

Appeal 2004



MYANMAR

Appeal no. 01.65/2004

The International Federation's mission is to improve the lives of vulnerable people by mobilising the power of humanity. The Federation is the world's largest humanitarian organisation, and its millions of volunteers are active in over 180 countries. All international assistance to support vulnerable communities seeks to adhere to the Code of Conduct and the Humanitarian Charter and Minimum Standards in Disaster Response, according to the SPHERE Project.

This document reflects a range of programmes and activities to be implemented in 2004, and the related funding requirements. These are based upon the broader, multi-year framework of the Federation's Project Planning Process (PPP). The PPP products can be requested through the respective regional department. For further information concerning programmes or operations in this or other countries or regions, please also access the Federation website at <http://www.ifrc.org>

Programme title	2004 in CHF
Strengthening the National Society	
Health and Care	663,074
Disaster Management	352,394
Humanitarian Values	62,561
Organisational Development	263,453
Total	1,341,482¹

¹ USD 1,006,112 or EUR 858,549

National Context

The Union of Myanmar, the second largest country in Southeast Asia, has a population of over 52 million (Myanmar Government statistics, 2002) with a growth rate of around two per cent. The country has abundant natural resources but is nonetheless one of the poorest in the region with nearly one-quarter of households living below subsistence levels (UNICEF 2001/2003), ranking it 127 out of 173 countries in the 2002 UNDP Human Development Report. Myanmar has a diverse ethnic mix (135 national groups) with more than 70 per cent of inhabitants living in rural areas, although over the last decade the population is becoming increasingly mobile. Burmese is the official language but with over one hundred languages and dialects spoken throughout the country, this poses a particular challenge to humanitarian organisations such as the Myanmar Red Cross Society (MRCS) seeking to reach the most vulnerable people.

The country is governed by the State Peace and Development Council (SPDC), which took power in 1988. In 1998, Myanmar was admitted to the Association of South East Asian Nations (ASEAN), cementing political and economic ties with the group, which believes constructive engagement a better form of diplomacy than sanctions. In October 2000, direct dialogue was established between the Myanmar government and the opposition National League for Democracy (NLD), working towards national reconciliation and a democratisation process. In May 2002, the leader of the NLD was released from house arrest. Subsequent discussions with national and international organisations, including the ICRC, travel within the country, and meetings with visiting representatives from foreign governments, signaled the development of a more open attitude. International media coverage of Myanmar and interest in internal affairs increased.

However, a major setback in the reconciliation process occurred at the end of May 2003 when violent clashes erupted between Government and NLD supporters in northern Myanmar, during a tour by senior NLD leaders. A number of deaths occurred and the leader and senior members of the NLD were put under detention. The incident heightened the suspicion and cynicism of the international community towards Myanmar, from governments as well as actual and potential donors. In August 2003, sanctions were imposed on Myanmar by the United States, causing the shut down of a number of commercial enterprises particularly in the clothing industry, and affecting large numbers of people.

A reshuffle of the SPDC and the Government, and the appointment of a new prime minister at the end of August 2003 signaled some changes ahead. A seven-step plan for the 'democratisation of Myanmar' has been outlined citing the drafting of a new constitution by the reconvened National Convention as the first priority.

During the first half of 2003, the economic situation in Myanmar deteriorated with the percentage of people living on or below the poverty line increasing. With the banking system in crisis, the exchange rate of the foreign exchange currency (FEC) against the kyat declined significantly with fluctuations almost daily. The FEC also weakened markedly compared to the dollar to kyat rate. At the same time food prices, including staples, increased with people finding it difficult to buy even basic goods. Since August 2003, visitors to Myanmar have not been required to change US\$ to FEC, giving rise to speculation that the FEC will cease to exist as a viable currency.

In a United Nations paper 'Review of the Humanitarian Issues in Myanmar', the following topics are listed as key areas for assistance: growth with equity, food security and natural resources management, geographical disparities, illicit drugs, HIV/AIDS, malaria and tuberculosis, refugees and internally displaced persons (IDPs), trafficking in women and children, landmines, maternal and child mortality, nutrition, safe drinking water and sanitation, education, and children in need of special protection and governance.

Red Cross Red Crescent Priorities

National society strategy and programme priorities

The MRCS is in the process of re-examining its structure, capacity and programmes and has committed itself to becoming a well-functioning national society. It is the largest humanitarian organisation in Myanmar, with an extensive branch network in all 324 townships with some 300,000 volunteers and members. However, at present branches do not have paid staff and most active volunteers lack adequate direction, training and support.

