community backyard farmers and their families. The MRCS can see a benefit to introducing a similar activity in Myanmar, namely educating teachers on avian influenza prevention who can then go on to teach children who take these messages home to their parents. The MRCS is exploring the opportunity to integrate this into their existing Red Cross school curriculum

Programme component: Community-based health

Outcomes/Expected results

- The health status of people living in selected townships is improved and their susceptibility to communicable diseases is permanently reduced
- Improved referral and access to health care services for common diseases and priority health concerns.

Magway community-based health project

Up to 160 health education sessions have been carried out by project staff and village tract health committees in target villages (19 villages and one ward) from respective townships. These communities welcome such health talks and find them interesting and useful in improving their health knowledge. The project staff have also been collecting detailed information of each household in the target villages as part of the preparation for the distribution of 2,700 long-lasting impregnated mosquito nets and 3,000 latrine pans and pipes which will be distributed in June.

The Finnish Red Cross has committed to continuing funding to this project for a further three years, as such the planning and log frame were revised. In May, the project staff visited Yangon to discuss and agree on the newly revised logframe and also received booster training in latrine construction and household water quality testing in Yangon. This training will be followed up by "on the job demonstrations" of latrine construction in Megway. The staff are now in the process of developing their work plans for the rest of the year which will include assisting the community-based volunteers to plan their monthly activities such as participating in health talks and discussions, monitoring of latrine construction and latrine use, and participating in the mosquito net distribution and monitoring of use of these nets. Other project staff activities will include assisting the communities to develop village health committees and helping them to organize their community action plans⁶.

Keng Tung community-based health project

During this reporting period, 108 peer educators provided HIV information to taxi drivers, construction workers, labourers and community members. Up to 20 PLHIV were also provided food packs and some were referred for VCCT⁷ for HIV.

A water storage tank was constructed in Upper Pan Kha village and there are plans to construct another tank in Lower Pan Kha village in May/June. Both these water tanks are fed by a gravity system. Each of the villages have pledged to contribute to the cost of these new water systems; Upper Pan Kha village has already provided 40 per cent of the total cost with Lower Pan Kha village planning to commit at least 10 per cent of the cost.

The project staff also provided first aid training to 30 motorcycle-taxi drivers. This project will end in June 2009, following six years of investment and partnership from Australian Red Cross. The head of the health division will visit the project site in June to ensure that all agreed plans for the closing of the project have been facilitated.

⁶ Includes clean up activities, reducing vector breeding sites, establishing refuse sites and disposal, participating in identifying beneficiaries to receive mosquito nets and latrine pans & pipes, identifying which health topics to be discussed, organizing referral systems, etc.

⁷ Voluntary Confidential Counselling and Testing

Programme component: Voluntary blood donation

Outcomes/Expected results:

- Increased numbers of regular voluntary non-remunerated blood donors.

The national blood bank and the MRCS blood donor recruitment working group have met twice this year during which it was reported that 800 new blood donors have been recruited by Red Cross volunteers in Yangon, Mandalay, Kachin, Moenyo, Maulamyaing and Shwe Bo. To acknowledge regular blood donors,⁸ certificates of honour signed by the national society's president were presented to them along with donor pins and badges.

A blood donor recruitment review meeting was organized in April and attended by 30 participants from the national headquarters and branches, the national blood centre and regional hospital representatives. The review was supported and facilitated by a representative from Singapore Red Cross and the objective was to promote improved coordination and collaboration between the MRCS and the department of health, and to share experiences within and outside Yangon areas in order to strengthen the link between Red Cross donor recruiters and the national blood centres with the aim of increasing the number of regular blood donors.

The main outcomes from the meeting included the need to determine the audience to be reached⁹, improve the current donor data base, identify key audiences to be target to recruit donors, and develop improved mechanisms for supporting and monitoring of trained Red Cross recruiters. The participants are now expected to develop a plan of action in their respective regions for submission to the township blood donor working group; this will be followed by a joint meeting to agree on work plans, and develop monitoring and review plans.

In June, the MRCS will conduct a training of 30 recruiters in Kachin State. This will coincide with International Blood Donor Day

Programme component: Tuberculosis (TB)

Outcomes/Expected results:

- Improved MRCS capacity to address TB-related care and support leads to increased community awareness about TB.

The community-based TB project is focused on training and supporting Red Cross volunteers to conduct health talks to inform people about TB and explain the importance of completing effective TB treatment. Out of 250 volunteers trained since 2005, 136 are still actively in service. These trained volunteers provide psychosocial support, health talks and TB home care kits (which include hygiene items, cereal, and multivitamins) to clients and their families. The Red Cross volunteers also provide support to several clients with TB in the form of directly observed treatment short-course (DOTS).



