

Annual report



International Federation
of Red Cross and Red Crescent Societies

India

Appeal No. MAAIN001

This report covers the period 01 January 2009 to 31 December 2009.

24 April 2010



A community orientation on the disaster risk reduction project in Barshi. Photo: Indian Red Cross Society

In brief

Programme purpose: The purpose of disaster management is to reduce the number of deaths, injuries and impact from disasters.

The overall purpose of the health and care programme is to improve the Indian Red Cross Society's (IRCS) capacity in planning, to raise awareness on the preventive health needs and by responding to public health emergencies, including HIV/AIDS, through prevention, care and support by strengthening the Red Cross volunteer (RCV) network.

IRCS has improved capacity to provide effective services to reduce suffering of the vulnerable people by integrating it with disaster management, health and other programmes of the national society, and working with International Committee of Red Cross (ICRC) and partner national societies to achieve Global Agenda Goal 3.

To enhance understanding of the Red Cross Red Crescent principles and values in the national society and improve its integration in disaster management, health and organizational development programmes.

Programme(s) summary: The disaster management programme has witnessed significant increase in the rate of implementation during 2009. The programme activities were focusing on the community awareness, strengthening of the national disaster response mechanism, capacity building of the local branches and networking with national and international non-governmental organizations. The investment has been done over the years in order to build the capacity of IRCS and to have strong national disaster response mechanism. The floods in Andhra Pradesh and Karnataka in 2009 gave IRCS the opportunity to see the impact of the investment done on the development of national disaster response mechanism. Though the flood relief operation was quite successful with many achievements, the further needs to strengthen the national disaster preparedness and response mechanism have also been identified.

The health and care programme saw the initiation of two new projects: the human pandemic preparedness

(H2P) programme and India tuberculosis project. Besides the initiation of these two new projects, significant progress was made under the Red Cross Volunteers initiative. The HIV programme was implemented as planned with a good implementation rate. The Swedish Red Cross-funded HIV project came to an end in December 2009 and in early 2010 an end-term evaluation was carried out by the Swedish Red Cross for the regional HIV programmes. The evaluation will include the programme run by IRCS. The Hong Kong Red Cross supported HIV programme is being implemented at a good pace and will continue up to December 2010, with a possible extension.

The Red Cross Red Crescent principles and values programme continues to be promoted and incorporated into all the national society programmes, despite the availability of a small direct funding. The basics about Red Cross was printed and disseminated by the support of ICRC.

Financial situation: The total 2009 budget was CHF 2,605,457 (USD 2,425,609 or EUR 1,814,690) based on the programmes' workplan and funding situation. Coverage is 142 per cent while expenditure from January to December 2009 is 69 per cent of the total 2009 budget.

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

No. of people we help: The disaster management programme has directly benefitted 125,000 people, while indirectly it has benefited over 1.4 million people. The health and care programme directly and indirectly reached around 142,00 people.

People reached directly under organisational development are 6,000, while approximately 240,000 people are indirectly reached across the various state branches and the IRCS national headquarters.

The people reached across the various state branches and the IRCS national headquarters are the same as in the programmes as humanitarian values is integrated in programmes. People reached directly under humanitarian values are 500, through the youth camps and humanitarian values workshop.

Our partners: British Red Cross, Barclays Bank, Danish Red Cross/Danish government, Hong Kong branch of the Red Cross Society of China, Japanese Red Cross, Netherlands Red Cross/Netherlands government, Norwegian Red Cross/Norwegian government, Swedish Red Cross/Swedish government, OPEC and USAID contributed towards the 2009 annual appeal.

Ministry of Health and Family Welfare, National AIDS Control Organization of India, UN agencies, World Health Organization and USAID are the main partners of the IRCS outside the Red Cross/Red Crescent Movement.

The IRCS also has a number of Movement partners in country, such as the American Red Cross, British Red Cross, Canadian Red Cross, Danish Red Cross, German Red Cross, Italian Red Cross, Spanish Red Cross, and ICRC.