As auxiliary to the humanitarian services of the government, and working closely with UN agencies and non-governmental organisations (NGOs), MRCS seeks to play a stronger role in disaster management as well as in health and care programmes throughout the country. Additionally, the society recognises the need to work closely

with the Federation, ICRC and other Red Cross partners to strengthen its branch network, further motivate and train volunteers, and consolidate its actions at the township and community level. The first nation-wide branch survey was undertaken in 2003 and resulted not only in a database for MRCS, an analysis of findings and a 'mapping' exercise of the Red Cross in Myanmar, but also allowed for increased dialogue between all levels of the society.

During the MRCS General Assembly in 2002, the following 'priority tasks' were defined for implementation in 2002-2005:

1. In accordance with the policy guidelines and strategic direction laid down by MRCS, undertake continuing efforts in building up its capacity and human resources and set up relevant divisions in the society with the assistance of the Federation and the ICRC. Prepare project proposals in priority programme areas and implement these projects efficiently.
2. Understand the emerging changes in key strategic areas of the Federation's *Strategy 2010* and develop programmes in health and care, and disaster preparedness which are consistent with the society's health strategic direction 2002-2006.
3. Recognising the importance of a strong branch network throughout Myanmar, prepare a branch development strategy for raising the level of competency and skills of volunteers to effectively carry out promotional and preventive activities to improve the lives of vulnerable people.
4. Identifying locally vulnerable groups/communities, work in close cooperation with them in the design and implementation of programmes which will help them to reduce their vulnerability by improving their capacity and situation.
5. Motivating and encouraging the state/division Red Cross supervisory committees in their work, provide assistance to them in the development of future plans relevant to their respective areas in the implementation of humanitarian activities.
6. Accepting the key role of communications in today's competitive world, take steps to enhance the image of MRCS through increased participation in national and international Red Cross Red Crescent events, and find innovative ways to disseminate information on the work of the MRCS.

Key programme areas for strengthening MRCS and its service programmes – and for which assistance is sought from partners – is further elaborated under each programme.

Movement context

The Federation first established a delegation in Myanmar in 1993. Since then, working closely with and strongly supported by the ICRC and a few key partner national societies (PNS), the Federation has provided direct technical and financial assistance to MRCS in both programming and capacity building. In 2004, continued emphasis will be placed on capacity building of MRCS, at both headquarters and branch levels, development of community-based programmes, communications and resource organisation, and effective coordination between MRCS, the Federation, ICRC, other Red Cross Red Crescent partners and external donors.

In the widest context, and with a clear view to the future, both the Federation and ICRC delegations are in discussion with MRCS regarding the best way to pursue revision of the national Red Cross law, and create meaningful dialogue with the Government on the role and responsibilities of the society.

In 2002, MRCS together with the Federation delegation established a strategic health plan and began discussions on the development of a comprehensive strategic national plan. During 2003, through a series of strategic planning meetings between MRCS leadership and senior management as well as the Federation and ICRC delegations, work began on a national five-year plan, slated for completion by early 2004. At the same time a cooperation agreement strategy (CAS) will be outlined in order to clearly define the roles of MRCS's existing and future partners.

While MRCS still has a limited capacity to undertake effective management of such partnerships, it continues to rely on coordination support from the Federation delegation, and through the developing relationships with partners. Major partners for the MRCS working through the delegation are the Red Cross societies of Australia, Finland, Japan, New Zealand and the United Kingdom. ICRC also provides funding directly to MRCS as well as through the Federation.

<i>Red Cross Partners – Expected Activities in 2004</i>	
Australia	Community-based health (Keng Tung), HIV/AIDS, delegate support
Finland	Community-based health/disaster preparedness, capacity building, delegate support
Japan	Community-based health/disaster preparedness, HIV/AIDS, delegate support
New Zealand	Overall management, programme and delegate support
United Kingdom	Branch capacity building
ICRC	Dissemination of international humanitarian law, branch capacity building
Interest in supporting MRCS in 2004 has also been expressed by the Danish Red Cross and a consortium of three national societies from Britain, Germany and Sweden	

Strengthening the National Society

In 2004, the Federation will continue to contribute to the development of a well-functioning MRCS with competent structures and adequate resources, capable of generating and implementing effective, responsive and focused programmes.

In line with the main precepts of the Federation's *Strategy 2010*, the key areas of focus for the Federation in 2004 are:

- Further strengthening the structures and systems of MRCS at headquarters and branch levels in order to enhance capacity to deliver services and advocate on behalf of vulnerable people;
- Raising the profile and respect of MRCS within the country, and increasing the effectiveness of humanitarian advocacy and international representation;
- Ensuring closer cooperation and dialogue with the membership, ICRC and other partners, towards the establishment of stronger strategic partnerships with MRCS.