MRCS volunteers provide a care package to TB patients as part of the community-based care programme in Yangon division.

During this reporting period,¹⁰ 1,131 people were actively detected for diagnosis and treatment of which 1,039 tested positive and are now receiving treatment from the national TB centre and home visit support from the Red Cross volunteers. The national TB centre asked MRCS to follow up on 12 defaulters; these were traced and referred to health facilities. All of these have now resumed their medication and are receiving continued support from the Red Cross volunteers. This year, to date, the national TB centre and the Red Cross has discharged 513 people from their care and support programme as they have all successfully completed their treatment and made a full recovery. However, 15 people have died as a direct result from their illness but all these underwent severe complications or had other underlying medical conditions. Myanmar is attaining a treatment success/cure rate of 85 per cent which is an internationally agreed target.

As well as the direct support that the Red Cross volunteers has given TB clients and their families, they also provide health information on TB to communities, often taking advantage of occasions such as national immunization days and school health education sessions. To date, they have reached a total of 16,220. In

⁸ A regular blood donor is someone who donates at least two units per year

⁹ The number of units needed each month

¹⁰ January to April only as figures for May not yet available

addition, during the ceremonies on World TB day held in project townships, 55 TB home care kits were donated to Aung San TB hospital¹¹ and 177 kits donated to TB patients.

The deputy head of health attended the Global technical working group (TWG) for TB meeting in Beijing, China where standard TB indicators were presented; MRCS will now adopt these agreed TB indicators.

Programme component: Malaria

Outcomes/Expected results:

- Improved attitude and behaviour concerning malaria through the adoption of preventative measures with 100 per cent (revised to 80 per cent through planning) utilization of insecticide-treated nets (ITNs) in targeted households¹².

The malaria prevention programme continues in nine townships from nine states and divisions that the ministry of health reports to have high incidence of malaria. The project aims to provide long-lasting mosquito nets to all households in the target villages with the aim of reducing the number of circulating anopheles mosquitoes.

Up to 560 community-based Red Cross volunteers who have been trained in malaria prevention and the use and care of mosquito nets have been conducting talks and small group discussion on malaria in the villages reaching a total of 15,000 households. To date, 5,000 long-lasting impregnated nets (LLIN) have been distributed to the selected households with children under five. The project is planning to conduct a booster training on malaria followed by a distribution of a further 11,200 of these nets in June.

Monitoring trips conducted by the MRCS project field officer (PFO) to Mongset (Shan E), Htantalan (Chin), Minbu (Magway) and Thibaw (Northern Shan) have been conducted. The officer has had meetings with some of the households that received nets who report that they now have a greater understanding of malaria and truly appreciate having received mosquito nets as they realize the importance of these nets in preventing malaria. The officer also reports that the other households in the target communities are looking forward to receiving their nets in June. The township malaria prevention committee have also conducted regular monitoring trips and are highly appreciative of the interventions provided by the MRCS

Programme component: HIV/AIDS

Outcomes/Expected results:

- Improve knowledge, attitude and practice concerning HIV infection amongst key population groups (youth and mobile populations)
- Improved access to effective care and support for people living with HIV (PLHIV) and their families.
- Reduced stigma and discrimination associated with HIV
- Strengthened capacity of the community and Red Cross volunteers to deliver an effective HIV programme

Community-based HIV/AIDS prevention, care and support project

This project covers three townships in the Mandalay division (Aung Myay Thazan, Mahar Aung Myay and Pyi Gyi Tagon) and also Lashio township in Lashio, Northern Shan State. The project focuses on three specific target groups – youth aged between 14 and 25, truck and bus drivers and their associates, and people living with HIV (PLHIV) and their families. The MRCS works in co-ordination with national AIDS programme (NAP).

During this reporting period, the following activities took place:

Outreach programme on 'HIV/AIDS prevention on highway bus/truck drivers and assistants project'

As many as 252 health education (HE) sessions were conducted and 2,589 people were reached during these sessions. Up to 11,710 condoms and 3,026 health information and IEC materials such as posters and pamphlets (3,730), caps (1,280) and other items with short messages, such as key rings (52), pens (41), and money belts (47) were distributed to people during the HIV sessions at the bus and truck terminals.

A total of 35 selected people were referred for voluntary confidential counseling and testing (VCCT) services.

¹¹ Aung San TB hospital admits patients with either multi-resistant TB or those with underlying medical conditions or those with severe complications of TB

¹² The project covers nine townships from nine states and divisions that the ministry of health reports to have high incidence of malaria

Prevention, care and support project

During May and June, 30 youth from each of the three townships receive “life skills training” bringing the total trained since 2007 to 450. Of the 360 youth trained during the last two years, 215 are now life members of which 98 Red Cross volunteers regularly conduct informal talks and discussions about HIV with their friends and relatives. Of these 98 volunteers, 45 have also been trained in home-based care (in 2008). These volunteers (15 in each township) visit the homes of PLHIV (people living with HIV and AIDS) weekly to provide health information and training as well as offering support and friendship.

