

Operations update



International Federation
of Red Cross and Red Crescent Societies

Myanmar: Cyclone Nargis

Emergency appeal n° MDRMM002
GLIDE n° TC-2008-000057-MMR
Operations update n° 27
2 March 2010

Period covered by this update: September 2009 to end of January 2010

Appeal target: CHF 73,987,907 million

Appeal coverage: 96%

[<view attached financial report, updated donor response report, or contact details>](#)

Appeal history:

- 8 July 2008: A revised emergency appeal was launched for CHF 73.9 million (USD 72.5 million or EUR 45.9 million) to assist 100,000 households for 36 months.
- 16 May 2008: An emergency appeal was launched for CHF 52,857,809 (USD 50.8 million or EUR 32.7 million) to assist 100,000 households for 36 months.
- 6 May 2008: A preliminary emergency appeal was launched for CHF 6,290,909 (USD 5.9 million or EUR 3.86 million) to assist 30,000 households for six months.
- 5 May 2008: CHF 200,000 (USD 190,000 or EUR 123,000) was allocated from the IFRC's Disaster Relief Emergency Fund (DREF).

Summary:

- The end of the rains in September enabled greater outreach towards vulnerable communities through the shelter and livelihoods projects during this reporting period, thanks to sustained efforts at hub level in these initiatives. Similarly, water, sanitation and hygiene promotion projects continued to reach large numbers of vulnerable households across all targeted townships. The community-based health and first aid programme also made good progress primarily through trained community volunteers and Red Cross volunteers.
- A high level of community participation continues to be an integral factor in the success of field activities.
- The joint technical visit by three partner national societies in November, aimed at a preliminary review of the recovery and accountability framework across the shelter and livelihoods recovery programmes, was conducted successfully. A draft report of the findings has been prepared, and once final revisions are approved, this will be circulated to all partners and will be a topic for discussion during the partnership meeting in Bangkok on 30-31 March 2010.
- An internal audit of the office's Nargis operation was conducted in December, and the final report is under



The fertilizer support project has been found to be a timely and effective intervention for 3,994 farmers affected by Cyclone Nargis. (Photo: Sithu Lin / Myanmar Red Cross Society)

preparation. Initial indications are that procedures are, in general, satisfactory.

- Monitoring and evaluation (M&E) efforts have been strengthened during this reporting period, supported by increased facilitation to MRCS M&E officers through training and sensitization workshops, and active feedback to the field from headquarters and hub office level. This has led to improved reporting and a more focused assessment of needs, both as regards support to the most vulnerable communities, as well as towards project planning and implementation.
- Capacity building within the various programmes continues at field level for hub staff and volunteers, as well as for National Society staff at headquarters level. (*see individual programme sections below for details*)
- Transition planning discussions continue, and this has included the absorption of valuable feedback from hub managers and managers of township volunteer brigades. The organizational development delegate has been working closely with the MRCS executive committee to approve a framework for the transition process, and a paper has been drawn up that will enable more conclusive agreement on the focus, facilities, structure and target, for the hand-over of assets and skills from the Nargis operation to the MRCS, for support to MRCS humanitarian activities in a country-wide context.
- Preparations are underway for important events during the next few months, notably the mid-term review of the three-year cyclone Nargis operation (2008-2011), with an aim to have the findings available for discussion at the MRCS annual partnership meeting scheduled to take place in Bangkok on 30-31 March. Invitations have been sent out. In addition, discussions are underway to identify the theme and focus for the Movement's second year commemoration of the cyclone Nargis in early May.
- Multiple-entry visas were renewed for a period of three months, valid until the end of January, and this has enabled delegates to have good access to the field which in turn, has aided the monitoring and continuity of activities. It is hoped that the next round of renewals, which were applied for in December, will come through soon.
- The current Nargis recovery coordinator has been recruited to fill the programme coordinator position to oversee activities in the annual country appeal. The position of recovery coordinator will not be replaced, since responsibilities are now divided between the programme coordinator and the Nargis head of operations.
- Up to December 2009, a total of CHF 42,051,440 has been spent, out of the total amount of funds received so far (CHF 70,955,724). This expenditure amounts to approximately 59 per cent of funds received¹.

Contributions to the appeal to date

Partners which have made contributions to the appeal to date include: American Red Cross/American government, Andorra Red Cross/Andorran government, Australian Red Cross/Australian government, Austrian Red Cross, Belarusian Red Cross, Belgian Red Cross/Belgian government, British Red Cross/British government, Canadian Red Cross/Canadian government, Hong Kong and Macau branches of the Red Cross Society of China, Cook Islands Red Cross, Cyprus Red Cross/Cyprus government, Danish Red Cross/Danish government, Finnish Red Cross/Finnish government, French Red Cross, German Red Cross/German government, Hellenic Red Cross, Icelandic Red Cross, Indian Red Cross, Irish Red Cross, Italian Red Cross, Japanese Red Cross, Republic of Korea National Red Cross, Kuwait Red Crescent/Kuwait government, Lithuanian Red Cross, Luxembourg Red Cross/Luxembourg government, Malaysian Red Crescent, Monaco Red Cross, Netherlands Red Cross/Netherlands government, New Zealand Red Cross, Norwegian Red Cross/Norwegian government, Philippine National Red Cross, Polish Red Cross, Portuguese Red Cross, Qatar Red Crescent, Singapore Red Cross, Slovak Red Cross/Slovak government, Spanish Red Cross/Spanish government, Sri Lanka Red Cross, Swedish Red Cross/Swedish government, Swiss Red Cross/Swiss government, Taiwan Red Cross Organization, Turkish Red Crescent, United Arab Emirates Red Crescent and Viet Nam Red Cross. Contributions have also been received from the European Commission Humanitarian Aid Directorate General (ECHO), the Italian, Estonian and Slovenian governments, Total Oil Company, Stavros Niarchos Foundation, Tides Foundation, UN Staff Coordinating Council, and a number of other private and corporate donors.

The IFRC, on behalf of the Myanmar Red Cross Society, would like to thank all partners for their very quick and generous response to this appeal.

The situation

Cyclone Nargis struck Myanmar on 2 and 3 May 2008, devastating the Ayeyarwady and Yangon divisions. Collective assessment data from the authorities and international communities indicates that 115 townships were significantly affected by the cyclone. According to official figures, 84,500 people were killed and 53,800 missing.

¹ The CHF 70,955,724 represents 96 per cent of the total budget of CHF 73,987,907. However, budget revisions currently being finalized, show that full funding for coverage of operational activities in the Emergency Appeal has been received.

The UN estimates that 2.4 million people were affected. The Myanmar Red Cross Society (MRCS)/International Federation of Red Cross and Red Crescent Societies' (IFRC) Cyclone Nargis operation targets 100,000 affected households in the 13 townships of Kungyangon, Dedaye, Kyaiklat, Pyapon, Bogale, Maubin, Mawlamyinegyun, Labutta, Ngapudaw, Twantay, Kawhmu, Myaungmya and Wakema.

Coordination and partnerships

MRCS/IFRC coordination

- Good cooperation and coordination continues between the MRCS and IFRC through regular operations management meetings and other daily and weekly meetings.
- The MRCS and the IFRC jointly represent the Movement in the UN/ASEAN² recovery forum, and continue to provide close, collaborative representation and information sharing through a broad range of national and international fora.
- The MRCS president and honorary secretary attended the 17th General Assembly of the IFRC of Red Cross and Red Crescent Societies in Nairobi, Kenya, which took place on 18 - 21 November 2009.

In-country Movement coordination

Regular coordination meetings are also held with the International Committee of the Red Cross (ICRC), and partner national societies present in Myanmar, facilitated by the head of office and the senior management of MRCS. The French Red Cross, which continues to support MRCS activities in Nargis-affected areas, are invited to attend the six-weekly hub managers meetings in Yangon. Joint planning is underway to agree on an agenda for the annual partnership meeting, scheduled to take place in Bangkok on 30-31 March, and invitations have been sent out.

Strong partner national society support

Nargis appeal

The Nargis operation is pleased to report that following revised budgets (these will be presented with the next operations update, and at the partnership meeting in March), funding requirements for the emergency appeal are fully covered, thanks to the continued and generous support of partner national societies and other donors. Budget revisions will reflect the decrease in requirements of funding for international personnel, owing to the reduction in the number of delegates working in Myanmar. The operational focus remains unchanged, though revisions for improved targeting and project implementation will be submitted in revised Plans of Action.

Joint partner national society review

A joint review of the effectiveness of the recovery and accountability frameworks in directing shelter and livelihoods programmes was conducted in Myanmar from 2-13 November 2009. The reviewers comprised of one representative each from British Red Cross, Japanese Red Cross and Netherlands Red Cross, with the IFRC's recovery delegate from the disaster management unit at the Asia Pacific Zone office as team leader.

The group, supported by MRCS and delegation members, was divided into three teams and went on field visits and conducted a broad range of interviews with beneficiaries, local authorities, the MRCS, and other local and international humanitarian agencies in the field and in Yangon. A draft report was produced which includes a series of recommendations that provide feedback, conclusions and suggested actions which can be adopted to enhance the recovery programmes. Following a review of this report by the MRCS, it will be circulated to partners and interested stakeholders.

The review was an outcome of the keen interest expressed by partners during the partnership meeting in February 2009, in contributing towards operations. The recovery and accountability frameworks are two pivotal documents developed during the Nargis operation's transition from emergency relief to early recovery phase. Built on the previous work of the Red Cross Red Crescent Movement, the frameworks aim to guide as well as aspire towards best practices in the recovery process. These documents also established a shared commitment towards achieving a strong degree of community participation and community ownership of the recovery programmes.

Partnership meeting

The next annual partnership meeting is scheduled to be held on 30-31 March this year, in Bangkok. This two-day meeting will have a dual focus – on the Movement response to the Nargis operation (one day), and support to the MRCS in its core activities through the annual country appeal (one day). Partners will be updated on arrangements.

² United Nations/Association of Southeast Asian Nations

Inter-agency coordination

Information exchange and inter-agency coordination continues in Yangon and in the field. Highlights during this reporting period include:

- *Appraisal of the coordination function and performance of the IASC³ country structure and the cluster system*

An appraisal of the coordination function and performance of the IASC country structure and the cluster system for May 2008 -July 2009, was conducted by a team of national and international consultants in this reporting period. The MRCS and IFRC participated in the appraisal. The draft report⁴ was circulated for review and comments by all concerned, including IFRC and the MRCS.

- *Post-Nargis regional partnership conference*

The post-Nargis regional partnership conference, organized by ASEAN⁵, was held in Bangkok on 25 November. This was attended by representatives from the IFRC's regional office in Bangkok, as well as the Myanmar country office and the MRCS. The conference was aimed at filling a critical funding gap of USD 103 million, mainly for livelihoods and shelter programmes under the post-Nargis recovery preparedness plan (PONREPP)⁶.

- *Recovery forum*

The first recovery forum organized by the Tripartite Core Group, was held on 2 October in Yangon. The forum aims to strengthen inclusion and provide space for policy discussions on recovery. IFRC and MRCS were appointed to represent the Red Cross Red Crescent Movement in this forum.

Initiatives outside the Nargis appeal

Information on separate projects between the MRCS and several partner national societies (outside the Nargis appeal but nevertheless relating to Nargis-affected areas), has been incorporated into this report, under relevant programme areas, for the purposes of providing a complete overview of the national society's outreach to affected communities (see below).

Red Cross and Red Crescent action

The operation

Recovery planning

Recovery in general

Good progress has continued in all programme sectors during this reporting period. The end of the rainy season (May to September, as well as some unexpected rain in October which hampered activities across all programmes), has allowed teams to make up for lost time and meet targets.