The Federation secretariat will contribute to the development of a well-functioning MRCS with competent structures and adequate resources at national, state, divisional and township levels, capable of generating and implementing effective, responsive and focused programmes. In summary, the Federation's priority programmes for this appeal are targeted as follows:

- **Health and Care:** the Federation will support MRCS in identifying, establishing and implementing health and care related programmes and activities that are focused, effective and relevant to the prevailing needs of vulnerable people in Myanmar.
- **Disaster Management:** the Federation will provide organisational guidance and technical support to assist MRCS in lessening the impact of disasters on the most vulnerable people in Myanmar.
- **Humanitarian Values:** the Federation will work with the MRCS to ensure the mandate and role of the society, as well as the Red Cross Red Crescent Movement's Fundamental Principles and humanitarian values are well understood and supported within the society, by public services and the wider population in Myanmar.
- **Organisational Development:** the Federation will provide assistance to MRCS in its development as a strong, relevant and well-functioning society, with particular emphasis on reinforcing the newly emerging functions of governance and management, as well as on strengthening the network of branches throughout the country.
- **Implementation and Management:** through the Federation's ongoing coordination role, work will continue on the preparation of a strategic plan, and on the subsequent development of a CAS. The MRCS capacity will be further enhanced, resulting in the increased impact of its programmes and more efficient and effective use of the combined knowledge, experience and resources of the Federation, ICRC and other partners. The Federation will also seek to raise further the Red Cross Red Crescent profile in Myanmar, thus increasing the MRCS influence on policy making and programme delivery, and ensuring that it remains not only the biggest, but also the most efficient and respected humanitarian organisation in the country.

1. Health and Care

Background

The main health issues in Myanmar are locally endemic communicable diseases such as malaria, tuberculosis, diarrhoea, dysentery, dengue haemorrhagic fever and emerging diseases like HIV/AIDS. Resources for health are rather limited especially in remote and internal conflict areas, compounded by poor communications, transportation

and poverty. There exists deficiency in equitable distribution of health resources and availability and accessibility to health services. The present free health service, coupled with a cost-sharing system, has imposed a burden on the public sector and led to a mismatch with the escalating cost of health care.

While its social indicators are improving, Myanmar's overall performance is below the Southeast Asian average with a life expectancy of 61 years, an infant mortality rate of 71 per 1,000 live births and an adult literacy rate of 85 per cent (Health in Myanmar 2003/UNDP Human Development Report 2002).

The government's national health policy states that it seeks to strengthen collaboration with other countries for national health development as well as augment cooperative joint ventures, and the role of the private sector and NGOs in the delivery of health care. It has adopted a primary health care approach, with the focus on malaria, tuberculosis, HIV/AIDS among others.

The MRCS works on a vision of alleviating human suffering through promoting health, preventing disease, and rendering help to those in distress. With its extensive network of branches and volunteers with intimate knowledge about local conditions, MRCS is well placed to provide community-based health promotion and disease prevention programmes with maximum impact. Given that local NGOs are scarce in Myanmar, and international organisations often confined to limited geographical areas in the country, MRCS has good opportunity for expanding its services.

In 2002 MRCS, with assistance from the Federation and sister national societies from the region, conducted a health review with a view to further developing health activities throughout the country. The review team provided a series of recommendations, including developing a strategic health plan initially focused on enhancing the society's organisational capacity. The resulting strategic health direction 2002-2006 is being implemented according to priority areas identified.

With the appointment of a head to the MRCS health department in mid-2002 and two Federation health delegates in place from end-2002, the planning, capacity and outreach of the health team has improved. Subsequent recruitment of a deputy head and two field officers, as well as a head of training, has seen the overall health capacity considerably strengthened.

Donor support to the health and care programme will enhance capacity development of MRCS, enabling it to undertake targeted health programmes in efficient and effective ways, thereby promoting the health of vulnerable communities.

Overall Goal

The capacity of the MRCS health division to plan and manage health programmes and projects is strengthened.

Programme Objective

Through its nation-wide network of volunteers, the MRCS promotes a healthier and safer environment for the people of Myanmar giving priority to the most vulnerable communities and individuals

Expected Results

The programme is based on six key projects that will produce the following results:

1. Human, technical and material resources support the effective delivery of health programmes at national and local levels.
2. Improvement in community capacity to respond to health issues.
3. Stronger overall capacity at branch level to design and manage health projects.
4. Standardised and updated curriculum and training modules in community-based first aid assist communities to acquire knowledge and skills in first aid.
5. Through peer education programmes, young people are given clear information and increasingly understand and practice healthy sexual behaviour.
6. Well-informed blood donors able to assist in the provision of an adequate blood supply.