A total of 83 PLHIV received nutritional and medical support while ten families of people who had died of AIDS-related illnesses received assistance for funeral costs, in addition, 12 PLHIV with opportunistic infection were provided with assistance to visit their health centre for diagnosis and appropriate treatment.

The regional HIV coordinator visited Myanmar from 31 March to 4 April to facilitate an HIV review meeting and make a field trip to the truckers’ project site in the Mandalay division. Following the meeting, the recommendations for improved implementation of MRCS in the Red Cross Global Alliance on HIV included:

- Forming a steering committee for Global Alliance on HIV to include all partners and donors, as recommended in the Global Alliance on HIV Programme document
- Translating all Global Alliance programme documents and formats to ensure staff are familiar with them
- Appointing a HIV programme manager position to be co-funded by partners.
- Strengthening reporting and monitoring formats and systems
- Exploring standardization of reporting and monitoring formats by first collecting and analyzing the existing formats to see what can be consolidated.
- Looking at ways to harmonize the HIV project area to have a more programmatic approach with common reporting and monitoring tools

Refresher training was done for 36 Red Cross volunteers who worked in HIV prevention.

Programme component: First aid, community-based first aid (CBFA)

Outcomes/Expected results:

- MRCS first aid programme guidelines and policy are updated and implemented in branches.
- All Red Cross state and divisional levels are prepared to implement a first aid and community-based first aid (CBFA) programme by December 2010

Achievements

- The training unit conducted a 14-day first aid instructors’ course in March for 31 school teachers from seven townships in Kayah state and also a community-based first aid (CBFA) and safety training-of-trainers course for six townships in Rakhine (totalling 36 participants including teachers, Red Cross volunteers and health assistants from the ministry of health). Additionally, one multiplier training for CBFA in Shan state and 33 multiplier trainings for basic first aid for high school children in Chin State were conducted resulting in a total of 30 community members receiving CBFA training and 990 school children trained in basic first aid.
- The training unit also conducted a commercial first aid course for other non-governmental organization staff, business company staff, national and international airline staff totalling 1,122 participants¹³.
- In an effort to strengthen the capacity of the various Red Cross branches in the target states and divisions, the national headquarters now sends only two trainers, instead of four, to conduct joint training sessions with branch Red Cross volunteers previously trained as trainers, thus facilitating a process of building training skills of at branch level by on the job coaching and learning by doing.

The honorary secretary, head of the health division and the Federation health coordinator attended the Southeast Asian regional health meeting in Bangkok in mid-March. Major focus in this meeting was given to discussing how standalone projects can be integrated into a wider programme approach and included promoting increased coordination between different sector divisions (disaster management, health, organizational development, etc). This is very much in line with the MRCS strategic plan

Constraints or Challenges

- Delays in working advances getting to project sites from the MRCS national headquarters often delay activities being conducted and work plans being achieved. Discussions are underway between the

¹³ This activity is not funded by International Federation

International Federation and MRCS with regard to providing further training and support to assist various project staff to improve their financial management skills

- Limited time for the MRCS senior management to provide focused attention towards developing projects funded by the annual appeal as the demand from the Cyclone Nargis recovery activities is still high.
- There is a need to improve some of the reporting and monitoring skills and formats in order to capture more detailed information and to ensure that “double counting” is avoided. Revision of some of these formats is now happening and it is anticipated that this will also help the programme field officer and township coordinators improve their ability to support their volunteers including helping them to develop work plans.

Organizational development

Programme component

Outcomes/Expected results:

A well structured and better organized MRCS with more competent human resources at all levels for delivering community-based services efficiently and effectively to meet the needs of the most vulnerable in Myanmar.

The organizational development plans for 2009 was reviewed taking into consideration national society priorities in the ongoing Nargis Cyclone operations and based on findings and recommendations of the branch development programme review. While the overall objective and agreed expected results will continue in the same direction, revisions to plans reflect changes in the originally planned activities and some changes within overall approaches.

The cyclone operation has provided an opportunity for the national society to review and determine how organizational development and capacity building can be further strengthened.

Since May 2008, post-cyclone, most of organizational development work had been directed towards supporting the Nargis operations set up and scale-up plans, including the design and development of the hub structures, organizing recruitment of human resources and their induction, volunteer issues during the operations and developing financial guidelines for the hubs. The focus was partly regained in late 2008, however, paving the way for renewed discussion on agreed areas for development.