Regular hub managers meetings, which are now held every six weeks, continue to serve as a key forum for getting updates on the successes and challenges of field activities, analysing methods to address these challenges, receiving community feedback, and engaging in planning of recovery activities. The core representatives from the field at this meeting are the nine hub managers who are the heads of MRCS offices set up in nine townships to complement pre-existing Red Cross township structures, in the implementation of Nargis programme activities. Also in attendance are 2 i-Cs (second-in-command)⁷ who are the managers of the township Red Cross volunteer brigades.

Community participation

The 147 village tract recovery committees⁸, located across all 13 targeted townships, continue to provide important assistance, particularly in the implementation of shelter and livelihoods activities. Assistance includes selecting beneficiaries and carpenters, checking on the quality of building materials for shelter projects and conducting a market and suppliers survey and needs assessment for the next phase of the livelihoods programme.

Whilst there is already an agreement to reduce the number of village tracts covered under the new phase of the recovery operation starting in January 2010, (from a current number of 147 to 92, representing a total of around

³ Inter-Agency Standing Committee coordinated by the UN Office for the Coordination of Humanitarian Affairs (UN OCHA).

⁴ *Cluster Approach Evaluation Phase 2 Country Study (Jan 2010)*

⁵ Association of Southeast Asian Nations

⁶ PONREPP is an initiative of the Tripartite Core Group comprising the Government of the Union of Myanmar, ASEAN and the UN.

⁷ The head (or first-in-command) of the Red Cross Volunteer brigade is the Township Medical Officer (TMO).

⁸ A village tract is the local administrative level below the township, and consists of a varying number of villages.

500 villages), discussions are underway to reduce the number of members in the village tract recovery committees, with an aim to provide a more focused and sustainable platform for community participation – this will aid the Nargis operation's transition and the eventual handover of activities to the MRCS branches.

Beneficiary accountability

A revised accountability framework was shared with the MRCS and presented at the hub managers' meeting in October. This led to follow-up action taken at the hub and headquarters levels to improve accountability at all levels, and the use of notice boards and mailboxes. Hub offices rely on various means of communication like field visits, interviews, mailboxes and phone calls to ensure the free flow of information from beneficiaries and to get their feedback about the programmes being implemented. The complaints/appeals procedures for beneficiaries have also been improved through the establishment of a centralized registration system at the hub and headquarters level (see also *Beneficiary Feedback box in 'Livelihoods' section*).

During this reporting period, 36 letters of requests/complaints were received –mainly related to requests for new cash-for-work, water, sanitation and hygiene promotion, and livelihoods projects, as well as the selection of new beneficiaries for the second phase of the household shelter project. These requests will be taken into account when planning is conducted for the next phases of the programmes.

Monitoring & Evaluation (see also 'Support Services' section)



Shelter technicians have been assisted by Village Tract Recovery Committees in checking on the quality of shelter materials provided by suppliers. (Photo: Kyaw Htay Oo / Myanmar Red Cross Society)

CORE PROGRAMMES

Revisions to core programmes are reflected in updated individual tables which can be found [here](#).



The household shelter project targeted for 8,000 households has been well received by vulnerable communities. A second phase of constructions for 7,000 households is targeted to begin in February. This photograph features a shelter being constructed in Swe Sone village in Labutta township. (Photo: Ye Thaug Htut / IFRC)

The shelter programme is now the largest shelter recovery initiative in the Delta and has seen rapid progress in the four projects during this reporting period, namely the construction of household shelters, Red Cross posts, repairs to damaged community buildings and infrastructure, and the reconstruction of schools and sub-rural health centres. Feedback received from communities via shelter technicians and volunteers, field officers and delegates, is that they are happy to benefit from these structures and are making good use of them.

Progress

1 Household shelter project (for about 8,000 households in 11 townships)

Up to 25 January, about 6,260 shelters were completed across 11 townships. This comprises about 78 per cent of the 8,000 targeted households. Maubin township (where the first shelter was constructed in late June 2009) was the first of the 11 targeted townships to complete all 416 shelters allocated.

The procurement of household shelter materials continues to be undertaken at field level, through hub offices⁹. With the help of shelter technicians, field assistants and volunteers, beneficiaries complete their procurement plans which detail the materials they wish to buy so they can rebuild their own shelters. The technicians, assistants and volunteers are also working with beneficiaries and village tract recovery committees¹⁰ to ensure that all the materials requested are delivered and distributed, and that they are of good quality.

The shelters are constructed by beneficiaries¹¹ with the aid of family or community members, as well as local carpenters. The hub staff follow up with regular monitoring visits during shelter constructions – on these occasions, they help beneficiaries make use of the *build back safer*¹² brochure and the examples of the model shelters.

The feedback received from beneficiaries is that they are happy with the quality of the shelters constructed, as well as the speed of construction – an average-sized construction team comprising a beneficiary and local carpenters, takes approximately four to six days to complete a shelter. The household shelter project is targeted

⁹ New MRCS offices set up in nine townships to complement pre-existing Red Cross township structures in the implementation of Nargis programme activities.

¹⁰ There are 147 committees across all 11 townships. They were established between November 2008 and February 2009 to facilitate community participation in various aspects of recovery programming.

¹¹ In the case of elderly or incapacitated beneficiaries, constructions are carried out by community members and local carpenters.

¹² This brochure was produced jointly by the MRCS, IFRC and UN Habitat, and distributed to beneficiaries earlier this year.

at assisting households which have not yet recovered from Cyclone Nargis and are living in sub-standard shelter or are still living with host families. Other points of satisfaction with beneficiaries is that they have been consulted and engaged with from start to finish, and get to choose the design and size of their shelters, as well as the construction materials. It is also heartening to note that this project is being cited as a successful example by other aid agencies in the field.

The construction of a **second phase** of shelters, targeted for an additional 7,000 households across nine townships, is scheduled to begin in February. Beneficiary selections for this phase will include an increased focus on potentially excluded groups, such as landless, casual workers (though significant numbers of this category have already been assisted by the MRCS in the first phase). Selections in some locations began in December. The majority of the shelters will be concentrated in the most affected areas of the south and southwest of the Ayeyarwady Delta, namely Dedaye, Pyapon, Bogale, Mawlamyinegun and Labutta, as well as the sub-township of Haingyi in Labutta.

As with Phase I, support will continue to be provided to beneficiaries through shelter technicians, field assistants and Red Cross volunteers. More field-based workshops will also be held as a move to continue to improve the project, and beneficiaries will be encouraged to make use of the *build back safer* brochure first distributed during Phase I. An additional six shelter technicians are being recruited to assist in the follow-up to Phase I and implementation of Phase II.

As reported by the Shelter Working Group (UN Habitat), there is still a need for additional shelters, with an estimated figure in excess of 100,000 in the Delta, and this will be taken into consideration in the planning for the rest of the shelter programme for 2010.

Challenges

The household shelter programme is a very large one which requires a high level of organization in the hubs and headquarters. MRCS staff and volunteers continue to work tirelessly to deliver shelter assistance to vulnerable communities.



The Repairs to Damaged Community Buildings and Infrastructure project, is community-driven and has been well received by targeted communities across 11 townships. A second phase is planned for March. This photo features a repaired roof of the entryway to a monastery in Nyaung Wyne Gyi village in Maubin township. (Photo: Myanmar Red Cross Society)

2 Repairs to community buildings and infrastructure damaged by the cyclone

Repairs are now well underway on the assessed and selected 113 structures located across the same 11 townships targeted under the household shelter project. Up to early January, repairs to a total of 33 buildings or infrastructure such as monasteries and community centres in seven townships were completed. Repairs to 38 other structures are ongoing.

The applications for repair are made by individual communities, while hub offices make the assessments and final selections. The structures comprise monasteries mainly, while the remaining few are libraries, schools, community centres, jetties, foot bridges and churches.

Each building selected for repair is allotted a basic package of CGI¹³ sheets and timber. In addition, a small amount of cash for labour and nails, etc. is distributed to communities, and monitoring is carried out by hub staff. While local carpenters are selected to carry out repairs, strong support is also provided by villagers in this community-oriented project. MRCS/IFRC does not provide any technical supervision on this project but provides advice when requested.

As this project has been very well-received by the community and has made a positive impact on their general wellbeing, a second phase of 120 repairs is planned for March this year.

3 Red Cross posts¹⁴

Up to early January, a total of 30 Red Cross posts were completed across 11 townships. An additional seven were under construction. This project comprises an allocation of a total of 100 posts for all 13 townships¹⁵ targeted for assistance under the Appeal. Reports from the field indicate that the posts are being very well received by communities who have already begun to make good use of them for meetings, kindergartens, and mini-libraries or reference centres.

As part of the Nargis Operation's transition into regular programming, 2 i-Cs¹⁶ are also making preparations to oversee the maintenance and use of Red Cross posts newly-constructed under the shelter programme. These preparations include proposals on engaging community members, particularly trained community volunteers to help operate these posts. In addition, other humanitarian agencies, including UNICEF and WHO¹⁷, have expressed interest in using them as immunization centres during community vaccination campaigns.

IFRC will support equipment for the posts through the Nargis health budget, and this will include stretchers, loud speakers, first aid kits, hygiene kits, psychosocial support community kits and information, education and communication (IEC) materials, as well as furniture and blackboards. Some Red Cross posts have already received some of these items, and the final deliveries will be completed in February.

Four of the posts were fitted with solar panels several months ago on a trial basis - they have been found to be suitable, and as many of the villages have no main electrical power, solar panels will be a very useful alternative to electricity. As such, it has been proposed that solar panels should be installed in other selected posts.

A **second** and smaller phase of Red Cross posts is expected to be constructed from March onwards.

Challenges

This part of the programme has been slower to implement than originally planned but this has been mainly due to the workload in the hubs. Better progress is expected to be made over the next two months.

4 Construction of 24 primary schools (60ft by 30ft) in Bogale and Pyapon townships

Tenders were approved in late 2009 by the logistics unit at IFRC's Logistics and Resource Mobilization Department in Geneva. Construction on all 24 schools began in November, with excavations to construct the concrete foundations and ground beams. Completion of the first schools is scheduled for mid-March 2010. However, some delays with slower contractors in the more remote areas are anticipated.

The schools which will feature improved specifications such as reinforced concrete frames and raised floors of five feet above ground level, have been designed to resist typical storms, floods and earthquakes prevalent in the region.

IFRC has also worked with MRCS to develop a quality control plan¹⁸ and a series of check lists covering each stage of construction. In addition, nine site supervisors and one project engineer have been recruited to monitor the construction quality and progress. Two workshops have been conducted for the supervisors to aid them in their monitoring duties.

¹³ Corrugated galvanized iron.

¹⁴ These posts are to be used by Village Tract Recovery Committees and the MRCS for various types of meetings and activities. At the same time, they can be used as first aid posts.

¹⁵ The 13 townships are Kungyangon, Dedaye, Kyaiklat, Pyapon, Bogale, Maubin, Mawlamyinegyun, Labutta, Ngapudaw, Twantay, Kawhmu, Myaungmya and Wakema. Full recovery programming is planned for 11 of the 13 targeted townships under the Appeal. Reduced programming is being undertaken in the remaining townships of Myaungmya and Wakema due to the relatively small number of affected households.

¹⁶ Second-in-command who are the managers of the township Red Cross Volunteer brigades

¹⁷ United Nations Children's Fund (UNICEF); World Health Organization (WHO)

¹⁸ The quality control plan is aimed at providing communities with tools to monitor and report on minimum standards for shelter materials, through checklists etc. These will be used by beneficiaries, village tract recovery committees, and MRCS hub office staff and volunteers.