Expected Results	Indicators	Risks/Assumptions	Activities
Project One: Capacity building in health			
Human, technical and material resources support effective delivery of health programmes	Health division structure reflects HR needs; number of staff trained; well equipped health division	Financial support meets planning needs; qualified candidates apply for positions	Develop structure of the health division; recruit, train and assess performance of health staff
Project Two: Community-based health (including malaria, tuberculosis, water and sanitation, HIV/AIDS)			
Improved branch capacity to manage health project and community capacity to respond to health issues	Capacity building and mobilisation of RCVs*; target communities demonstrate increased knowledge/skills, and behavioural changes	Security, economic and political situation remains stable	Training in community-based first aid (CBFA) and peer education; chemical treatment and distribution of bed nets to poor households; diagnosis, treatment of tuberculosis
Project Three: Keng Tung pilot project for branch capacity building (via community-based health)			
MRCS learns from pilot project how to lead and manage capacity building and health programmes at local level	Keng Tung branch are effective in community health delivery; data shows improved health status in communities	Donor support maintained; branch leadership, staff and volunteers motivated and committed	Train staff and volunteers; community involvement; monitor and evaluate pilot project; identify areas for expansion of the model
Project Four: Strengthening first aid/CBFA training			
Standardised/updated curriculum and modules; community acquires knowledge and skills in first aid	First aid kits, training curriculum, materials; number of RCVs and community members trained as CBFA trainers	Community members willing to participate	Develop first aid kits, training materials and curriculum; conduct CBFA multiplier and 'training of trainers' courses
Project Five: Reproductive health			
Increased practice of healthy sexual behaviour by youth	Increased knowledge of reproductive health issues among youth; capacity of youth peer educators to provide information, counselling and referrals	Sensitivity surrounding reproductive health issues reduced with services available and accessible	Develop education material and run training and peer education sessions; procure and distribute condoms
Project Six: Voluntary blood donor recruitment			
Well-informed blood donors able to assist in the provision of an adequate blood supply.	Number of trained blood donor recruiters; voluntary non-remunerated blood donors increased and replacement blood donor decreased	People understand the importance of adequate and safe blood supply	Health education messages fully integrated into the blood donor recruitment process

* Red Cross volunteers

Monitoring and Evaluation

The MRCS health division manages all projects and conducts regular monitoring of project implementation with health delegates. The Federation will also follow up and report on activities through a minimum of four quarterly programme updates.

2. Disaster Management

Background

Myanmar's vulnerability to disasters is often underestimated due to government caution on the issue, misplaced optimism about local capacity to cope with seasonal disasters and, most importantly, the lack of reliable

information, often from remote rural areas most at risk. As the only humanitarian organisation with potential to fill the nation-wide gap between the needs of vulnerable communities and the government's constrained ability to address these needs, MRCS has taken significant steps to enhance its capacity in disaster management.

The MRCS disaster preparedness and response division has a full-time head and six staff. Since 2001 it has successfully managed three major disaster response operations, during which the need to improve coordination with authorities and other agencies was evident. The lack of independent information sources and poor information flow between branches and headquarters also delayed the operations.

In 2002, the disaster assessment and response team (DART) was launched to improve the society's capacity for gathering, analysing and acting on accurate and timely information at the time of disasters. Furthermore, in 2003, the society produced a disaster management policy to foster understanding of the Red Cross role in disaster management. Together with the Federation, the MRCS held meetings and publicity events for various stakeholders, including government agencies, diplomatic missions, UN agencies and NGOs, to advocate for an effective national disaster coordination mechanism.

To encourage local disaster mitigation efforts, a community-based disaster preparedness (CBDP) pilot project was initiated in four flood-prone communities in Ayeyarwaddy division, also in 2002. The assessment and planning phase was followed by first aid courses for community members, and materials and equipment provided for the construction of guardhouses on dykes, to monitor river levels. MRCS is preparing a curriculum for community-level disaster awareness and mitigation to be test-run in pilot villages. It is also in the process of developing CBDP and CBFA projects into an integrated training programme for local communities, to address their need for risk reduction in a more systematic manner.

The MRCS recognises its mandate to play a more active role in the nascent national disaster management system and is committed to step up efforts to improve its capacity. The Federation will seek to assist MRCS to: maintain the momentum for organisational change conducive to effective and sustainable management of the society's disaster management programme; strengthen the disaster response mechanism; and develop the community-based approach for disaster risk reduction.