During early 2009, the MRCS and Federation organizational development (OD) teams jointly met to discuss the MRCS organizational development appeal plan for 2009. The aim was to identify some of the key organizational development priorities for MRCS in 2009, keeping in mind the large Nargis operations, organizational development experiences from the past and continued national society priorities in branch development. During these discussions, strengthening the MRCS headquarters and selected branches through capacity building support, updating MRCS legal base, improving MRCS financial management and reporting, and strengthening MRCS youth and volunteer programmes were identified as key continuing organizational development priorities for the upcoming years.

Revisions to the plan also take into consideration the eventual move of MRCS headquarters office to the capital of Myanmar in Nay Pi Taw. While it is still not clear how much this shift of office will affect programme implementation, the possibility that implementation could be slowed down and day-to-day contact and discussions with counterparts could be challenging, is being taken into consideration.

Promoting gender equity and diversity

During 2009 and beyond, MRCS will be supported in addressing issues related to gender equity and diversity. This will be addressed through leadership and volunteer forums and through branch development programmes. MRCS generally maintains a good gender balance and diversity among staff, volunteers and beneficiaries. In the coming years, MRCS will be encouraged to expand this to key decision-making positions as well at the governance and management levels. MRCS leadership is already aware of this and will be supported in addressing this while pursuing revision of the MRCS statutes. MRCS will also be supported in implementing recommendations from the various reviews and evaluations conducted in the past, and this will be a key issue to be addressed in all future training, monitoring visits, reviews and recommendations in the coming years.

Expected Result (1): *MRCS's branches' capacity strengthened to take a leadership role in implementing activities addressing the humanitarian needs of vulnerable communities*

In order to strengthen MRCS branch development programme which was initiated in 2005, a review of the programme was conducted from late-2008 and completed by February 2009. The review was conducted by a national consultant and reviewed pilot townships where the branch development programmes were initiated. The review outlined a number of recommendations of which a key recommendation is to strengthen the inter-divisional coordination at the headquarters which, in turn, should result in a more coherent approach to supporting branches, to strengthening advocacy and dissemination, develop a management information system and strengthen the monitoring, evaluation support to branches. The review recommendations will guide future support to the MRCS branch development plan. As a result, in 2009, MRCS will be supported in identifying and selecting township branches for support, and where health and disaster management programmes are ongoing. Provisions will be made in the revised 2009 budget, for the completion of branch building construction in Zeegone township which has remained suspended since 2008. No further branch constructions are planned in 2009.

An exercise to assess capacities of branches in the 13 Nargis-affected townships was initiated in March and will enhance the branch development plan. The assessment used a questionnaire methodology led by the volunteer representatives in the 13 townships and the outcome of this exercise together with the Nargis transitional plan will also feed into 2010-2011 appeal plans.

One field visit was planned by the organizational development delegate and MRCS organizational development unit in early April to review supported youth programmes but did not materialize as travel permits were not received. Another visit was conducted in Chin state, which has been identified as a priority state for branch development.

Expected Result 2: *Strengthen MRCS legal base and headquarters capacity to assist branches in delivering community-based services efficiently and effectively to meet the needs of the most vulnerable in Myanmar*

MRCS reconfirmed its commitment to reviewing and updating its statutes during the partnership meeting held in February 2009. For this, MRCS is being encouraged to seek support from the International Federation and ICRC in the revision process. The process for review of MRCS legal was initiated in 2007 with the support of the Kuala Lumpur zone office and ICRC. The review committee was also advised to plan committee meetings to review the draft against the minimum requirements laid down in the 'guidance on national society statutes'. Two internal MRCS committee meeting were supported in March to discuss and develop an action plan. MRCS aims to have updated statutes by 2010.

Reviewing the MRCS strategic plan and identifying MRCS strategic directions for the coming years is another priority and work towards this will be initiated later in 2009. In addition, strengthening MRCS headquarters staff structure and capacity to monitor, coordinate and support branch activities will be a continuing priority. The organizational development support to MRCS will have linkages to 'Lessons learnt from Nargis' and issues identified in the transitional planning process for Nargis hubs which has been since January, 2009, led by the MRCS chief coordinator and the Federation programme coordinator to promote an integrated approach.