On behalf of the Indian Red Cross Society, the International Federation would like to thank all partners for their support.

Context

During the reporting period, the states of Andhra Pradesh and Karnataka were worst hit by floods. In response to these floods, the Indian Red Cross Society (IRCS) deployed 21 members of the regional disaster response team (RDRT), national disaster response team (NDRT), national disaster water and sanitation response team (NDWRT) and state disaster response team (SDRT) trained personnel for assessment. IRCS also deployed four water purification units and sent relief supplies for distribution. These team members were in the field immediately after the disaster in order to assess the needs of the affected population and capacity of the local branches to deliver assistance. Based on the outcome of the assessment exercise, IRCS launched a domestic appeal. In addition to this relief, supplies were mobilized to the field which enabled state and district branches to assist the affected population addressing the real needs.



Beneficiaries in Andhra Pradesh receiving clean drinking water from the water purification unit. Photo: Rob Few/International Federation.

The state and district branches were further assisted by the deployed NDRT, RDRT, SDRT and NDWRT members in logistics, relief and deployment of the water and sanitation units.

The deployment has given good opportunity to the trained personnel to practice their expertise and skills. During the flood relief operation in Andhra Pradesh, IRCS distributed 5,000 family packs which have benefited approximately 25,000 people.

In general, India and some Indian states that are project-implementation of the health programmes through the IRCS, went through significant events that created challenges for the smooth implementation of the programmes. The country witnessed increasing H1N1 scare

in the states of Maharashtra, Karnataka, Andhra Pradesh and Tamil Nadu, particularly in urban and semi-urban areas during the year. While the pandemic made its presence felt through May/June to September/October, a decreased level of infections continues in the country through states hitherto untouched earlier. The states of Maharashtra, Karnataka and Andhra Pradesh also felt the brunt of the post-monsoon floods. Many lives were lost and property worth millions damaged. A tense situation also developed in Andhra Pradesh over the decision of the Union Ministry to create a new state of Telangana, which was a long standing issue. Both pro- and anti-Telangana formation caused demonstrations, violence and road blocks which created significant barriers for months in the state. It is important to note that the Andhra Pradesh state branch is implementing at least two major health programmes: HIV and human pandemic preparedness (H2P).

The IRCS mobilized the health volunteers for the emergency that arose from the floods and H1N1 infections. While rescue and relief was the major activity in floods, awareness generation in the community was an important role played by the volunteers. The national society also started the implementation of the H2P programme which had an objective to develop the preparedness of vulnerable communities to cope in the face of myriad health emergencies. With technical support from the International Federation zone, regional and country offices, the project implementation started in November 2009.

The International Federation country office, through its role of facilitation and coordination, supported the IRCS in initiation of the H2P and tuberculosis projects. It actively facilitated the development of brochures and audio visual clips for the HIV programmes for better visibility through the HIV technical working group. Field visits were conducted to facilitate programme management in the project areas. Systems were recommended to speed up technical and financial reporting processes. An inter-state workshop was conducted and experiences were shared, and problem solving and technical updates were facilitated to the HIV programme staff. The health and care team filled up all the vacant positions to facilitate better programming support to the national society.

In 2009, the IRCS managing board approved Strategy 2009-2012, which is in line with the International Federation's Strategy 2010.

Progress towards outcomes

Disaster Management

Programme component	Component outcome
1. Disaster risk reduction "building safer communities"	The resilience and disaster risk/disaster reduction capacities of people at risk are increased and their vulnerability reduced in the targeted geographic areas.

2. National disaster preparedness and response mechanism	National disaster preparedness and response mechanisms are strengthened at various levels.
3. Capacity building in DP/DR	Capacity building for DP/DR in human resources, trainings, infrastructures, institutional strategy and guidelines.
4. Inter Agency Coordination	Inter agency coordination mechanism implemented at various levels.
5. Renovation and construction of allied facilities in four regional warehouses	Logistical and warehouse management capacity of IRCS is strengthened.