Overall Goal

The risk and effects of disasters are reduced and the resilience of the most vulnerable communities and people in Myanmar enhanced.

Programme Objective

The MRCS capacity in disaster management is strengthened, based on its network of volunteers and branch structures, and in strategic partnership with the government and other agencies.

Expected Results

The programme is based on four key projects that will have the following results:

1. MRCS is acknowledged as a leading organisation in disaster management with a recognised role in national coordination systems.
2. MRCS has an adequate response mechanism in place to fulfil its mandate in assisting the most vulnerable people in times of disaster, in an efficient manner.
3. MRCS takes advantage of its nation-wide grassroots structure to promote community resilience to disasters.
4. MRCS plays an active role within a local, regional and global network in disaster management.

Expected Results	Indicators	Risks/Assumptions	Activities
Project One: Capacity building towards a well-prepared national society			
MRCS roles/strategies in DM understood by key stakeholders	Good coordination with the authorities and other agencies	The authorities and MRCS regularly engage in dialogue	Draft five-year DM strategic plan; organise advocacy event
DM activities undertaken in effective and timely manner	Quality of quarterly plans and activity reports	Partners understand the need to invest for management capacity	Provide salary support and equipment for DM division
Project Two: Strengthening national disaster response mechanism			

Heightened readiness of MRCS to respond to disasters	Staff/volunteers have a clear understanding of response procedures	MRCS committed to streamline decision making in emergencies	Develop and distribute contingency plans for flood and fire disasters
Improved data collection and timely processing of disaster information	More disaster reports from branches compared with previous years	Branches ready to take more independent and professional approach	Organise DART training courses; support multiplier courses
A network of MRCS warehouses is functioning well	Level of relief stock in warehouses and stock management practices	Proper understanding of accountability within branch leadership	Replenish MRCS warehouses; run logistics training
Project Three: Participatory learning and action for resilient communities			
Effective management structure for community-based training in place	Quality of planning, coordination, follow-up support and reporting	Involvement of different levels of MRCS branch structure	Conduct CBDP/first aid pilot project review; train field coordinators
Branch capacity developed to facilitate community-based training and activities	Number of staff/ volunteers trained at branches	Good coordination between DM, health and training divisions	Run CBDP/first aid training workshops; support multiplier courses
Village people better organised and prepared for hazard events	Number of micro-projects implemented and their relevance	Branches have proper human resources and management capacity	Support villages to identify and implement risk reduction activities
Project Four: Engagement in regional disaster management network			
MRCS DM knowledge is broadened	Staff attend regional events	Necessary permission provided to MRCS	Staff participate in regional/global DM events

Monitoring and Evaluation

The MRCS disaster management division manages all projects and conducts regular monitoring of project implementation with the Federation. The Federation will also follow up and report on activities through a minimum of four quarterly programme updates.

3. Humanitarian Values

Background

Given the present context of Myanmar, there is considerable scope to raise awareness of humanitarian values as well as of international humanitarian law (IHL) and to strengthen the visibility and profile of the MRCS. A key element of the information and dissemination programme will be focussed internally, with orientation and training courses designed to target the membership at all levels, and increase motivation, commitment and understanding of the Red Cross mission and responsibilities.

With the restructuring of society headquarters, and establishment and staffing of a communications department in 2002, MRCS has committed itself to developing its capacity within the communications and public relations sectors. The department is currently finalising a national communications plan and intends to become more active in providing information and dissemination to key target groups. It will also produce materials covering the work of the Movement and MRCS, as well as Red Cross Red Crescent principles.

In 2003, the society organised a number of successful events including World Red Cross Red Crescent Day, and the launch of the *World Disasters Report*. Plans are well advanced for events on World First Aid Day and World AIDS Day. Further ideas to increase MRCS visibility through such public and community events in the coming years are being developed. The ICRC provides support for the society in the dissemination of IHL, including materials, and will continue to work closely with the MRCS and the Federation as the communications programme gains strength. A number of information and promotional items, such as calendars, pens, brochures and posters are being developed and funded jointly by ICRC, the Federation and MRCS.

The communications department does, however, continue to face challenges: computer hardware and e-mail access remain an issue; staff skills are limited; and training for the small number of staff in subjects such as public relations, IHL, marketing and advertising is required. Specific training in communications and advocacy will also be sought from within the region and attention given to better link these activities with core programme areas such as health and disaster management. This will help ensure that a multi-dimensional approach is taken whereby humanitarian values are incorporated into each programme and the MRCS volunteer and youth network are fully utilised.