Support for MRCS strengthened human resource management picked up some momentum through the support of the International Federation human resource delegate and is complementary to key recommendations from a human resource (HR) review carried out in the third quarter of 2008. Work has been undertaken to help MRCS outline a plan to develop its HR management policies, systems and procedures to enable MRCS to manage and develop its staff. Guidance has been provided and a draft HR development plan is now being discussed internally in MRCS and will be supported subject to approval by governance and management. MRCS recruited a human resource officer, working within the organizational development unit, which has already made steady headway in initiating a review of the current HR systems and procedures in place. MRCS has some systems already in place, such as a staff database system which requires some updating as well as maintaining it to accommodate sudden increases of staff, such as the past year. A review and analysis has been undertaken of the JDs within MRCS, the funding sources, salary scales and relevance to job titles and responsibilities. MRCS have emphasised the need for a long-term sustainable policy in relation to remuneration and benefits to staff. Based on the survey of current salaries and job grades, the development plan includes a commitment to develop a standard fixed salary scale for MRCS's own staff and staff funded by donors. Again, this is a long term commitment to review salary scales which will be grounded by how MRCS discusses a standard approach (using the HR scale) with partners to provide equal conditions to all staff in line with staff regulations and

additionally, how MRCS will eventually source core funding to cover positions on a country-wide basis. MRCS is in the process of reviewing and adapting the code of conduct, which has received feedback from both the HR delegate and zone HR coordinator in Kuala Lumpur. The International Federation has conducted an induction course for all newly recruited staff in both English and Myanmar language, which included the ICRC and a dedicated session to the code of conduct.

MRCS organizational development colleagues have also sought support for training and exposure visits on organizational development issues. The regional office in Bangkok and the zone office have been contacted for assistance in this.

Expected Result 3: *MRCS's volunteer management strengthened and youth participation as beneficiaries, as service providers, and as partners in management of MRCS activities is increased*

Volunteer insurance coverage for 6,715 MRCS volunteers (515 in the 13 Nargis-affected townships), initiated with the support of Geneva volunteering unit for a national coverage, including the Nargis-affected area, has been a key achievement for the MRCS during the first quarter. In order to strengthen and support the management of MRCS volunteers and volunteer insurance, development of a volunteer database has also been initiated which will move the MRCS from manual record-keeping. MRCS will introduce and trial the database initially within the delta, through the hubs, during May and June.

Strengthening school and university Red Cross societies has been the other major activity. Four institutes in Myitgina in Kachin state, one university in Mon state, and eleven institutes including universities in Ayeerwady division, were supported with Red Cross advocacy and dissemination programmes. The branches also used such opportunities to promote health talks, voluntary blood donor motivation and organization of blood donation camps. Universities and Institutes were also supported with standard first aid boxes, Red Cross Red Crescent Movement diary, identification cards, and waistcoats for youth volunteers.

Two Red Cross youths were supported to participate in the Asia-Pacific volunteer and youth camp held in Malaysia and two youth representatives have been registered to participate in the World Youth camp at Solferino, covered by German Red Cross.

In the next months, orientation courses including dissemination on the Fundamental Principles and humanitarian values of the Movement will be standardized for primary, middle and university Red Cross societies and the development of a standard training curriculum for university Red Cross youth leaders and leadership development among university Red Cross youth.

Expected Result 4: *MRCS financial management and resources will be strengthened to promote self-reliance and sustainability*

Staff numbers in the MRCS finance division have increased with the recruitment of one deputy head of division and two finance officers to meet the additional requirements in the Nargis operation. A project cell for the operations is taking shape. However the overall finance division structure and financial systems need to be further strengthened to meet the needs of MRCS throughout the country. In January, an accounting instruction manual for hub offices has been developed to assist the finance officers in accounts management. This is a useful manual which can be replicated at the MRCS branches as well. MRCS had earlier also developed financial guidelines for the hubs with the support from the regional finance delegate. Computerization of hub accounts is being planned and appropriate service providers are being identified.

A study tour to Indonesia for the MRCS finance director and treasurer was facilitated with the support of the Indonesia country office, regional finance development delegate and country office finance delegate. The visit aims to assist MRCS finance colleagues to understand better how other national societies have managed financial requirements and management within large scale response operations. The head of the finance division has been invited to attend the Southeast Asia finance directors meeting in Bangkok at the end of June.

It is expected that most finance development work in 2009 will continue to focus on the Nargis operations, since most of the finances under Nargis plan are agreed to be implemented 'through' the MRCS financial systems which requires considerable development and support.

Achievements

- Branch review completed and key recommendations will be discussed between headquarters and branches in a representative meeting in late June. The review opens up the need to revisit branch

selection criteria and brings about a renewed opportunity to link further investment and development to integrated service delivery.

- MRCS has conducted a salary survey of all positions, supported by the Movement components and other partners. MRCS has drafted a HR development plan which is ready for further discussion and eventual internal agreement.

Constraints or Challenges

The newly recruited hub technical staff who have been recruited at MRCS to support the operations, require ongoing training and coaching, support and guidance to be able to reduce the workload of the pre-Nargis staff. Issues around efficient and timely financial transactions continue to be a challenge. Finance staff workload remains high due to their involvement in the Nargis operations and sourcing good candidates for vacant positions is challenged due to overall market competitiveness. The regional finance development delegate is available to continue work with the finance division. The issue of reviewing capacity will be discussed with MRCS to identify an appropriate way forward.