Expected result 1: The IRCS disaster risk reduction awareness campaign spread the message of “Building safer communities through disaster risk reduction” to thousands of people in eight states: Assam, Andhra Pradesh, Tamil Nadu, Tripura, Bihar, Gujarat, West Bengal and Uttarakhand. The innovative games, street plays and other information, education and communication (IEC) material were used to spread the awareness on disaster risk reduction.



Discussion in a school during the disaster risk reduction awareness campaign: How to develop an effective community based early warning system and role of Gram Sabha in reducing the risk campaign. Photo: Indian Red Cross Society.

IRCS has moved further for the intense interventions in order to build safer communities by launching a project for six communities which is benefiting more than 22,000 people in Maharashtra.

Expected result 2: The IRCS national headquarters conducted NDRT refresher and induction courses, trained its first NDWRT, and trained its volunteers and staff in logistics and warehouse management. At the regional level, specialized training on emergency assessment was conducted for participants from Bihar, Orissa, Andhra Pradesh, Tamil Nadu and Gujarat. In order to build the disaster response capacity of the state branches, four SDRT trainings were conducted. These trainings have contributed to the pool of trained human resource for disaster response.

In addition to this, IRCS has increased its water and sanitation strength by adding two NOMAD water purification units to its fleet.

IRCS could get good visibility in the field during the flood relief operation due to its timely valuable quality services which have been acknowledged by the local authorities time to time in different forums.

Expected result 3: The disaster management priority state branches conducted various activities in order to build the overall capacity of the branch to implement the activities through the disaster management programme. Various skills such as development training activities on vulnerability capacity assessment (VCA), search and rescue, first aid, emergency assessment, logistics, and Sphere standards, amongst others were conducted.

This component of the disaster management programme intends to build the capacity of the branch enabling smooth implementation of the various activities at state, district and community level.

Expected result 4: Orissa has been one of IRCS's branches which has successfully established the Inter-Agency Coordination Group (IAG) and played a major role in sustaining the same. In order to motivate the other disaster management programme-implemented state branches to actively coordinate with the other humanitarian and government agencies in the field, funds were made available to the state branches for the establishment and strengthening of the existing IAGs.

State branches like Tamil Nadu, Andhra Pradesh and Orissa has shown keen interest in establishing such units. The consultation process has been initiated in these states with the other humanitarian actors in the

state. To make IAG operational and to encourage a larger number of humanitarian organizations to join the IAG, more work needs to be done by the state branches.

Expected result 5: The strengthening of the IRCS warehouses is part of the national disaster preparedness and response mechanism (NDPRM) and should be ideally under programme component 2. But, since this is a separate project, a separate component has been created for donor reporting purposes.

During the period under review, construction and repairs of Bahadurgarh and Arakkonam warehouses have been completed. In addition to this, a new warehouse has been constructed in Rajkot, Gujarat. The construction work of the Salt Lake warehouse in Kolkata is in progress and is expected to be completed in 2010. These constructions have enhanced IRCS's warehousing capacity to a great extent.

Achievements

Following are the main achievements of the disaster management programme in 2009:

- IRCS managing body has approved the disaster management Strategy 2009-2012.
- The programme implementation guidelines for the disaster risk reduction interventions at community level have been finalized.
- IRCS has launched the disaster risk reduction building safer communities project for six communities in Maharashtra, benefiting more than 22,000 people.
- IRCS deployed a 21-member NDRT (funded by DREF), including representatives from the NDWRT and SDRT accompanied by representatives from the International Federation South Asia regional disaster management team. This was the first time that such a team has been deployed at the beginning of the disaster to support rapid needs assessment, deployment of the water purification units and assist in the relief distribution. The teams have conducted several assessments, outcomes of which assisted IRCS to understand the outstanding needs of the affected communities and to define the IRCS short-term assistance strategy for up to 25,000 families (approximately 125,000 individuals). The assessments also helped to analyze the capacity of the local IRCS branches to deliver quality services on a short notice.
- Based on the recommendations, the IRCS national headquarters deployed two teams comprising of 11 and three team members for Andhra Pradesh and Karnataka respectively in order to assist the IRCS state branches in the deployment of four water purification units and relief distribution. The situation analysis was re-visited in early November and the necessary actions were taken.
- The team successfully distributed 5,000 family packs and installed water purification units in four districts of Andhra Pradesh which served hundreds of thousands of people every day for two months.
- Community volunteers were mobilized and trained to operate water purification units for two months post-Andhra Pradesh floods.
- The deployed team members in Karnataka successfully streamlined the relief operation, addressed logistics requirements, and train Red Cross volunteers for distribution of relief supplies despite of limited disaster response capacity of the Karnataka branch being not a priority disaster management programme state.
- The NDRT/NDWRT/RDRT/SDRT team members were deployed in Andhra Pradesh from 22 October to 6 November 2009 in order to assist the IRCS Andhra Pradesh state branch for the distribution of relief items. The responsibility of the installation of the water purification units and establishment of the water distribution system was entrusted with NDWRT members.

Health and Care

Programme component	Component outcome
1. Public health in emergencies	Strengthen institutional capacity for preparedness and response capacity of staff and volunteers in public health in emergencies (PHiE).
2. Red Cross volunteers	Strengthen RCV network to prepare and respond to public health emergencies
3. HIV/AIDS	Improve awareness on basic knowledge of HIV and AIDS and quality of life of people living with HIV (PLHIV)
4. Humanitarian preparedness project (H2P)	To create an adequate humanitarian response capacity to address community needs in a pandemic influenza, particularly in areas of public health, food security and livelihoods.

5. Tuberculosis project	Improved adherence to TB treatment regimens by vulnerable, retreatment TB patients
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Achievements

Expected result 1: The public health in emergencies (PHiE) training cycle was initiated in 2006 with a national level workshop and was taken up to the districts. Since then, approximately 1,952 personnel have been trained in PHiE workshops organized at the national, state and district level. These workshops have led to an overall improvement in understanding of the PHiE concept and its application. These trained volunteers have been used by the state branches for damage assessment and have also acted as facilitators for the district level workshops. During the outbreak of H1N1, teams of IRCS volunteers worked around the clock to raise community awareness in the affected districts. The IEC material on H1N1 influenza was developed with the support of the International Federation and was utilized to raise community awareness on the issue. The IRCS is prepared to respond to the H1N1 influenza by focusing on raising awareness through sharing information in the community with the help of its network of branches and volunteers. Additionally, a new project is designed and implemented to develop community preparedness plans to counter such sudden outbreaks and to minimise the catastrophic effects.

Expected result 2: Four state level workshops have been completed for the Red Cross volunteer leaders under the HIV programme states of Maharashtra, Andhra Pradesh, Punjab and Delhi. A total of 54 trainers (Red Cross volunteer leaders) from three states were trained in these workshops. The participants were selected strategically to strengthen the volunteer network and support for the community outreach activities under the project. These Red Cross volunteer leaders will train the district level volunteers. After the successful completion of state level workshops, six district-level trainings for community level Red Cross volunteers were organized in Maharashtra and Andhra Pradesh. A total of 144 volunteers attended the same training. These Red Cross volunteer leaders will train district level volunteers. The Red Cross volunteers helped raise awareness on good hygiene and sanitation practices at the community level, thereby increasing the knowledge of communities on these issues. From January 2010, this programme will continue with newer initiatives under community based health and first aid (CBHFA).