A school construction supervisory committee has also been set up in each village. The committee is formed of the head teacher and representative of the community. They are very active and have been encouraged to contact MRCS and the site supervisors if they have any queries or complaints.

Challenges

Several of the schools are in very remote areas and as such, access is challenging, with long boat rides on large, fast-flowing rivers to small shallow rivers, all of which are subject to tides.

As with all construction projects, quality control is of paramount importance and this is all the more challenging in the remote areas. However, this is being addressed through investments in the quality control plan (*mentioned above*), the appointment of site supervisors and by empowering the school construction supervisory committee.

5 Construction of ten sub-rural health centres

As with the schools, these centres have been designed to resist typical storms, floods and earthquakes prevalent in the region. The ten centres will be located in four townships of Pyapon, Kungyangon, Kawhmu and Twantay.

Tenders were approved in late 2009 by the logistics unit at IFRC's Logistics and Resource Mobilization Department in Geneva. Contracts have now been signed and construction is scheduled to begin by mid-January. A second phase of another ten centres is planned for mid-2010.

6 Community storm protection¹⁹ (an initial project of five multi-purpose storm shelters)

Plans for this project are currently being finalized with MRCS. The final form of this project will depend on identified needs and the capacity to implement within the set time period.

PARTNERSHIP SUPPORT

MRCS-Japanese Red Cross Society

In view of the increased costs related to improved design and specifications of schools, the 11 integrated school-shelters will not be constructed. The total number of schools to be constructed remains at 60. These schools will feature the same improved specifications as those of IFRC-funded schools.

Construction of all 60 schools commenced by the end of 2009. The first batch of completed constructions is expected in early February, while the final batches are scheduled for completion in June, before the onset of the full-fledged monsoon season.

MRCS-Taiwan Red Cross Organization

Two integrated shelter-schools will be constructed in Dedaye and Maubin townships. In addition, nine small health centres will be constructed in Ngapudaw, Labutta, Bogale and Pyapon townships, based on the improved design presented by the MRCS/IFRC.

MRCS-Singapore Red Cross

This 18-month project provides for the construction of one cyclone shelter per township, in Bogale, Mawlamyinegyun and Labutta townships. Implementation in Labutta is expected to begin soon. The project includes the construction of two 16-bedded station hospitals in Mawlamyinegyun and Labutta townships.

MRCS-Malaysian Red Crescent

This project provides for the construction of a multipurpose integrated Red Cross centre-shelter and a sub-rural health centre in Mawlamyinegyun township. Construction of the Red Cross centre has begun and 35 per cent of works has been completed so far.

MRCS-Magen David Adom

The construction of a primary school²⁰ in a village in Ngapudaw township is well underway, and is expected to be 96 per cent complete by mid-January.

¹⁹ These are Grade 2 cyclone-resistant shelters.

²⁰ As the school features brick nogging material (and not reinforced concrete as is the case with the MRCS/IFRC and MRCS/Japanese Red Cross projects), its construction period is shorter.

2 Livelihoods

The livelihoods programme has seen very good success in the fertilizer distributions and cash support project for paddy farmers, while steady progress has also been recorded in other initiatives.

Progress

1 Fertilizer distributions and cash support for 3,994 paddy farmers

This project which was launched in April 2009 for the benefit of 3,994 paddy farmers across six townships, was completed in September. Farmers with land of up to five acres each, were provided with three types of fertilizers and cash support for the cultivation of monsoon paddy. The crops were harvested between October and December this year, and project monitoring has found satisfactory results in reference to the utilization of fertilizers and cash, as well as paddy yield. In essence, the project was found to be a timely and effective intervention to address the needs of farmers affected by Cyclone Nargis. More details can be found in a project completion report at

<http://www.myanmarredcross.org.mm/PDF%20Download/AgricultureSupportProgrammeReport.pdf>

Cash usage by paddy farmers

Nature of expenses	% of cash used
Purchase of seeds	44
Labour costs for agriculture	40
Purchase of agriculture tools	2
Other cost in agriculture sector	12
Used for non-agriculture purposes	2
Total	100

Community-level agriculture training began in October for the same farmers benefiting from the project. The training was conducted by two expert trainers in all six townships. The training was complemented by the distribution of two types of posters on pest control in agriculture, developed by MRCS in collaboration with the Ministry of Agriculture and Irrigation's Myanmar Agriculture Services. In addition, booklets published by Myanmar Agriculture Services on different agriculture practices and relevant guidance for farmers, have been distributed by the MRCS to targeted communities.

A detailed report (including training methodology and outcomes) on the community-level agriculture training programme is available on the MRCS website at:

<http://www.myanmarredcross.org.mm/PDF%20Download/AgriculturTrainingReportDec09.pdf>

Further agriculture support interventions planned by MRCS for 2010 include the following:

- Support to farmers for rice cultivation during the summer season from the months of February to April.
- Support to farmers for vegetable farming, and the cultivation of betel leaf, banana, peanut and corn.
- Training and technical support for farmers to help them improve agricultural practices and production.
- Continuation of agricultural training for paddy farmers during the summer season.

2 Community tree-planting project

Launched in July 2009, this project was aimed at restoring natural resources damaged by the cyclone and promoting environmental protection through the planting of about 113,727 shade tree saplings of 20 different varieties. This project was implemented in collaboration with the Department of Forestry at township levels – the department provided the saplings at subsidized rates.

All planting was completed by mid-October, through a total of 39 projects in 11 townships. The projects were spread across 94 villages and saw the participation of about 1,950 villagers who were paid for their labour through short (2-3 day) cash-for-work schemes, or who provided their labour free of charge.



The community tree-planting project has seen a total of 113,727 shade tree saplings planted across 11 townships. (Photo: Khine May Oo / Myanmar Red Cross Society)

Challenges

This project has experienced a substantial level of loss (i.e. saplings have not survived) - the overall survival rate stands at 43 per cent. The loss has been due mainly to heavy rains and flooding in the immediate period after planting, and high temperatures at later stages. In some locations, soil conditions were found to be unsuitable.

The learning gained through this project will be used in the next phase of the community tree-planting project. Mechanisms are also being worked out to ensure better participation of communities in maintaining the trees.

Hub level teams are monitoring the survival rate of the saplings every three months until May 2010. The first round of monitoring took place in November.

3 In-kind livelihoods asset recovery project

This project is aimed at benefiting 11,500 beneficiaries across 11 townships. It targets households who lost their livelihoods assets and have not yet recovered from the impact of the cyclone. In-kind and minimum cash support will be provided to beneficiaries involved in various livelihoods sectors such as fisheries, agriculture, livestock and small business.


Up to early January, beneficiary selections were completed in ten townships, while community-level planning (upon approval by MRCS headquarters) has begun in almost all townships. Procurement of in-kind materials for various agriculture sectors have also begun and are expected to continue for the next few months. Distributions are targeted to be held concurrently from January to April.

4 Cash-for-Work (CFW) project

While the Cash-for-Work project as per the targets set out in the Nargis Appeal was successfully completed in May 2009 (see *Operations Update No.26*), the MRCS has gone on to implement stand-alone projects among a few vulnerable communities in need of assistance, during this reporting period.

These projects included a project in Labutta involving the construction of an access road. The project, which was conducted in September, benefited about 100 villagers who were affected by Cyclone Nargis, and more recently by small storms. A second project was launched in Mawlamyinegyun township in November, and comprised road and canal repairs. The project benefited about 150 villagers identified as being especially in need of assistance to meet their household needs during the pre-harvest season.

Additionally, the Cash-for-Work projects (completed in May last year) were monitored in the months of October and November, after the rainy season. Checks found that some projects were in need of strengthening through minor repairs or maintenance works. As a result, communities were provided with materials such as sand, cement and gravel to conduct the repairs. By early January, repair works in 30 village tracts in eight townships were completed. Ongoing repairs are expected to conclude soon.



BENEFICIARY FEEDBACK

“I mixed the three kinds of fertilizers and added them to my field after I planted the seeds. The seeds have grown into paddy plants. They are growing well day by day. The height of these plants is about 1 foot tall.”

U Myint Hlaing, 48, a seasonal farmer in Ywar Lay Village in Twantay township.

(Photo: Myo Ma Ma Kyaw / Myanmar Red Cross Society)

PARTNERSHIP SUPPORT

French Red Cross

Two types of livelihoods activities are being conducted in Mawlamyinegun township between May 2009 and March 2010:

- Cash-for-work projects involving repairs and improvements to damaged village-level infrastructure.
- Helping households recover economic security/assets damaged or lost as a result of Cyclone Nargis.

The activities will support up to 1,620 households (7,289 beneficiaries) cumulatively, across three village tracts.

Cash-for-Work village-level infrastructure:

To date, in a total of nine villages, 20,350 ft of footpath, three culverts, five jetties and two bridges have been completed. Activities continue in four villages and will be completed by the end of March 2010.

Recovery of economic security:

Fisheries

Distributions of commercial and small-scale equipment to about 390 fishermen and 400 landless vulnerable households were completed during this reporting period. The distribution of fishing licences to beneficiaries (for fishing with big nets) by the Fisheries Department, were conducted in December.

Livestock and Fisheries solidarity funds

These individual funds have been created in all or most of the 23 villages where livestock (pigs and ducks) and fishing gear have been distributed.

The livestock fund is a temporary fund and is aimed at providing in-kind or cash support to potential new beneficiaries. During this reporting period, the fund was found to have a 90 per cent attendance rate. The main difficulty encountered during this reporting period is that villagers are going through a period of food shortage and are therefore not able to contribute regularly to the fund. Some of them have even sold back ducks to buy food.

Checks by the livestock department have shown that the health status of pigs was unfavourable because of a number of reasons, including the fact that the animals were not strong enough to resist the rainy season, and inadequate shelter had been provided for them. Ongoing efforts to address these problems include further visits by department staff to treat the animals and training by livestock department officers for MRCS/French Red Cross staff in basic veterinary knowledge.

The fisheries fund is a long-term fund which serves as a type of ‘bank’ for fishermen. During this reporting period, the fund was found to have a 100 per cent attendance rate, with fishermen who are non-MRCS beneficiaries expressing an interest in contributing towards the fund.

Ongoing efforts include work on the sustainability of both the funds.

3 Community-based health and first aid (CBHFA)



Community activities such as school hygiene promotions have reached a total of 32,976 school children, during this reporting period. (Photo: Myanmar Red Cross Society)

Community activities

Community activities undertaken by trained Red Cross volunteers and trained community volunteers continue to be implemented. These include health promotion and hygiene education including hygiene promotion in schools, as well as community-initiated activities related to community action plans. A total of 71,345 beneficiaries including 32,976 school children were reached through these activities between September 2009 and early January. The beneficiaries are in 778 villages across 13 townships.

The activities have been complemented by the distribution of hygiene kits, first aid kits, mosquito nets, TB²¹ care kits, ORS²² packets, and soaps, as well as information, education and communication (IEC) materials such as posters, pamphlets and flip charts on TB and malaria awareness, H1N1 influenza, and hygiene education.

Other related community activities conducted during this reporting period include H1N1 human influenza awareness-raising campaigns in schools and among communities by hub health officers and community-based health and first aid (CBHFA) volunteers in the 13 targeted townships. Multiplier training for community volunteers has also continued with a total of 344 volunteers trained during this reporting period. To date, a total of 3,247 community volunteers across the 13 targeted townships have been trained and involved in health education and monitoring for a total of 64,940 households.

Latrine constructions and hygiene promotion in schools

In collaboration with a hygiene promotion consultant, joint health, and water and sanitation teams have selected 19 schools from five townships (Kyaiklat, Bogale, Labutta, Kungyangon and Pyapon townships), where vulnerable communities are located, for the purpose constructing latrines and conducting hygiene promotions. This was followed by the development of tool kits and information, education and communication materials in early January. Latrine constructions and accompanying hygiene promotions are planned to begin in March.