Humanitarian values

Outcomes/Expected results

Extend cooperation and coordination for more visibility and greater support for the vulnerable.

The Myanmar Red Cross Society's humanitarian values programme implementation led by MRCS communication division is supported by both the International Federation and ICRC. In 2009, the focus of MRCS communication and humanitarian values has been in the Nargis-affected townships. The regional office in Bangkok has been providing technical support for a media package. During the reporting period, MRCS has also developed partnerships with Danish Red Cross and Australian Red Cross to support its communication plans both in and outside Nargis-affected areas.

Expected Result (1): Develop communication capacity of headquarters and selected branches particularly during emergencies, to deliver timely support to the vulnerable and, maintain a high public profile and positive image for MRCS

During the reporting period, information and communication packages were developed for internal and external audiences. These included an MRCS activity report for 2005-2008 and a *Humanitarian Heroes* exhibition featuring volunteers as part of communications initiatives commemorating the first anniversary of the cyclone as well as relief footage *'Myanmar Red Cross in Action'* which was aired on Myanmar television, and a 'video on recovery'. These packages were also shared with national societies which participated in the Nargis partnership meeting in February 2009.

IP Star terminals have been installed in all the nine operational hubs and local media coverage about the Red Cross Movement is significantly improved as well as the improved communications between headquarters, hubs and the local townships. Capacity of the MRCS communication division has been strengthened with the recruitment of a communication officer and a photographer with support from Danish Red Cross. The Danish national society also supported one week of training on 'communications' for the various divisions at the headquarters.

In addition, daily and monthly internal reports continue to be produced to be submitted to the ministry of health, line ministry of the Myanmar Red Cross. Training of nine hub reporting officers (recruited for the Nargis operation) is an ongoing activity. From November till the present period, three training sessions have been organized.

Expected Result 2: Dissemination of Red Cross principles and values and promotion of Red Cross Fundamental Principles within MRCS as well as externally.

About 2,925 beneficiaries including newly recruited staff, volunteers, factory workers, students, military officers, branch representatives and local authorities benefited from Myanmar Red Cross dissemination programmes through advocacy and dissemination programmes throughout the country during the reporting period.

Approximately 447 families and twelve separated children were reunited through the restoration of family links (RFL) programmes supported by ICRC. In April 2009, recognizing the important role for MRCS in reuniting

separated families, MRCS has entered into a bilateral agreement with the Australian Red Cross for continued support for RFL for the next years.

IEC materials for branches and dissemination handbook with 57 attractive illustrations for primary schools were developed and printed. Insufficient dissemination materials about the Red Cross Movement, and Principles and Values were identified at the local branches during field visits.

A *Nargis News* newsletter, containing updates on recovery programmes comprising livelihoods, health, psychosocial support, and water and sanitation was facilitated for distribution to various partners and stakeholders. A workshop on the emblem was facilitated during May.

Achievements:

Major activities in the reporting period included dissemination about the Red Cross Movement, Principles and Values, developing information and dissemination packages, work on improving internal reports and reporting systems, activating the MRCS website and restoring family links.

Challenges

Capacity at the MRCS headquarters is still limited, considering the quantity of the work to be carried out, despite recruitment of additional staff through PNS support.

Working in partnership

Close coordination between the Federation and the MRCS continues through daily and weekly meetings. Within the Movement, a key number of partner national societies indicated interest in supporting MRCS over a longer term during the Nargis partnership meeting. This included the Austrian Red Cross who have signalled interest in a five- to ten-year relationship with MRCS. MRCS intends to work closely with a number of partners through its establishment of a community-based health and first aid (CBHFA) technical group. This group will work toward promoting a harmonized approach, leading to a strengthened provision of assistance to beneficiaries. In the area of disaster management, a new partnership is developing between the Asian Disaster Preparedness Centre (ADPC) and Save the Children on disaster risk reduction (DRR). MRCS will be a key player on disaster risk reduction but its capacity needs to be further developed. It remains key for MRCS to review its partnership modalities to promote an efficient and coordination approach to programming. As MRCS has a number of emerging partnerships through its work in the delta, this will be a challenging and lengthy area of work which will most likely only compete with current demands later in the year. This will also enable MRCS the opportunity to differentiate between short- and long-term partners. International Federation and bilateral partners are brought together through Movement coordination meetings. The priority remains to promote improved programmatic synergy between all partners.

MRCS continues to be in contact with the ministry of health as their line-ministry, to keep them updated of current activities. As the government ministry staff have started the relocation to the new capital, Nay Pyi Daw, MRCS staff will increasingly spend longer periods of time there in the coming months before an eventual shift of executive committee members and head of division, expected later in the year.