Overall Goal

Increased visibility, credibility and support for the humanitarian programmes and activities of the Red Cross in Myanmar.

Programme Objective

Increased visibility, awareness and application of humanitarian values, the fundamental principles and key national and global advocacy themes in Myanmar, with enhanced and clear roles and responsibilities with regard to the ongoing programmes of the MRCS.

Expected Results

The programme is based on three key projects that will have the following results:

1. Strengthened capacity of MRCS to disseminate and publicise the Movement's role and programmes, support for specific communication needs of the health, training and DM divisions.
2. Improved media relations, ensuring high-level media coverage of ongoing programmes, projects and events of the MRCS with particular emphasis on the work of volunteers at community level, and with timely reporting on MRCS disaster response operations.
3. Increased understanding of the role and responsibilities of MRCS and the Movement in Myanmar by key external stakeholders.

Expected Results	Indicators	Risks/Assumptions	Activities
Project One: A strong and well-developed communications capacity of the Myanmar Red Cross			
MRCS communications strategy adopted and implemented	Standard key messages incorporated in all MRCS communications; improved information and promotional materials	Funding is secured for salary support and expansion of programmes	Communication strategy printed and distributed; services provided to health and DM divisions; major events organised
Communications staff and volunteers trained and active throughout the country	Increased knowledge, skills, capacity of communicators; better reports; education/information materials widely disseminated	Improved equipment, training to increase technical skills and capacity is supported	Training of staff and volunteers; printing and distribution of education/information materials; special national events managed
Project Two: Expanded strategic links with local and international media			
Increased public understanding of the Red Cross role in Myanmar; improved image and identity of MRCS	Recruitment of new, and motivation of existing volunteers and members; increased financial support; additional requests for Red Cross interviews and stories	Interest of the local/international press; perceived changes in the overall context within which MRCS works	Communications and media training; branch communicators identified and trained; key advocacy messages presented
Sustained and high profile media coverage for MRCS activities and disaster operations	Increased media awareness of Red Cross work and values; improved coverage of Red Cross volunteers and programmes	Better liaison and relationship building with key media; MRCS spokespersons well prepared	Preparation of timely press releases on national/international Red Cross events and actions; spokespersons trained
Project Three: Heightened awareness of MRCS and Movement activities among key stakeholders			
Improved documentation delivered to stakeholders; Increased support for MRCS development and programmes	Number and quality of reports increased; regular contact maintained with donors; partner visits well planned and meaningful	No significant deterioration in international and domestic environment	Well presented annual report prepared and widely circulated; distribute regular information, reports, news articles, photos
MRCS regularly taking part in national and international forums and debates	Improved capacity to present MRCS programmes and profile to international community	Coordination and support from Federation and ICRC delegations	Workshops on key Red Cross and advocacy issues; preparation of position papers

Monitoring and Evaluation

The MRCS communications division manages all projects and conducts regular monitoring of project implementation with other MRCS divisions and Federation delegates. The Federation will also follow-up and report on activities through a minimum of four quarterly programme updates.

4. Organisational Development

Background and achievements/lessons to date

In light of the high level of uncertainty facing Myanmar, and the possible dramatic increase in humanitarian needs in the foreseeable future, MRCS recognises the needs to re-examine and overhaul its structure, systems and programmes.

As the first step in narrowing the wide organisational gaps between different levels of the society's structure, MRCS conducted a branch survey in 2002-2003 with support from the Federation and the ICRC. Preliminary analysis of the first phase of the survey identified a range of issues that must be addressed in subsequent branch development activities. This included the need to clarify and strengthen the MRCS identity and image, its limited financial and material resources, and the ineffective governance and management structure of branches.

The reorganisation of headquarters that started in 2001 must be stepped up so that it can better guide and serve branches. With the re-establishment of the finance and administration and training divisions, together with the ICRC-supported projects integrated into divisions, reorganisation of headquarters has entered its second phase. Since the piecemeal approach so far has led to functional gaps and overlaps, inefficient internal coordination, and growing friction and uncertainty among the staff, success depends on MRCS leadership presenting a clear organisational structure in a persuasive manner.

The MRCS five-year strategic plan, to be finalised in early 2004 and incorporating the branch development strategy, will help the society to work on a long-term basis. Among the most important issues to be addressed in the strategic plan will be the sustainability of the current level of salary support for MRCS staff, as dependence on external funding for the operational and overhead budget has rapidly increased of late. Recognising that progress in financial resource development can only begin once financial accountability has been firmly established the society started a project to develop transparent, accountable financial management systems, starting at headquarters.