Impact on communities

A community-based first aid (CBFA) review was conducted in October and November, in all 13 townships targeted in the Nargis operation. Two villages were selected from each township - one close to town and the other far from town – and interviews (in-depth and focus group interviews, as well as informal discussions) were held with local authorities, Red Cross supervisory committees, Red Cross community volunteers, households, school principals, teachers and students. The review team comprised one team of local consultants from a medical survey institute in Yangon, MRCS/IFRC headquarters staff, hub health officers, and Red Cross ToT²³ trainers. The main purpose of the review was to assess the impact and extent of the implementation of first aid and CBFA

²¹ Tuberculosis

²² Oral rehydration salts.

²³ Training of trainers

activities. The findings are being used to guide planning and activities for the remaining programme period as well as the development of the CBHFA-in-action programme²⁴.

The review was followed by a knowledge, attitude and practice (KAP) survey conducted in December. Data was collected from the same 30 village tracts (across 13 townships) covered in the baseline survey of December 2008. Data is being consolidated and analysed now, and will also be used to guide community-oriented activities in the coming months.

Similarly, with effect from September, community volunteers have begun to conduct household monitoring (one community volunteer covers 20 households), in order to assess environmental hygiene practices and the health status of households. Findings will guide future distributions of health-related items such as mosquito nets, hygiene kits and information, education and communication (IEC) materials.

Tuberculosis (TB)/HIV activities

Health teams continue to conduct review field trips and these include visits to TB patients' homes and the provision of technical advice to Red Cross volunteers. Discussions with township medical officers (TMO) in Nargis-affected areas, on future collaborations with the Health Department's TB surveillance team, were also initiated during this reporting period.



Commercial first aid training

MRCS was approached by German Agro Action to conduct commercial first aid training in Bogale for 198 community health workers and volunteers, in the months of November and December. This initiative follows similar first aid training previously conducted by the MRCS, in response to requests from other aid agencies and organizations. It is another confirmation of the name the national society has made for itself in first aid among humanitarian actors in Myanmar²⁵.

As a capacity building measure for health promotion activities, including tuberculosis (TB) care and prevention, MRCS has recruited ten township field coordinators from ten townships, effective from October. The main responsibility of the field coordinators is to monitor and supervise field health activities in coordination with the Ministry of Health's TB surveillance team and midwives.

Other capacity building efforts include a workshop conducted in Naypyidaw in September, during which MRCS presented the CBHFA-in-action programme to the Minister of Health. This was followed by a CBHFA-in-action sensitization workshop conducted in Yangon from 29 September to 1 October. It was attended by a range of participants comprising state and divisional level representatives from the Ministry of Health, state and division-

²⁴ The CBHFA-in-Action programme employs the 'learning-by-doing' method. This means that community actions plans will be developed by communities through community-initiated activities (from the bottom up). All community-based projects will become the components of the CBHFA programme.

level Red Cross Supervisory Committee members, Education Department representatives, and G1s²⁶ from 17 states and divisions. The Ministry of Health has also instructed all medical and medically-related universities (e.g. nursing, pharmacy) under its administration, to add the CBHFA-in-Action manual²⁷ used by MRCS, to their libraries.

PARTNERSHIP SUPPORT

MRCS-French Red Cross

Most of the renovation works on the township hospital in Mawlamyinegyun and the Kyai Pi station hospital in Mawlamyinegyun, were completed in October and November. These works comprised refurbishment to areas such as the office room and laboratory, patient wards, and operation rooms. Further renovations such as the construction of a latrine building, permanent incinerator, fencing and installation of the electrical system, are ongoing. The distribution of equipment including surgical and laboratory instruments, will be carried out in late January. Both hospitals cumulatively serve a population of about 69,000 households.

MRCS-Thai Red Cross

Projects comprise the construction of a rural health centre and a 16-bedded hospital in Pyapon township; and a new national blood centre in Yangon. The blood centre is scheduled to open in early 2010. Thai Red Cross has also donated 100 vials of anti-snake venom to MRCS.

MRCS-Singapore Red Cross

See *Shelter* section.

MRCS-Malaysian Red Crescent

See *Shelter* section.

4 Psychosocial support (PSP)



Community-oriented psychosocial support activities are targeted at all members of vulnerable communities. In this picture, children in Aye Ywar village, in the township of Kungyangon, play carroms. The carrom board is a component of the community kit - 668 kits were distributed to all 13 townships from early to mid-2009. (Photo: Daw Chan Myat Thu / Myanmar Red Cross Society)

Community activities

Community activities have continued during this reporting period, benefiting about 14,839 villagers (including audience members) across 13 townships. Activities include cooking, singing, swimming and boat racing competitions, as well as debates and poetry recitals. While seasonal agricultural tasks made it difficult for all villagers to participate, the activities have generally been well-received by communities because of the spirit of fun

²⁶ Grade 1 Staff officers of Red Cross Brigades – these officers hold the highest rank in the volunteer system of the states and divisions, and are members of the MRCS State & Division-level Supervisory Committees.

²⁷ This is the master manual issued by the IFRC's headquarters in Geneva.

and improved wellbeing shared by all. In one particular village tract²⁸, community members have decided to make the activity an annual affair and to organize it themselves, while surrounding villages have expressed interest in organizing similar activities.

Recreational kits

A total of 667 recreational kits meant for child-based institutions in 13 townships, were purchased in late 2009. Up to early January, 391 kits were distributed to 260 institutions in 13 townships. The remaining kits will be distributed to 205 institutions by the end of March 2010.

Training

A refresher course was held in late August in Yangon for volunteers and health officers involved in PSP community activities. This was followed by refresher training for PSP TOT trainers and Red Cross volunteers in November. Five Red Cross volunteers from each of the 13 townships attended the training, which was followed by field visits to monitor activities.

Survey

A review of PSP activities aimed at assessing the social impact on communities will be conducted through surveys in three selected townships in late January.

Programme revision

A revision of PSP activities with more focus on peer group activities will be conducted when the survey results (mentioned above) are collated.

Staffing

The MRCS has recruited a senior PSP officer with a strong background in occupational health. The officer will support the MRCS Nargis PSP coordinator.

5 Water, sanitation and hygiene promotion



Up to early January 2010, a total of 35,600 households and 17,000 school children were provided with access to safe water through several water, sanitation and hygiene promotion projects. In this picture, young girls in Ka Dar village in Pyapon township, fetch water from a cleaned and fenced pond. (Photo: U Thet Aung / Myanmar Red Cross Society)

Progress

Recovery activities between September and early January 2010:

During this reporting period, a total of 6,385 households in 13 townships have been provided with access to safe water through a variety of activities such as the rehabilitation of ponds and wells, as well as the construction of new wells, water storage tanks and gutters. This brings the total number of people reached through such

²⁸ A village tract is the local administrative level below the township, and consists of a varying number of villages.

activities, from the start of the operation until early January 2010, to 35,600 households and 17,000 school children across 12 townships.

In addition, latrine constructions during this reporting period have enabled a total of 10,169 households across 13 townships, to have better sanitation and hygiene. This brings the total number of households reached through this initiative, from the early recovery period until early January 2010, to 27,057 households.

Activity details are listed below:

Pond rehabilitation

A total of 87 ponds were rehabilitated during this reporting period, bringing the total number rehabilitated since the start of the operation, to 276 across 13 townships.

Tube wells and open wells²⁹

Up to 30 tube wells were constructed or rehabilitated during this reporting period. This brings the total number of tube wells constructed or rehabilitated since the start of the early recovery period, to 109.

Construction of rainwater harvesting structures³⁰ including storage tanks and gutters in 13 townships

- Construction of 5,000 gallon-Ferro cement tanks (22,500 litres) with rainwater harvesting gutters: 80 were constructed during this reporting period, bringing the total to 111. Each tank has the capacity to store drinking water sufficient for the needs of about 1,300 households.
- Construction of 200 gallon-concrete ring tanks (900 litres): 300 were constructed during the reporting period, bringing the total to 396.

Latrine constructions

- *Construction of fully functional demonstration latrines for selected vulnerable households in 13 townships:* 265 were constructed during this reporting period, bringing the total number to 1,350 since the start of the operation. Demonstrations are complemented with hygiene promotion sessions which include the operation and maintenance of latrines at household-level.
- *Distribution of full-package latrine construction materials which include pans and pipes, to selected vulnerable households who are constructing their own latrines:* Distributions were made to 800 households during this reporting period, bringing the total number to 1,603 households since the start of the operation.
- *Distribution of latrine pans and pipes to households which are ready to construct their own latrines and have sourced for construction materials such as thatch (for roofs) and bamboo mats themselves:* 6,054 households were reached during this reporting period, bringing the total number to 21,054 households in 11 townships.
- In addition, the distribution of latrine pans and pipes to *beneficiaries of the household shelter project* began in September. A total of 3,050 beneficiaries were reached until early January 2010.

Capacity building

The MRCS water and sanitation coordinator, and two water and sanitation engineers attended water and sanitation regional disaster response team (RDRT) training in Indonesia, organized by the regional office, in late 2009.

The regular training of volunteers and masons in the construction of rainwater harvesting structures such as Ferro cement tank construction continued during this reporting period.

Inter-agency coordination

MRCS water and sanitation personnel conducted *Emergency Water and Sanitation training* at the end of September, for staff of all water, sanitation and hygiene (WASH) thematic group members, as part of overall contingency planning for disasters. The MRCS team was supported by IFRC delegates and UNICEF staff. In total, 29 staff members from the UN, international and national NGOs participated in this training. UNICEF has requested MRCS/IFRC to conduct this training in future for government staff and aid agencies working in different parts of Myanmar. The event was a reflection of the national society's growing capacity in water and sanitation services which was formed through the Nargis operation.

²⁹ In addition, a total of 327 open wells have been constructed or rehabilitated since the start of the early recovery operation. No open wells were constructed or rehabilitated during this reporting period (Sept 2009 to early Jan 2010).

³⁰ In addition, a total of 234 fibreglass tanks (200-gallon capacity) with gutters have been installed in schools and community centres from the start of the early recovery operation. No fibreglass tanks were installed during this reporting period (Sept 2009 to early Jan 2010).



Significant capacity in water, sanitation and hygiene promotion continues to be built within the Myanmar Red Cross Society, thanks to the extensive support established by the Nargis Operation's water, sanitation and hygiene promotion programme. In this picture, a Ferro cement tank with a 22,500-litre capacity, is being constructed in Bogale township. (Photo: Zaw Oo / Myanmar Red Cross Society)

PARTNERSHIP SUPPORT

MRCS-International Committee of the Red Cross

International Committee of the Red Cross (ICRC) water and habitat engineers supported IFRC in conducting training on the construction of Ferro cement tanks for water and sanitation teams from all nine hubs.

MRCS-French Red Cross

Water and sanitation activities in Mawlamyinegyun township for the benefit of 10,717 households located across 99 villages, were completed in late 2009. Activities included the creation of new ponds, construction of rainwater harvesting tanks, and the installation of pond sand filters. PHAST³³ sessions as well as a water and sanitation-related disaster risk assessment with the focus on eight villages have also been conducted. The establishment of water management groups comprising community members, as well as training for these members, is nearing completion.

The project will be extended for a further three months (until the end of March 2010) to ensure the sustainability of completed activities. The focus of the remaining three months will be on follow-up and support to water management groups, monitoring and improving ceramic water filter usage, and the handover to MRCS township branch.