Contributing to longer-term impact

The Nargis operation has provided another opportunity for MRCS to assess its organizational strengths, weaknesses and development plans. The hub implementing structure established for the Nargis operations has facilitated the development various policies and guidelines which could be integrated into the mainstream structures and strengthen overall MRCS organizational structure. These include the human resource regulations, employment contracts and code of conduct, financial guidelines, procurement procedures and guidelines for volunteer support. The roles of the local volunteer leaders, 2 IC and their strengthened relationship with township branches and in township branch development have been positive outcomes.

Overall, the positive image of the MRCS has been greatly enhanced post-Nargis. MRCS, with the support of Federation, has taken this opportunity to document experiences of volunteers in emergency and recovery phases. The activities implemented under the programme, are of great importance to the national society, as there is an important need identified at branch levels for dissemination and advocacy about the Red Cross, Fundamental Principles and Values. The understanding among the public about the Red Cross has changed positively and this has been verified during various field visits, reviews and meetings. The transitional planning process, which evolved out of a joint area of work by the regional organizational development delegate and MRCS late in 2008, is providing an opportunity to jointly assess areas which need to be managed when MRCS

phase out of Nargis activities and also to manage a process to capture and integrate learning within MRCS renewed vision and strategic planning.

Work has continued in the first half of 2009, with the support of the Danish Red Cross, to review and strengthen monitoring activities within the Nargis recovery programme. A monitoring and evaluation (M&E) workshop, with facilitation in Myanmar language, is planned for MRCS staff and volunteers in August. This has been a multi-sectoral commitment and the intention is to capitalize on such learning to promote system improvements for MRCS beyond the recovery programme.

Looking ahead

Regular reviewing progress will be a key priority, moving forward in terms of: MRCS capacity and cross-learning through the Nargis recovery programme, supporting MRCS in key commitments such as the move from project to programme, its membership in the HIV Global Alliance, plans under the reviewed disaster management plan and continued branch development work. To support and complement the latter programmatic developments, MRCS is set to initiate reviews of its strategic plan and legal base towards the end of the year. One year on from Nargis, much work has been achieved and renewed opportunities presented - the year ahead remains a fundamental one in supporting MRCS to become a stronger national society.

How we work	
<p>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".</p>	<p>Global Agenda Goals:</p> <ul style="list-style-type: none"> • 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	
<p>For further information specifically related to this report, please contact:</p> <ul style="list-style-type: none"> • Myanmar Red Cross Society: Dr Tha Hla Shwe, President, e-mail: mracs-pres@redcross.org.mm, phone: +951 383 681, fax: +951 383 685. • Federation country office, Myanmar: Bernd Schell, head of country office, e-mail: ifrcmm01@redcross.org.mm, phone and fax: +951 383 686 383 682. • Federation Southeast Asia regional office, Bangkok: phone: +66 2 661 8201, fax: +66 2 661 9322 <ul style="list-style-type: none"> ○ Alan Bradbury, head of regional office, email: alan.bradbury@ifrc.org, ○ Andy McElroy, programme coordinator, email: andy.mcelroy@ifrc.org • Federation Asia Pacific zone office, Kuala Lumpur: <ul style="list-style-type: none"> ○ Jagan Chapagain, deputy head of zone, email: jagan.chapagain@ifrc.org, phone: +6 03 9207 5700, fax: +6 03 2161 0670 ○ Penny Elghady, resource mobilization and PMER coordinator, email: penny.elghady@ifrc.org; phone: +603 9207 5775; fax: +603 2161 0670 <p>Please send all pledges for funding to zonerm.asiapacific@ifrc.org.</p> 	

[<financial report below; click to return to title page>](#)

International Federation of Red Cross and Red Crescent Societies

MAAMM002 - Myanmar

Mid-year report 2009

Selected Parameters	
Reporting Timeframe	2009/1-2009/6
Budget Timeframe	2009/1-2009/12
Appeal	MAAMM002
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	305,697	783,481	507,271	15,408	88,516	1,700,374
B. Opening Balance	221,443	479,129	335,737	10,906	5,663	1,052,878
Income						
<u>Cash contributions</u>						
Australian Red Cross		25,253				25,253
Australian Red Cross (from Australian Government)		0				0
Austrian Red Cross		323,000				323,000
British Red Cross			0			0
Finnish Red Cross		6,542				6,542
Finnish Red Cross (from Finnish Government)		37,071				37,071
French Red Cross	50,382					50,382
Germany Red Cross				0		0
Irish Red Cross		-0				-0
Japanese Red Cross		88,329				88,329
New Zealand Red Cross	49,900					49,900
Other			31,309			31,309
Sweden Red Cross			0			0
Sweden Red Cross (from Swedish Government)		0	0			0
C1. Cash contributions	100,282	480,196	31,309	0		611,788
<u>Outstanding pledges (Revalued)</u>						
Australian Red Cross		7,578				7,578
Finnish Red Cross		-1,219				-1,219
Finnish Red Cross (from Finnish Government)		27,518				27,518
Other			98,451			98,451
C2. Outstanding pledges (Revalued)		33,876	98,451			132,327
<u>Inkind Personnel</u>						
British Red Cross		17,600	37,200			54,800
Germany Red Cross					41,933	41,933
C4. Inkind Personnel		17,600	37,200		41,933	96,733
<u>Other Income</u>						
Services					10,392	10,392
C5. Other Income					10,392	10,392
C. Total Income = SUM(C1..C5)	100,282	531,672	166,960	0	52,325	851,240
D. Total Funding = B + C	321,725	1,010,802	502,697	10,906	57,988	1,904,118
Appeal Coverage	105%	129%	99%	71%	66%	112%