The organisational development (OD) process at MRCS is approaching a stage where effective dissemination of the society's vision and mission and the Movement principles will be essential for further progress. Support from the Government will be necessary if there is to be separation between governance and management and revision of the society's legal base. The Federation must help the MRCS governance and management ride out the critical transitional period with strategic steps, a clear timeframe, and a broad-based consensus, so that the society can prepare itself to play a much larger role in the country, as an international, national and community organisation.

Overall Goal

MRCS ability to address the humanitarian needs of the most vulnerable in Myanmar is strengthened.

Programme Objective

MRCS has a better foundation and the capacity to run volunteer-based services and programmes competently, and moves toward becoming a well-functioning national society.

Expected Results

The programme is based on three key projects that will have the following results:

1. MRCS becomes a more credible and legitimate organisation that can mobilise wider support at international, national and local levels.
2. MRCS becomes a more viable organisation that can continuously develop itself in a sustainable and accountable way.
3. MRCS becomes a more effective organisation that can make a difference in the lives of vulnerable people in a changing environment.

Expected Results	Indicators	Risks/Assumptions	Activities
Project One: Re-establishing the MRCS foundation			
MRCS strategic plan supported by key stakeholders	Increased level of partners' understanding and support for MRCS	No significant change in international and domestic environment	Finalise a five-year strategic plan; coordinate CAS process

High level consensus and need to revise Red Cross Act; MRCS ready to draft its constitution	Government better understands the Movement and legal base issues	MRCS accepts guidance of Federation and ICRC	Lobby the government for revision of the Red Cross Act
Project Two: Augmenting governance and management capacity			
MRCS has efficient structure and clear lines of authority	Improved decision making processes and programme management	MRCS governance ready to give more responsibilities to management	Develop organogram and terms of reference (ToR) for MRCS governance and management
Enhanced competence in planning, monitoring evaluation, and reporting	Programme management practice based on project planning process (PPP)	Commitment for quality among headquarters management and staff	Run training for staff at headquarters in PPP
MRCS can demonstrate a high level of integrity and accountability for financial management	Revised regulations and systems in place for budgeting, accounting, and procurement	Commitment of MRCS leadership to improve financial accountability and sustainability	Complete external audit; review existing financial regulations
Project Three: Refocusing MRCS performance on the lives of vulnerable people			
Branch development activities undertaken following agreed strategy	Improved coordination and communication between headquarters and branches	Funding is secured; willingness to revise the composition of branch statutory bodies	Complete branch survey and organise workshops to formulate branch development strategy
Improved skills of branch leadership in volunteer management	Increase in the number of volunteers and the ratio of active volunteers	Volunteer management recognised as strategic priority by branch leaders	Conduct training for branch leadership in volunteer management

Monitoring and Evaluation

The Federation will support overall management and monitoring of projects, while ensuring MRCS has the lead in planning and implementation as much as possible. A quarterly narrative and financial reporting mechanism will be established to ensure timely implementation of the projects and adherence to the plan.

5. Representation, Management and Implementation

Coordination

With a strengthened Federation delegation now in place, the main priority of the delegation is to increase donor interest and support for MRCS. Furthermore, together with ICRC, the Federation will ensure a well-orchestrated strategy for the managed development of the society from within, with participation and support from partners. The Federation is making every effort to ensure the society is fully involved in all discussions and decisions relating to donor support, that partners involved in multilateral and coordinated bilateral projects work in accordance with MRCS priorities and planning, and are provided appropriate services by the delegation.

Coordination meetings are held each quarter in addition to regular informal meetings between the Federation and ICRC, as well as with representatives of partner societies on specific issues during their visits to Myanmar. In 2003, particular attention has been paid by the delegation to provide increased feedback, information, and visits to partner societies to enhance cooperation and understanding. Priorities for 2004 are to finalise the branch survey report and MRCS five-year strategic plan, and develop the CAS in coordination with partner societies. The Federation fully recognises its responsibility to play a key role in: strengthening cooperation and coordination between all partners; providing guidance for MRCS; supporting the planning process; facilitating headquarters and branch capacity building; attracting resources; and promoting the separation of governance and management as part of the focus on organisational and resource development.