6 Disaster preparedness and risk reduction

Community-based disaster risk management programme

During this reporting period, early warning equipment (hand mike sets) and stretchers³⁴ as well as information, education and communication (IEC) materials were distributed to all 112 communities³⁵ targeted under the programme. The IEC materials comprise a Civil Society Disaster Risk Reduction handbook, as well as four posters and pamphlets on floods, storms, landslides and fires respectively.

The distributions were undertaken by G1 Officers³⁶ and 2 i-Cs³⁷, as well as selected community leaders, who collectively are the 65 CBDRM team leaders. They represent 53 townships across six States or Divisions comprising Ayeyarwady, Yangon, Rakhine, Sagaing, Magway and Mandalay. The handover of equipment and materials from the MRCS to the team leaders took place during a two-day workshop in November. The workshop also saw the team leaders being oriented in recently-developed CBDRM guidelines, as well as a revised CBDRM

³³ Participatory Hygiene and Sanitation Transformation.

³⁴ One hand mike set and one stretcher have been allocated for each of the 112 communities targeted under the CBDRM programme.

³⁵ Of the 112 communities, 54 comprise communities from the 13 townships targeted under the Nargis Appeal.

³⁶ Grade 1 Staff officers of Red Cross Brigades – these officers hold the highest rank in the volunteer system of the states and divisions, and are members of the MRCS State & Division Supervisory Committees.

³⁷ The 2 i-C (second-in-command) is the manager of a township Red Cross Volunteer brigade.

manual. They also engaged in a township-level hazards mapping process which identified potential natural hazards and health hazards.

Geographical Information Systems (GIS):

In order to record hazards, vulnerability and capacity assessments (VCA), and other information along with establishing a database of trained human resources, MRCS recruited a geographical information systems (GIS) officer in October. The officer is being trained by a country office database officer who attended GIS training conducted by ICRC last year. The MRCS GIS unit has been equipped with relevant equipment and software that is compatible with IFRC software.

Sphere (Humanitarian Charter and Minimum Standards in Disaster Response) translation:

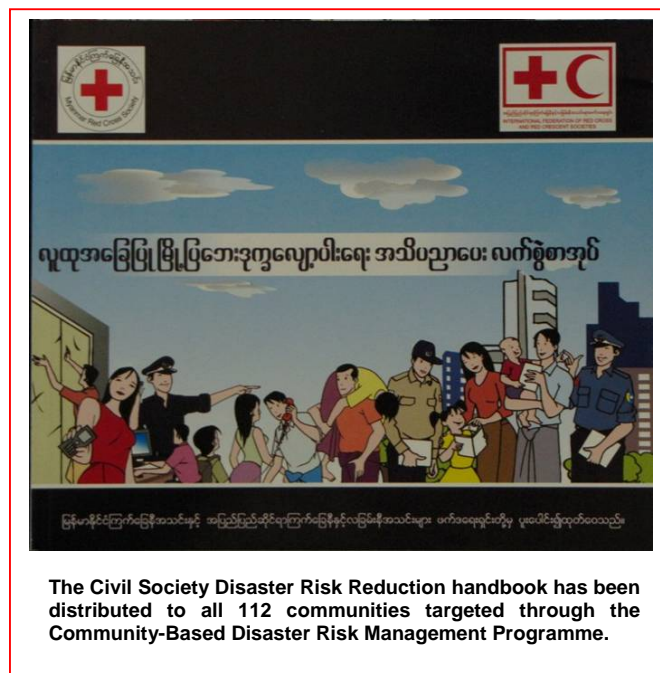
Printing of the Sphere document is in progress. It will be formally launched soon and will be followed by distributions to all township branches, trained personnel and partners in the country.

Standardization of Disaster Preparedness stock

The MRCS standardized its disaster preparedness stock items during this reporting period.

Inter-agency coordination

The MRCS is involved in the finalization of the Inter-Agency Standing Committee (IASC) response plan to future disasters. The national society has been identified as a partner mainly in the health, water and sanitation, shelter, and camp management sectors.



Strengthening communications systems

An additional 42 radios were distributed to Patheingyi township between September and October because of increased needs identified in the area. The radios are being used by communities for early warning alerts on bad weather. They are additions to the radios previously distributed to all 13 affected townships earlier in the year – the radios were part of 668 community kits distributed under the PSP programme, and to be used for both entertainment and disaster preparedness.

Telephone line installations continued in four townships during this reporting period, thereby reaching the society's overall target of installations in 13 townships, for 2009. Ten of the installations are funded by the Nargis Appeal. Of the ten installations, three were made in Nargis-affected townships.

The provision of VHF³⁸ telecoms equipment (handsets and base stations) to hub offices continued during this reporting period, bringing the total number of fully-equipped hubs to three. A training workshop on the use and maintenance of VHF telecoms equipment for staff at hub and branch offices is being planned.

³⁸ Very High Frequency (VHF).

Contingency plan

The MRCS is in the process of finalizing its multi-hazards contingency plan which spans the following core areas: coordination, information management, restoring family links, relief, emergency shelter, health services; water, sanitation and hygiene promotion; logistics, and finance and administration. The plan caters for two different disaster scenarios across the country: (1) medium-size, affecting between 50,000 and 200,000 people, and (2) a large-scale disaster affecting more than 200,000 people.

International event celebration

A total of 16 townships organized events to celebrate the United Nations International Strategy for Disaster Reduction Day on the second Wednesday of October. Township branches distributed information, education and communication (IEC) materials, repeated vulnerability and capacity assessment (VCA) exercises in targeted communities, and organized mass community meetings to generate awareness on hazards and possible measures to be undertaken to reduce risks at community level. Altogether, some 7,000 people took part in the events on the day.

SUPPORT SERVICES

Organizational Development

Transition process

Following feedback from hub managers and 2 i-Cs³⁹, the transition team recently met with the MRCS executive committee seeking policy guidance on core areas such as assets, programmes and projects, structures and systems, headquarters and human resources.

The policy guidance will guide the work of the transition team over the coming period. Importantly, the executive committee has requested a monthly update on the team's progress.

Finance development support

During this reporting period, MRCS purchased and installed a new financial system (comprising new software and computers) at hub level. The system was operational on 1 January and is being run in parallel to the existing manual system so that an evaluation can be undertaken in February.

A finance workshop outlining the new financial regulations and procedures for hubs was also held.

Volunteers

Red Cross volunteers continue to be a driving force in the implementation of programme activities, being important links with and guides for affected communities. Between 655 and 888⁴⁰ Red Cross volunteers have been involved in a variety of Nargis Operation activities during this reporting period. They have provided support in the following areas: water, sanitation and hygiene promotion; basic first aid, community-based health and first aid activities, psychosocial support, livelihoods, shelter, community development, logistics, and emergency response.

The executive committee has approved the assigning of Red Cross volunteers with experience and potential, to take on technical duties or responsibilities for positions at hub offices which have been vacated, until new full-time staff are recruited.

New recruits (1,658 men and 1,791 women) in all Nargis targeted townships attended basic first aid training during this reporting period.



Volunteers continue to serve as vital links and guides for affected communities, through a variety of activities such as this tree-planting project (within the livelihoods programme), conducted in Kungyangon township in late November. (Photo: Zaw Min Ko / Myanmar Red Cross Society)

³⁹ The 2 i-C (second-in-command) is the manager of a township Red Cross Volunteer brigade.

⁴⁰ The number of volunteers working in Nargis areas fluctuates, depending on need.

Challenges

The country office and MRCS are aware that the ongoing headquarters transition from Yangon to Naypyidaw, the new Federal administrative capital, has the potential to disrupt the implementation of Nargis operation activities. The country office is working closely with the MRCS leadership to ensure that key staff members will remain available and focused on their specific Nargis responsibilities. It is also possible that some staff members may be unable to relocate to the new capital, and the delegation is supporting the MRCS human resources unit in its planning process.

In addition, the country office is considering specific measures to support the transition of Yangon staff, and progress in this regard will be provided in the next operations update.

Finance

Internal audit

An internal audit of the Nargis operation was conducted between 29 November and 12 December. The audit was conducted by an officer from IFRC's risk management and audit unit, based in the Asia Pacific zone office in Kuala Lumpur. The audit, which was general in nature, covered administration, finance and general project compliance procedures. The final report is still under preparation, but indications are that overall, it was found that the country office is in good compliance with procedures.

Logistics

Procurement

Substantial procurements continue for programmes, particularly local-level procurement for shelter and livelihoods activities which will total an estimated CHF 3 million. In reference to the in-kind livelihoods assets project for 11,500 households, local procurement began in November. Thousands of pigs, chickens and ducks; hundreds of tonnes of fertilizers and seeds, and more than a thousand boats and fishing nets are to be procured, transported and delivered by April.

Fleet

- The logistics unit continues to monitor and provide guidance to hub offices on fleet maintenance and usage, in accordance with IFRC guidelines.
- The regional fleet coordinator visited Myanmar on 23-26 November for driver training, training-of-trainers, assessment of the fleet situation, and coordination with IFRC and MRCS.
- An additional nine ICRC vehicles are being loaned to IFRC in stages, and will be stationed at hub offices. The vehicles will help towards strengthened and safer transportation in the field.

Capacity building

During this reporting period, a combined shelter and logistics workshop was organized to refresh teams on the household shelter procurement procedures.

In November, one IFRC and one MRCS logistics officer attended the regional logistics workshop, while a procurement officer attended on-the-job training with the regional logistics unit. Both the workshop and training were held in Kuala Lumpur.

The translation of the Warehouse Manual into the local language has been completed. Once approved by the MRCS's executive committee, it will be printed and distributed to Nargis-affected areas, as well as other States and Divisions, to improve warehousing techniques.

The translation of the Fleet Manual into the local language is in process.

Security

Please see *Strengthening communications systems* in the Disaster Preparedness and Risk Reduction section above.

Monitoring and Evaluation (M&E)

Hub offices began submitting monthly monitoring and evaluation reports in September. The content and quality of reports has improved over the past few months, as a result of regular follow-up and on-the-job training provided by MRCS and IFRC field officers and through designated meetings and regular hub managers meetings in Yangon. Other factors contributing to this improvement are strengthened working relationships between M&E officers and other hub officers, and the availability of a new M&E guideline in Myanmar language.

Reporting

Regular and informative updates continue to be issued by all nine hub offices.

Media/communications

During this reporting period, MRCS's communications division organized media interviews with local television stations on Nargis operation activities such as the construction of houses, schools and Red Cross posts; fertilizer distributions to paddy farmers, and cash-for-work projects. The interviews have been aired on both English and Myanmar language channels.

Articles on programme activities have also been posted on the society's website: www.myanmarredcross.org.mm and IFRC's website: www.ifrc.org

Close coordination continues between the MRCS communications division and IFRC's regional communications unit in planning and implementing activities, as well as communications capacity building, with training and exchange visits with other national societies in the region planned for the months ahead. Preparations are also underway for communications initiatives for the second year commemoration of the Cyclone Nargis operation.

MRCS capacity

There are currently 331 technical staff in all nine hub offices, while a total of 36 staff are located at headquarters. See also *Challenges* under the Organizational Development section.

IFRC capacity

The total number of in-country delegates stands at 17, including six annual programme delegates. The finance and administration delegate returned from Bangkok to the Myanmar delegation in October, while the reporting delegate continues to work from Bangkok. The country office's local technical staff count stands at 27.

Multiple-entry visas for all Nargis delegates were recently renewed for a period of three months until the end of January 2010. The renewal process for the next round of visa extensions began in December and it is hoped that the visas will be renewed soon.