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	221,443	479,129	335,737	10,906	5,663	1,052,878
C. Income	100,282	531,672	166,960	0	52,325	851,240
E. Expenditure	-93,793	-326,858	-185,845	-4,844	-57,151	-668,492
F. Closing Balance = (B + C + E)	227,932	683,943	316,852	6,062	836	1,235,625

International Federation of Red Cross and Red Crescent Societies

MAAMM002 - Myanmar

Mid-year report 2009

Selected Parameters	
Reporting Timeframe	2009/1-2009/6
Budget Timeframe	2009/1-2009/12
Appeal	MAAMM002
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination		
A		B					A - B	
BUDGET (C)		305,697	783,481	507,271	15,408	88,516	1,700,374	
Supplies								
Construction Materials	14,392							14,392
Clothing & textiles	6,000		50,275				50,275	-44,275
Food	5,103		2,727				2,727	2,376
Water & Sanitation	62,313		6				6	62,307
Medical & First Aid	25,620		1,438	2,883			4,321	21,299
Teaching Materials	37,859							37,859
Other Supplies & Services	39,351		979				979	38,372
Total Supplies	190,637		55,424	2,883			58,307	132,330
Land, vehicles & equipment								
Land & Buildings		4,089					4,089	-4,089
Vehicles	7,030							7,030
Computers & Telecom	21,664		17				17	21,647
Office/Household Furniture & Equipm.	6,258	1,093	100			616	1,809	4,448
Others Machinery & Equipment		321	205	90		-616	-0	0
Total Land, vehicles & equipment	34,952	5,503	323	90		0	5,915	29,036
Transport & Storage								
Storage	49,650		7				7	49,644
Distribution & Monitoring	54,001	51,045	4,541				55,586	-1,585
Transport & Vehicle Costs	10,644		1,201	1,077			2,278	8,366
Total Transport & Storage	114,295	51,045	5,749	1,077			57,871	56,424
Personnel								
International Staff	465,053	4,868	39,153	120,611	28	50,358	215,017	250,036
National Staff	33,637	473	995	2,884	14	3,980	8,346	25,291
National Society Staff	214,347	5,045	57,896	17,711	2,413		83,065	131,282
Consultants	19,497	1,117	2,060	2,219			5,396	14,102
Total Personnel	732,535	11,502	100,104	143,425	2,454	54,338	311,823	420,711
Workshops & Training								
Workshops & Training	363,265	11,966	67,497	16,963	6,074	300	102,801	260,465
Total Workshops & Training	363,265	11,966	67,497	16,963	6,074	300	102,801	260,465
General Expenditure								
Travel	60,657	3,820	8,316	5,295		953	18,385	42,272
Information & Public Relation	69,011	930	16,292	5,644	2,716		25,582	43,429
Office Costs	29,064	13	3,420	55	233		3,721	25,343
Communications	183		153	5		645	803	-620
Professional Fees	2,991							2,991
Financial Charges	61		4,338	3		3	4,344	-4,283
Other General Expenses		22	41	24	0	-76	10	-10
Total General Expenditure	161,968	4,785	32,561	11,026	2,949	1,524	52,845	109,123
Programme Support								
Program Support	102,721	6,097	21,326	9,662	315	989	38,389	64,332
Total Programme Support	102,721	6,097	21,326	9,662	315	989	38,389	64,332
Services								
Services & Recoveries			3,706				3,706	-3,706
Total Services			3,706				3,706	-3,706
Operational Provisions								
Operational Provisions		2,896	40,167	720	-6,948		36,835	-36,835
Total Operational Provisions		2,896	40,167	720	-6,948		36,835	-36,835
TOTAL EXPENDITURE (D)	1,700,374	93,793	326,858	185,845	4,844	57,151	668,492	1,031,881
VARIANCE (C - D)		211,904	456,623	321,426	10,564	31,365	1,031,881	