Expected result 3: The youth peer education (YPE) project, which targets the youth in schools and colleges, has been developed to encourage the youth in enhancing the “positive peer support” in discussing HIV and related health issues. The programme which was implemented in 280 institutions across two states (Andhra Pradesh and Tamil Nadu) and supported by the Swedish Red Cross came to an end in December 2009. About 43 trainings were conducted with peer educators for disseminating knowledge on HIV and AIDS prevention and encouraging them to counsel and provide life skills to other peer members. To date, approximately 1,952 peer educators have been trained in 199 institutions. The sensitization of the heads of the institutions and teachers were also done for their better cooperation. Further, 105 community outreach programmes were organized. The project has been achieving its targets regularly.

The Red Cross HIV/AIDS consortium in India has met seven times since 2006 at the national headquarters to review the achievements, cooperation and discuss the expansion plans. All the consortium partners, along with the representatives from International Committee of Red Cross (ICRC) and partner national societies, expressed satisfaction on the progress made and suggested that efforts should continue in scaling-up this programme and to achieve better results. As part of the consortium meeting, the previous IRCS HIV strategy from 2005-08 was revised for 2009-12. The Hong Kong Red Cross branch of the Red Cross Society of China has made a commitment to the ongoing International Federation supported HIV and AIDS programme.

Service, Support and Stigma (3S): The HIV programme is working to ensure that people living with HIV/AIDS (PLHIV) have access to information, care and nutritional support. The care and support initiative in Tambaram hospital in Chennai, Tamil Nadu, provides nutritious mid-day meal and hygiene kits to PLHIVs. About 9,626 PLHIV were provided with nutrition support and 400 PLHIV and their families received hygiene kits. Another element of this project is to provide counseling support and to raise awareness through discussions/orientations on how to combat stigma and discrimination. A total of 5,498 individual counselling, 22 ward sessions, 29 ART counselling and 192 family sessions were held with PLHIV and their families; they were counselled on how to cope better with their positive status. These activities are in-line with targets as the programme has a grip on the staff and beneficiaries.

Community Care Centre (3C): The community care centre initiative implemented at Dharmapuri district in Tamil Nadu aims to reduce the impact of HIV/AIDS among children and their HIV-positive parents through

comprehensive care. This includes informal education and psychosocial support to address stigma. Around 18 children with HIV-positive parents attended the community care centre and receive nutritious food, pre-school education and counseling.

Voluntary non-remunerated blood donation: Promotion of voluntary non-remunerated blood donation through this project has resulted in collection of 1,466 units of blood in current year in YPE programme-implemented states. In order to increase the promotion of voluntary non-remunerated blood donation, various activities were organised including seminars and IEC materials were distributed during World Health Day and Blood Donor's Day.

Expected result 4: The H2P project formally started in October 2009. However, the implementation only started from mid-November. Major activities, like national and state level orientations, have been conducted. Recruitment of staff, purchase of equipment and other essential project preparations were underway by the end of December 2009.

Expected result 5: The India tuberculosis project formally started from Oct 2009, actually started implementation from mid-November 2009. Major activities like national and state level orientations have been conducted. Recruitment of staff, purchase of equipment and other essential project preparations were underway by the end of December 2009. The Revised National Tuberculosis Control Programme (RNTCP) will provide their facilities, infrastructure and expertise for training the district and state level staff to be recruited for the project. The existing IEC material and guidelines for tuberculosis were compiled and disseminated to the intervention districts.

Organizational Development

Programme Component	Component Outcome
1.Organizational and leadership development	IRCS's capacity to mobilise, organise and manage local resources is strengthened at the national and branch levels.
2.Finance development	A modernised financial management system at national headquarters and 'selected' branches is put in place.
3.Internal communications Development	IRCS internal communication management and branch networking system is strengthened.
4.External relations and resource mobilization	IRCS relations with external partners and media are strengthened.
5.Volunteer development	IRCS has well managed volunteer management systems.