This reporting period has seen a number of end of missions, notably for the psychosocial support delegate (whose functions have been taken over by the health coordinator), water and sanitation coordinator (the recruitment process for a new delegate has just been completed, and he is expected to take up the position in March, depending on the visa question), and the health coordinator who handed over duties to her successor during the November to December period. The programme coordinator (annual programme) also ended her mission, and the recruitment process for a replacement was concluded at the end of January – the position will be taken up by the current Nargis recovery coordinator whose position will not be filled. Recovery responsibilities will be divided between the new programme coordinator and the Nargis head of operations. Additions to the country office during this period include two locally-employed water and sanitation officers.

Other interventions outside the MRCS/IFRC's Nargis Appeal

RESTORING FAMILY LINKS

MRCS-Australian Red Cross

As part of ongoing support to MRCS in building Restoring Family Links (RFL) capacity and services, the RFL team has been reflecting on the Nargis RFL operation, with staff and volunteers who were involved. The lessons learned from the operation provide a rich base from which to consider approaches to RFL preparedness for the future. Key findings from this process include:

- the need to build RFL awareness among stakeholders and capacity among volunteers before disasters happen;
- the importance of streamlining coordination mechanisms (both within MRCS and with other organizations and related departments); and
- the need to keep RFL tools and terminology as clear and simple as possible for volunteers.

How we work

All IFRC assistance seeks to adhere to the **Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGOs) in Disaster Relief** and is committed to the **Humanitarian Charter and Minimum Standards in Disaster Response** (Sphere) in delivering assistance to the most vulnerable.

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

Global Agenda Goals:

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

Contact information

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

International Federation of Red Cross and Red Crescent Societies

MDRMM002 - Myanmar - Cyclone Nargis

Interim Financial Report

Selected Parameters	
Reporting Timeframe	2008/5-2010/01
Budget Timeframe	2008/5-2011/4
Appeal	MDRMM002
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
A. Budget	56,048,864	9,445,135			8,493,910	73,987,909
B. Opening Balance	0	0			0	0
Income						
Cash contributions						
American Red Cross	1,554,089					1,554,089
Andorra Government					22,607	22,607
Andorra Red Cross	23,550					23,550
Australian Red Cross	2,408,158				1,000,000	3,408,158
Australian Red Cross (from Australian Government)	3,008,275	9,724				3,017,999
Austrian Red Cross	359,470					359,470
Austria - Private Donors	1,585					1,585
Belarusian Red Cross	2,391					2,391
Belgian Red Cross (French)	18,986					18,986
Belgium - Private Donors	323					323
Belgium Red Cross (Flanders)	46,294					46,294
Brazil - Private Donors	8,033					8,033
British Red Cross	1,905,068					1,905,068
British Red Cross (from British Government)	634,268					634,268
British Red Cross (from DFID - British Government)	3,074,258					3,074,258
Canadian Red Cross	1,405,814					1,405,814
Canadian Red Cross (from Canadian Government)	2,534,636					2,534,636
China RC, Hong Kong branch	547,266	547,758				1,095,024
China RC, Macau branch	20,000					20,000
Cook Islands Red Cross	11,283					11,283
Cyprus Government	80,050					80,050
Cyprus Red Cross	16,123					16,123
Danish Red Cross	498,991					498,991
Danish Red Cross (from Danish Government)	2,227,858					2,227,858
ECHO	1,272,513					1,272,513
Estonia Government	51,607					51,607
Finnish Red Cross	58,338	222,086				280,424
Germany Red Cross	1,068,785					1,068,785
Great Britain - Private Donors	466					466
Hellenic Red Cross	48,810					48,810
Hong Kong - Private Donors	5,200					5,200
IATA	8,650					8,650
Icelandic Red Cross	174,295					174,295
Indian Red Cross	7,732					7,732
India - Private Donors	10,607					10,607
Irish Red Cross	550,290					550,290
Italian Govt Bilateral Emergency Fund	198,645					198,645
Italian Red Cross	59,059					59,059
Japanese Red Cross	4,824,602	884,700			632,100	6,341,402
Japan - Private Donors	4,730					4,730
Korea (Republic of) - Private Donors	191					191
Korea Republic Red Cross	378,344					378,344
Kuwait Red Crescent (from Kuwait Government)		2,500,000			2,750,000	5,250,000
Lithuanian Red Cross	976					976
Luxembourg Red Cross	11,862					11,862
Malaysian Red Crescent	10,546					10,546

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Malaysia - Private Donors	2,414			2,414
Maldives Private Donors	2,597			2,597
Monaco Red Cross	144,373			144,373
Netherlands - Private Donors	323			323
Netherlands Red Cross	89,370			89,370
Netherlands Red Cross (from Netherlands Government)	1,437,275			1,437,275
New York Office (from Applied Materials)	32,583			32,583
New York Office (from ChevronTexaco Corp.)	1,051,073			1,051,073
New York Office (from Hospira)	105,107			105,107
New York Office (from Lehman Brothers Foundation)	94,597			94,597
New York Office (from Motorola Company)	105,107			105,107
New York Office (from Nordic Custom Builders Inc.)	5,250			5,250
New York Office (from United States - Private Donors)	2,352			2,352
New Zealand Red Cross	196,574			196,574
Norwegian Red Cross	106,786			106,786
Norwegian Red Cross (from Norwegian Government)	1,237,200			1,237,200
On Line donations	248,510			248,510
Other	95			95
Peru - Private Donors	214			214
Philippines - Private Donors	520			520
Poland Red Cross	5,196			5,196
Portuguese Red Cross	32,300			32,300
Qatar Red Crescent	7,470			7,470
Russia - Private Donors	2,686			2,686
Singapore - Private Donors	21,119			21,119
Singapore Red Cross	338,953			338,953
Slovakia Government	97,845			97,845
Slovak Red Cross	15,813			15,813
Slovenia Government	80,750			80,750
Spain - Private Donors	651			651
Spanish Red Cross	42,771			42,771
Sri Lanka Red Cross	3,250			3,250
Stavros Niarchos Foundation	156,000			156,000
Sweden Red Cross	-38,400	2,092,800		2,054,400
Sweden Red Cross (from Swedish Government)	2,209,860			2,209,860
Swiss Red Cross	313,772			313,772
Swiss Red Cross (from Swiss Government)	5,541			5,541
Switzerland - Private Donors	9,398			9,398
Taiwan Red Cross Organisation	496,589			496,589
Tides Foundation	50,993			50,993
Tides Foundation (from United States - Private Donors)	104,000			104,000
Total	2,182,000			2,182,000
Turkish Red Crescent	5,264			5,264
United Arab Emirates - Private Donor	1,115			1,115
United Arab Emirates Red Crescent	20,781			20,781
United States - Private Donors	15,644			15,644
UN Staff Council / UNOG	11,479			11,479
VERF/WHO Voluntary Emergency Relief	7,000			7,000
VietNam Red Cross	173,800			173,800
C1. Cash contributions	40,368,978	6,257,067		4,404,707
Outstanding pledges (Revalued)				
China RC, Hong Kong branch		542,535		542,535

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<i>New York Office (from Black Rock)</i>	52,676			52,676
<i>New York Office (from Citadel Investment group)</i>	10,316			10,316
<i>New York Office (from EMC Corp.)</i>	79,014			79,014
<i>New York Office (from Mellon Bank)</i>	26,338			26,338
<i>New York Office (from Schering Plough)</i>	52,676			52,676
<i>New York Office (from United States - Private Donors)</i>	448			448
C2. Outstanding pledges (Revalued)	221,468	542,535		764,002

Inkind Goods & Transport

<i>American Red Cross</i>	1,824,002			1,824,002
<i>Australian Red Cross</i>	354,274			354,274
<i>Austrian Red Cross</i>	553,791			553,791
<i>Belgian Red Cross (French)</i>	403,280			403,280
<i>Belgium Red Cross (Flanders)</i>	103,912			103,912
<i>British Red Cross</i>	2,997,175			2,997,175
<i>Canadian Government</i>	279,939			279,939
<i>Canadian Red Cross</i>	71,199			71,199
<i>China RC, Hong Kong branch</i>	275,291			275,291
<i>Danish Red Cross</i>	817,094			817,094
<i>Finnish Red Cross</i>	1,413,058			1,413,058
<i>French Red Cross</i>	677,315			677,315
<i>Germany Red Cross</i>	720,826			720,826
<i>Japanese Red Cross</i>	4,334,191			4,334,191
<i>Korea Republic Red Cross</i>	477,916			477,916
<i>Luxembourg Red Cross</i>	409,897			409,897
<i>Netherlands Red Cross</i>	1,160,086			1,160,086
<i>Norwegian Red Cross</i>	118,635			118,635
<i>Qatar Red Crescent</i>	281,160			281,160
<i>Spanish Red Cross</i>	1,045,369			1,045,369
<i>Swiss Government</i>	154,743			154,743
<i>Swiss Red Cross</i>	350,197			350,197
C3. Inkind Goods & Transport	18,823,349			18,823,349

Inkind Personnel

<i>Australian Red Cross</i>	22,147			22,147
<i>Austrian Red Cross</i>	39,453	4,400		43,853
<i>British Red Cross</i>	127,593		76,500	204,093
<i>Canadian Red Cross</i>	8,680			8,680
<i>Finnish Red Cross</i>		16,120		16,120
<i>Japanese Red Cross</i>	59,313	49,600		108,913
<i>Netherlands Red Cross</i>	86,706	43,400		130,106
<i>Other</i>	-2,053			-2,053
<i>Swiss Red Cross</i>	19,800			19,800
C4. Inkind Personnel	361,639	113,520	76,500	551,659

Other Income

<i>Miscellaneous Income</i>			31	31
<i>Services</i>	-178,786			-178,786
C5. Other Income	-178,786		31	-178,755

C. Total Income = SUM(C1..C5)	59,596,647	6,913,122	4,481,238	70,991,008
D. Total Funding = B + C	59,596,647	6,913,122	4,481,238	70,991,008
Appeal Coverage	106%	73%	53%	96%

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II. Balance of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
B. Opening Balance	0	0			0	0
C. Income	59,596,647	6,913,122			4,481,238	70,991,008
E. Expenditure	-41,890,567	-2,331,358			-2,443,236	-46,665,160
F. Closing Balance = (B + C + E)	17,706,080	4,581,764			2,038,003	24,325,848