Representation

Although the delegation has consistently advocated Movement principles and values in international and national fora, there is an urgent need to step up these activities both in the international community and among the public and Myanmar authorities. During 2004, the Federation will increase its participation and advocacy in international fora, in close interaction with ICRC - a collaboration that will enable the two organisations and MRCS to present a unified image of the Movement in Myanmar. Together with MRCS and the ICRC, the Federation will also target heads of national government ministries and local heads of public administration, as well as locally-based foreign embassies and NGOs. Discussions and information about Red Cross activities are aimed at increasing the

government understanding and acceptance of humanitarian values, and re-examining and clarifying the roles and responsibility of MRCS at all levels, from states/divisions to townships and communities.

The delegation, with support from the MRCS and ICRC will continue negotiations for a status agreement with the government, which will facilitate the Federation's interaction with the government and provide a basis for future coordination and servicing of donor support and interests.

Delegation Management

The momentum begun by the strengthening of the delegation from mid-2002, and the increased capacity now available both for support and guidance to MRCS and services to partner societies has shown that with a small but active country delegation real progress can be achieved. The Federation presently has four expatriate delegates, six nationally employed officers and six local support staff with an equitable gender balance taken into account in recruitment. During 2003, all delegates and officers benefited from at least one training programme outside Myanmar and attended local courses wherever available. The entire delegation participated in an off-site retreat focussing on team building exercises and objective setting. The delegation has welcomed the support of colleagues from the regional delegation in Bangkok mainly in programme design and facilitating training courses for MRCS. A consultant, recruited from Nepal Red Cross through the regional delegation, worked with the MRCS and the delegation on the first phase of the society's branch survey for six months, from end 2002 through the beginning of 2003.

The Federation in Myanmar, working closely with the MRCS, considers it is well placed, and increasingly knowledgeable about the national and local realities. It has the responsibility to:

- support the overall OD and capacity building of the MRCS at national and local levels.
- seek resources for MRCS to design and implement appropriate community-based programmes to meet the needs of the most vulnerable individuals and communities;
- assist the MRCS in profiling itself, presenting and promoting its capacity and programmes to actual and potential partners;
- provide timely and appropriate services to partner societies in terms of information, planning, feedback, evaluation and reporting;
- ensure respect, coordination and cooperation between MRCS and its actual and potential partners.

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BUDGET 2004

PROGRAMME BUDGETS SUMMARY

Appeal no.: 01.65/2004

Name: Myanmar

PROGRAMME:

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	Emergency	Total
	CHF	CHF	CHF	CHF	CHF	CHF	CHF
Shelter & construction	4,090	13,650	0	0	0	0	17,740
Clothing & textiles	13,650	30,030	0	0	0	0	43,680
Food	0	0	0	0	0	0	0
Seeds & plants	0	0	0	0	0	0	0
Water & Sanitation	0	0	0	0	0	0	0
Medical & first aid	8,461	0	0	0	0	0	8,461
Teaching materials	0	0	0	0	0	0	0
Utensils & tools	0	0	0	0	0	0	0
Other relief supplies	0	0	0	0	0	0	0
SUPPLIES	26,201	43,680	0	0	0	0	69,881
Land & Buildings	0	0	0	0	0	0	0
Vehicles	6,468	3,432	660	2,640	0	0	13,200
Computers & telecom	5,830	2,500	1,365	4,770	0	0	14,464
Medical equipment	0	0	0	0	0	0	0
Other capital exp.	0	0	0	0	0	0	0
CAPITAL EXPENSES	12,298	5,932	2,025	7,410	0	0	27,664
Warehouse & Distribution	5,276	0	0	0	0	0	5,275
Transport & Vehicules	4,508	7,506	112	3,532	0	0	15,657
TRANSPORT & STORAGE	9,784	7,506	112	3,532	0	0	20,932
Programme Support	43,100	22,906	4,066	17,124	0	0	87,196
PROGRAMME SUPPORT	43,100	22,906	4,066	17,124	0	0	87,196
Personnel-delegates	230,998	137,639	8,360	68,711	0	0	445,708
Personnel-national staff	94,148	44,838	16,275	60,350	0	0	215,611
Consultants	3,242	0	0	6,830	0	0	10,072
PERSONNEL	328,388	182,477	24,635	135,891	0	0	671,391
W/shops & Training	139,615	60,720	9,928	57,250	0	0	267,512
WORKSHOPS & TRAINING	139,615	60,720	9,928	57,250	0	0	267,512
Travel & related expenses	29,788	7,167	8,414	21,131	0	0	66,500
Information	51,355	4,146	9,050	4,914	0	0	69,464
Other General costs	22,548	17,860	4,331	16,201	0	0	60,939
GENERAL EXPENSES	103,691	29,173	21,795	42,246	0	0	196,903
TOTAL BUDGET:	663,077	352,394	62,561	263,453	0	0	1,341,482