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III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A		B					A - B	
BUDGET (C)		56,048,864	9,445,135			8,493,910	73,987,909	
Supplies								
Shelter - Relief	6,396,713	6,189,102					6,189,102	207,611
Construction - Housing		229,324					229,324	-229,324
Construction - Facilities/Infrastruc	13,225	408,281					408,281	-395,056
Construction Materials	12,095,852	1,087,134					1,087,134	11,008,718
Clothing & textiles	3,062,028	2,771,838	30,853				2,802,690	259,337
Food	1,683	1,683					1,683	0
Seeds,Plants		194,650					194,650	-194,650
Water & Sanitation	3,622,039	689,887	472,529				1,162,416	2,459,623
Medical & First Aid	1,036,598	451,643	125,582				577,225	459,373
Teaching Materials	1,069,549	10,430	69,327				79,758	989,792
Utensils & Tools	3,843,855	3,930,559					3,930,559	-86,705
Other Supplies & Services	9,410,133	2,695,196	344,742			817	3,040,755	6,369,378
ERU		968,899					968,899	-968,899
Total Supplies	40,551,675	19,628,627	1,043,033			817	20,672,477	19,879,198
Land, vehicles & equipment								
Vehicles	754,451	224,106				52,350	276,456	477,995
Computers & Telecom	384,165	228,179				62,321	290,500	93,665
Office/Household Furniture & Equipm.	315,426	206,561				30,343	236,904	78,522
Others Machinery & Equipment		6,287					6,287	-6,287
Total Land, vehicles & equipment	1,454,042	665,132				145,014	810,146	643,896
Transport & Storage								
Storage	473,571	224,426	159			38,229	262,814	210,757
Distribution & Monitoring	6,639,399	8,630,748	767			51,730	8,683,245	-2,043,845
Transport & Vehicle Costs	2,676,798	176,688	6			78,432	255,125	2,421,673
Total Transport & Storage	9,789,768	9,031,862	931			168,391	9,201,184	588,584
Personnel								
International Staff	6,719,334	2,120,326	275,330			794,154	3,189,810	3,529,524
Regionally Deployed Staff	69,335	67,980					67,980	1,355
National Staff	1,209,476	146,684	11,200			186,436	344,320	865,156
National Society Staff	4,366,404	1,113,342	222,719			244,206	1,580,268	2,786,136
Consultants	332,499	97,429	11,361			31,053	139,843	192,656
Total Personnel	12,697,048	3,545,761	520,610			1,255,849	5,322,220	7,374,828
Workshops & Training								
Workshops & Training	2,777,451	434,246	141,483			63,835	639,564	2,137,887
Total Workshops & Training	2,777,451	434,246	141,483			63,835	639,564	2,137,887
General Expenditure								
Travel	554,700	277,657	20,336			36,954	334,947	219,753
Information & Public Relation	448,679	157,620	7,712			20,340	185,671	263,008
Office Costs	276,877	181,563	26			78,647	260,237	16,641
Communications	328,703	167,777	86			73,074	240,937	87,766
Professional Fees	120,831	20,679	835			684	22,199	98,631
Financial Charges	411,162	913,412	66			75,769	989,246	-578,084
Other General Expenses	133,855	119,230				2,962	122,192	11,663
Total General Expenditure	2,274,807	1,837,938	29,061			288,430	2,155,429	119,378
Contributions & Transfers								
Cash Transfers National Societies		997,500					997,500	-997,500
Total Contributions & Transfers		997,500					997,500	-997,500
Programme Support								
Program Support	4,443,118	2,278,828	154,953			152,754	2,586,536	1,856,582
Total Programme Support	4,443,118	2,278,828	154,953			152,754	2,586,536	1,856,582

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III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A							B	A - B
BUDGET (C)		56,048,864	9,445,135			8,493,910	73,987,909	
Services								
Services & Recoveries		298,472	1,895				300,367	-300,367
Shared Services		750					750	-750
Total Services		299,222	1,895				301,117	-301,117
Operational Provisions								
Operational Provisions		3,171,452	439,390			368,146	3,978,987	-3,978,987
Total Operational Provisions		3,171,452	439,390			368,146	3,978,987	-3,978,987
TOTAL EXPENDITURE (D)	73,987,909	41,890,567	2,331,358			2,443,236	46,665,160	27,322,749
VARIANCE (C - D)		14,158,297	7,113,778			6,050,675	27,322,749	

Cyclone Nargis Operation programme tables – updated end January 2010

Shelter

Objective 1

The most vulnerable households (especially those living in public places, with host-families or in emergency shelters) have a dry and storm-proof shelter.

Expected results	Activities planned
<ul style="list-style-type: none"> • 15,000¹ of the most vulnerable households (8,000 in Phase 1 and 7,000 in Phase 2) that have not achieved a reasonable status of recovery, have been identified and supported with the provision of adequate shelter. • A high proportion (minimum of 85%) of the 15,000 households have been able to recover to a reasonable level of shelter. • Awareness has been raised on improved building techniques and buildings are being built accordingly. • MRCS capacity to address shelter as a mitigation measure has been strengthened. 	<ul style="list-style-type: none"> • Prepare guidelines on the programme. • Employ shelter technicians in each hub office to build the capacity of the MRCS. • Train and instruct hub staff on the programme. • Organize beneficiary selection process. • Sensitize suppliers. • Train carpenters and build model houses. • Work with UN Habitat on the production and distribution of technical posters and brochures for building back safer techniques. • Provision of funds enabling the construction of 15,000 houses with a value of CHF415 each. • Monitor procurement of materials. • Evaluate programme.

Objective 2

- Public infrastructure for health, education and community activities are available for people in the Nargis-affected areas.
- Storm/flood-resistant buildings are available for people to flee to in case these kinds of hazards occur.

Expected results	Activities planned
<ul style="list-style-type: none"> • 24 storm-resistant schools are constructed and handed over to the Ministry of Education. • 10 storm-resistant health centres are constructed and handed over to the Ministry of Health. • 5 storm/flood-resistant buildings (schools, health or multi purpose buildings) are constructed and handed over to the relevant authorities. • 100 Red Cross posts have been built to accommodate community and Red Cross activities. • 110 Community Structures have been repaired. 	<ul style="list-style-type: none"> • Identify locations. • Prepare designs and Bills of Quantity. • Tender for contractors (in the case of public buildings) • Make resources for construction available for communities to construct Red Cross posts. • Supervise construction of buildings. • Prepare ownership and maintenance arrangements. • Hand over buildings.

¹ This figure is a revision.

Livelihoods

Objective 1

- Households affected by Cyclone Nargis have increased family income and reduced vulnerability.
- Community assets and infrastructure are restored, enabling improved access and livelihoods for the affected communities.

Expected results

- Selected households are provided with wage employment.
- Basic community assets and infrastructure are restored.

Activities

- Interaction with other agencies implementing Cash-for-Work (CFW) programmes for learning.
- Needs assessments and development of CFW strategies.
- Orientation and capacity building of field teams and Red Cross volunteers.
- Development of database.
- Community-level planning process of developing CFW proposals with Village Tract Recovery Committees.
- Beneficiary selections and preparatory meetings at community level.
- Implement CFW activities as per approved plan and budget.
- Programme monitoring.
- Ensure transparency towards communities upon the completion of CFW projects.
- Conduct a review and impact assessment of the CFW programme.
- Develop CFW project progress reports.
- Follow up support planning for completed CFW projects.
- Provide additional maintenance and strengthen support towards communities for completed CFW projects.
- Develop revised strategy for scaling up of CFW projects.
- Implement new phase of CFW as per revised strategy.
- Consolidation of CFW programme; and impact evaluation.

Objective 2

Cyclone-affected households recover their livelihoods and improve their wellbeing, with increased knowledge and capacity to withstand disasters.

Expected results

- Targeted households recover lost productive assets in different sub-sectors of livelihoods such agriculture, fisheries, livestock and small businesses.
- Households and communities have increased knowledge about livelihoods and an enhanced capacity relating to disaster risk reduction.

Activities

- Collection of baseline data and assessment of livelihoods needs in communities.
- Prepare programme guidelines and framework on in-kind assets and cash support for beneficiaries.
- Obtain approval from local authorities on the proposed plan of action for the livelihoods programme.
- Provide orientation to hub managers and livelihoods technicians on livelihoods programming.
- Community-level planning process with Village Tract Recovery Committees.
- Beneficiary selections and preparatory meetings at community level.
- Undertake transparency towards communities and implement appeal procedure.
- Finalise beneficiary plans and list of potential income-generating activities.
- Logistics and procurement planning to deliver programme goals.
- Distribute in-kind assets and cash support to targeted beneficiaries in selected village tracts.
- Monitor progress made by beneficiaries and identify follow-up support requirements.
- Identify key training institutions/service providers.
- Enter beneficiary details into database.

	<ul style="list-style-type: none"> • Conduct community capacity building training. • Prepare project completion reports. • Conduct programme review and impact assessment.
<p>Objective 3 Most vulnerable and excluded households (disabled, widows and the elderly) have improved social and economic conditions.</p>	
Expected results	Activities planned
<ul style="list-style-type: none"> • Most vulnerable and excluded people improve their social and economic conditions. • Basic needs of the most vulnerable households are addressed. • Targeted households improve/begin earning incomes through new livelihoods enterprises. 	<ul style="list-style-type: none"> • Interaction with specialized agencies working for physically challenged people and the elderly, to understand the scope of programme. • Conduct livelihoods needs assessment of disabled, widows, the elderly etc at community level. • Prepare programme guidelines. • Provide orientation to hub managers and livelihoods technicians. • Community-level planning process with Village Tract Recovery Committees. • Beneficiary selections and preparatory meetings at community level. • Undertake transparency towards communities and implement appeal procedure. • Implement activities as per approved plan and budget. • Enter beneficiary details into database. • Monitor the programme. • Prepare project completion report. • Conduct programme review and impact assessment.
<p>Objective 4 Community natural resources are restored, enabling livelihoods and protection from natural disasters.</p>	
Expected results	Activities
<ul style="list-style-type: none"> • Natural resources are restored in affected areas. • The capacity of communities to manage natural resources is enhanced. 	<ul style="list-style-type: none"> • Discuss the scope of natural resource projects with relevant department in ministry/township. • Assessment of community needs with regard to projects on the restoration of natural resources. • Prepare programme guidelines. • Provide orientation to hub managers and livelihoods technicians. • Community-level planning process with Village Tract Recovery Committees and development of planting programme proposals. • Procurement of plant saplings and programme implementation. • Undertake transparency towards communities and implement appeal procedure. • Enter programme details into database. • Monitor the programme. • Prepare a project completion report. • Conduct a programme review and impact assessment.

Community-based Health and First Aid

Objective (medium and long-term needs)

- Ensure access to basic health care, first aid and psychosocial support by training Community-based Health and First Aid volunteers and putting a referral system in place, in coordination with the Ministry of Health, and involving the community in health, hygiene promotion (in support of the hygiene promotion activities carried out by water and sanitation sector) and sanitation activities.
- Strengthen the capacity of the MRCS to manage an integrated community-based health and First Aid-in-action approach which includes water and sanitation, and psychosocial support activities, conducted in emergencies and normal situations, in coordination with the Ministry of Health.

Expected Results	Activities planned
<p>Community mobilization Health knowledge, behavior and practices at household level is improved through health education and promotion by trained CBHFA volunteers in collaboration with Village Health Committees.</p> <p>Public Health in Emergency Potential disease pandemics/disasters surveillance system and preparedness is established and functioning</p> <p>Community Based Health Malaria/Dengue prevention CBHFA volunteers effectively manage vector control and promotion activities with community participation.</p> <p>Tuberculosis care project TB transmissions reduce and there is increased community awareness of TB and HIV in low-performance townships with high defaulter rates.</p>	<ul style="list-style-type: none"> • Knowledge, Attitude and Practice (KAP) survey and needs assessments are carried out and updated, using the new CBHFA-in-action module (<i>module 3</i>) annually. • Communities participate in Focus Group Interviews and receive household visits by trained CBHFA Red Cross volunteers at least once a month. • CBHFA Red Cross volunteers organize advocacy meetings and focus group discussions for each village. • Organize orientation sessions on community health for Village Health Committees. • Plans of Action are developed/updated, based on the five health priorities identified within each targeted community. <ul style="list-style-type: none"> • 100 Red Cross posts in 13 townships will be equipped with disease surveillance forms including household monitoring/assessment forms, 13,000 First Aid kits and supplies for referrals, and 33,000 oral rehydration salts (ORS) sachets. • Community action plans for referrals to health centres/hospitals will be established in 13 townships. • CBHFA volunteers conduct regular First Aid training including PSP activities in all affected townships, at least once a month. • Distribute 100,000 information, education and communication (IEC) materials to affected communities, in support of community health education activities. • 20 CBHFA volunteers from each township conduct immunization campaigns every first week of the month, under the supervision of Township Medical Officers. • CBHFA volunteers give health information and conduct assessments at household level. <ul style="list-style-type: none"> • Affected people from 13 townships receive health education in malaria/dengue. • The most vulnerable households in 13 townships receive 25,000 long-lasting insecticide-treated nets. • Targeted households participate in cleaning up of surroundings and hygiene awareness campaigns at least once a month. • Targeted households keep water storage containers covered all day. <ul style="list-style-type: none"> • Red Cross volunteers conduct assessments of suspected TB cases and make referrals to health facilities. • Red Cross volunteers support the registration of TB suspects and transfer sputum containers to health centres. • Red Cross volunteers receive general training in TB and as Direct Observation Treatment short course (DOTS) providers, under the supervision of Township Medical Officers.

<p>Hygiene promotion The impact of water-related health problems is reduced in prioritized areas.</p> <p>Effective hygiene practices are conducted among identified populations.</p> <p>Capacity building including development of the CBHFA-in-action approach MRCS capacity at all levels to manage emergency health care and integrated community-based health and First Aid programmes, is strengthened.</p>	<ul style="list-style-type: none"> • Red Cross volunteers conduct health education sessions related to TB. • Co-infected TB/HIV patients are referred for treatment by Red Cross volunteers. • At least 4,000 TB care sets (cereal, hygiene set), supplementary food and vitamins, are distributed to TB patients by end 2010. • Red Cross volunteers receive prevention materials from MRCS headquarters. <ul style="list-style-type: none"> • CBHFA volunteers <i>monitor</i> diarrhoea cases and other water-related diseases. • CBHFA volunteers <i>refer</i> cases of diarrhoea and other water-related diseases to health centres. • Red Cross volunteers and communities are trained in PHAST (Participatory Hygiene and Sanitation Transformation)_methodology. • Using PHAST methodology, communities identify water-related health problems. • Affected communities access safe water sources (<i>see water and sanitation table</i>). • Communities discuss community action plans and construct sanitation facilities (<i>see water and sanitation table</i>). • 30,000 hygiene materials are distributed to identified communities. <ul style="list-style-type: none"> • MRCS headquarters has in place a standard field-tested CBHFA package, include HIV peer education standard, epidemiological tool kits; water and sanitation, and climate change tools, available for national use. • The CBHFA package of tools (volunteer manual and household and community tools) is translated and customized to the Myanmar situation by the end of 2010. • Information, education and communication (IEC) materials are developed, disaggregated by type and topic, and incorporated into CBHFA trainers' household tool kits. • 5 MRCS staff are certified as CBHFA Master Facilitators. • MRCS headquarters organizes a workshop and planning meeting on the standard CBHFA-in-action approach, with key stakeholders in May 2009. • MRCS headquarters organizes the CBHFA-in-action technical working group, which is related to the CBHFA advisory group comprising Partner National Societies. • MRCS headquarters organizes technical visits to districts and/or targeted branches to support CBHFA-in-action implementation (through coaching, training, mentoring, and monitoring). • MRCS headquarters designs reporting formats and conducts field testing. • MRCS headquarters monitors and analyzes monthly/quarterly/annual reports. • 150 previously-trained CBHFA trainers will attend refresher training in disease prevention, preparedness for emergency health care, First Aid response and psychosocial support. • CBHFA focal persons from each hub will attend refresher training and continue to support local branches and volunteers in the implementation of health, first aid and psychosocial support activities. • Organize review, evaluation and planning meetings with Red Cross volunteers, branch health officers, and MRCS headquarters; and schedule an external evaluation of health and care before the completion of the operation. • Organize an additional 130 CBHFA multiplier training sessions and 5 CBHFA Training of Trainers (ToT) sessions, by the end of 2010.
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Psychosocial Support

Objective (medium and long-term needs)

- Enhance the capacity of the MRCS to respond to the psychosocial needs of the population as well as staff and volunteers.
- Address the psychosocial recovery needs of the population by providing psychosocial support activities and – if relevant – related relief items.

Expected Results	Activities planned
<ul style="list-style-type: none"> • MRCS staff, volunteers and key community representatives are trained in psychosocial support and are active in providing such support to the communities. • Vulnerable groups receive appropriate psychosocial support in coordination with other organizations. • Communities make decisions about activities that will enhance their psychosocial wellbeing. • Psychosocial activities are initiated, supported, and established at community level in affected areas. • Psychosocial support is integrated into relevant MRCS training activities and in community-based programmes where appropriate. 	<ul style="list-style-type: none"> • Psychosocial support training will be provided for a further 150 people comprising MRCS staff, volunteers and key community representatives (teachers, monks, nuns, etc) in the 13 affected townships. • Supplemental psychosocial support training will be provided for 2,000 community-based first aid volunteers as an integrated part of CBHFA . • Follow-up activities will be facilitated by the MRCS and volunteers to help cyclone survivors deal with psychological reactions and the grieving process. • Coordination with government sectors responsible for psychosocial support, local authorities, the UN, international non-governmental organizations, and local non-governmental organizations when implementing psychosocial support activities. • Community mobilization to decide on appropriate activities that will develop self-reliance and strengthen the resilience of the affected communities, in collaboration with other MRCS project activities in the area. • Distribution of community (668) and recreational (667) kits. • On-going printing and distribution of psychosocial support materials on worker care and self support. • Identification of schools and monasteries to initiate school-based psychosocial support activities, in cooperation with other organizations. • Development of PSP elements to be integrated into mainstream projects and programmes.

Water, sanitation and hygiene promotion

Objective (medium and long-term phase: Jan 2009 – Jan 2011)

To ensure that the long-term risk of waterborne and water-related diseases has been reduced through sustainable access to safe water and adequate sanitation, as well as the provision of hygiene education to 75,000 households.

Expected results

- Increased access to safe water and sanitation facilities in identified vulnerable communities
- Access to clean drinking water sources to water scarce-villages during the dry season.
- Effective hygiene practices conducted among identified populations.
- Reduced incidence of water borne diseases in priority areas

Activities planned

- Support 161 village tracts in the recovery and rehabilitation of water and sanitation infrastructure.
- Conduct Knowledge, Attitude and Practice (KAP) survey in the operational area.
- Distribute water purification tablets to 30,000 households along with the distribution of Information Education and Communication (IEC) materials and demonstrations on the proper use of water purification tablets.
- Rehabilitation and reconstruction of rainwater harvesting systems including rainwater harvesting ponds, roof top rainwater harvesting systems, Ferro-cement tanks, and reinforced concrete ring tanks in community buildings such as schools, health centres and Red Cross posts.
- Rehabilitation and reconstruction of tube wells and shallow wells.
- Water quality monitoring system at township and village tract level.
- Demonstrations and training for community volunteers in the construction of 2,000 appropriate household latrines.
- Provide full construction material support to 8,000 vulnerable households for the construction of latrines.
- Distribution of pans and pipes to 40,000 households for construction of latrines.
- Provide appropriate sanitation facilities to 200 institutions comprising schools and health centres.
- Develop Information, Education and Communication materials (IEC) on water and sanitation.
- Monitor water and sanitation activities by including field visits, and meetings with water and sanitation engineers and technicians.
- Respond to dry season water needs by redeploying Emergency Response Unit (ERU) water treatment units, along with water distributions by boat, in five townships for 40,000 households.
- Distribution of buckets along with household water treatment chemicals and water purification tablets to 7,500 households, for water treatment during the dry season.
- Conduct a Training-of-Trainers session on Participatory Hygiene and Sanitation Transformation (PHAST), in coordination with the health sector.
- In coordination with the health sector, design and implement the section on hygiene promotion for health training, targeted at affected populations and focusing on behavioural change.
- Training in and demonstrations on appropriate household water treatment technologies.
- Adaptation and printing of International Federation field manual on household water treatment and safe storage in emergencies.
- Technical visit by Partner National Societies (monitoring & technical evaluation).

Objective 2 (MRCS Capacity building)

To improve the knowledge and capacity of MRCS staff to manage a water and sanitation programme in emergency

and normal situations.	
Expected results	Activities planned
<ul style="list-style-type: none"> • Build capacity of MRCS HQ, branch and hub staff and volunteers in management including planning, implementation and monitoring of water and sanitation projects. • An emergency preparedness water and sanitation related programme is designed and implemented. • The MRCS pre-positions water purification units and emergency kits which include water treatment units, water testing kits and emergency sanitation kits, as a disaster preparedness measure. 	<ul style="list-style-type: none"> • Development of the MRCS water and sanitation unit including capacity building for MRCS HQ, branch and hub staff and volunteers, in management including planning, implementation and monitoring of water and sanitation projects (training of 50 MRCS staff and volunteers). • Conduct training in the installation of emergency water and sanitation facilities for local engineers/staff/volunteers, as part of an emergency preparedness programme. • Converting ERU equipment into Emergency Water and Sanitation kits. • Coordination with the Disaster Management Unit for pre-positioning of emergency Water and Sanitation kits in disaster-prone areas. • Hand over duties to local MRCS branches and the authorities.

Disaster Preparedness and Risk Reduction (2009 to 2011)

Objective (medium to long-term)

- To improve disaster response assistance through organizational preparedness, thereby meeting the needs of communities affected by disasters in Myanmar.
- To improve the lives of identified vulnerable communities in Myanmar by increasing community participation in risk reduction activities.

Expected Results	Activities planned
<p>Enhanced disaster response assistance through organizational preparedness, aimed at meeting the needs of identified communities.</p>	<ul style="list-style-type: none"> • Installation of telephones at most vulnerable Township Branches. • Conduct NDRT(National Disaster Response Team) training and other related training. • Conduct logistics management training. • Upgrade warehouse management capacity. • Conduct Disaster Management review to facilitate long-term DM planning. • Review and update the national multi-hazard contingency plan. • Develop disaster response plan and standard operating procedures. • Review disaster management policy. • Review pre-positioned stock lists. • Conduct water safety training. • Develop different types of information, education and communication (IEC) materials and distribute to targeted communities and schools. • Develop database/Geographical Information Systems (GIS) centre at MRCS/HQ for hazard and capacity mapping. • Promote the cross cutting components of the community safety and resilience framework in order to ensure the process of Disaster Risk Reduction (DRR) integration into the ongoing recovery operation. • Refresh the DART(Disaster Assessment and Response Team) members at States/Divisions as well as Township level, to improve assessment and response. • Advocacy, coordination and collaboration.
<p>Increased resilience of individuals and communities through the practise of risk reduction initiatives at household and community level.</p>	<p><u>Communities as entry point:</u></p> <ul style="list-style-type: none"> • Review CBDRM-manual and develop CBDRM Programme implementation guidelines. • Conduct Vulnerability and Capacity Assessment (VCA) courses • Conduct training for Community- based Disaster Risk Management Team at Township level(Facilitators course). • Mobilize community to form Community-based Disaster Risk Management Team at community level. • Conduct training for Community based Disaster Risk Management Teams at community level (Multipliers course-30 community people at each team). • VCA exercise at community level. • Distribute basic early warning equipment(hand mikes). • Distribute one stretcher to each community to strengthen community capacity to respond to disasters. • Conduct different activities for awareness generation. • Identify evacuation routes and evacuation shelters for emergencies. • Implement small scale mitigation initiatives such as tree planting,

- river/sea bank renovation/protection, at community level.
- Develop Community-based Disaster Preparedness plan.
 - Coordination and collaboration.

Schools as entry point:

- Develop School-Based Disaster Risk Reduction manual and implementation guidelines.
- Conduct SBDRR Training of Trainers for two teachers from selected schools.
- Mobilize teachers and students to form School-based Disaster Risk Management Teams.
- Conduct Training for SBDRR Teams (multipliers course).
- Vulnerability and Capacity Assessment (VCA) exercise at school level.
- Distribute early warning equipment (hand mikes) to schools.
- Mobilize school teachers and students to generate awareness at community level.