Achievements

Expected result 1: The major achievement in 2009 was the much awaited construction of the IRCS Strategic Development Plan (2009-2012) which was technically supported from the International Federation. This was adopted in the one-day State Secretaries' conference and shared in the Partnership Meeting with all partners. The Strategic Plan provides direction and plans to the IRCS for the next four years.

IRCS hosted a high level Partnership Meeting on 27 February 2009 which was inaugurated by the International Federation Secretary General. The IRCS took this opportunity to present and further expand its partnerships. This partnership meeting was attended by 21 delegates from the American, British, Canadian, Danish, Finnish, French, German, Hong Kong, Italian and Spanish Red Cross and representatives from different UN bodies, including the United Nations Development Programme (UNDP) and the European Commission of Humanitarian Aid Office (ECHO). The impact of this meeting was that other national societies which are not working with IRCS presently had shown their interest for future collaborations within their own programme priorities.

Looking at branch development with an integrated programming approach (IPA), which walks through integrated needs assessment, integrated planning and implementation, was the purpose of the different partner national society meetings held over the year. The impact was that the partner national societies liked the concept and were keen to step forward, with good planning of a pilot project for one state and commitment of the leadership of IRCS. Hence, a pilot IPA project for Andaman and Nicobar branches was developed on branch development through the IPA and shared with the Danish Red Cross.

Another significant achievement was the hosting of the first managing body meeting under the new chairman of IRCS. This meeting focussed on further strengthening the relationship between the IRCS national headquarters and its state branches. The national headquarters is not only technically supporting the state branches but also financially in their initiatives towards branch development as well as resource mobilization.

A compendium of IRCS achievements from 2005-2009 which speaks about its past, current programmes and the path ahead was printed in this year. This shall enhance the visibility of IRCS and its various activities in the national context and also their funding partners as well as the government.

The branch planning and review meeting was held at the IRCS Uttarakhand branch, the state where a pilot IPA initiative had been launched in June 2008 with the International Federation's support. Evaluating the progress of the branch brought forth various gaps that were hindering the progress. The action points were taken care of by the national headquarters for supporting the branch to perform better.

Branch development and planning meetings were held at the IRCS Haryana as well as Andaman and Nicobar branches. The needs of the branches were assessed and the branch development plan for Andaman and Nicobar branch was formulated through the participatory planning process. This plan is an IPA initiative. This plan was shared with the Danish Red Cross for generating financial support.

Uniform branch rules for the IRCS state branches were approved and signed by parliament and were published on the IRCS website. It is now being formally disseminated to the state branches for implementation. The uniform branch rules have provided branches with better guidelines and definitions on governance and management of branches. It will also provide guidance on financial management and other branch related matters for the better functioning of the branches. The chairperson of the branch shall now be elected by the state/Union Territories managing committee, which will have a major impact on the functioning of the branches.

Expected result 2: As per the needs of the IRCS national headquarters and the capacity of the human resource in the finance department, it was agreed to customise the existing version of Navision. To enhance the functionality, the need to replace old and outdated computer systems was also taken into consideration. The process of implementation began in the last week of November and the process period is expected to continue into the coming year. As capacity of the staff gets strengthened in this version, the IRCS shall migrate to the new version of Navision.

Expected result 3: The frequency of updating the IRCS website has considerably increased and the latest news about the national society is added on the website every month. The website has become more informative with respect of new IRCS programmes. The visual appeal of the website has been able to attract more visitors on its site and enquiry calls for getting more detail on programmes has increased.

Apart from the website, a separate cell has been created at the IRCS headquarters and a staff deputed to cater to the various telephonic enquiries related to IRCS programmes and opportunities for volunteering. The printing and dissemination of the strategic development plan, HIV strategy and the disaster management strategy to the various state branches of IRCS has given the states a direction for these respective programmes. Regular communication with the IRCS branches has yielded 17 branches reporting on regular programmes relating to social care and welfare at the end of every quarter while 32 states are reporting annually.

Expected result 4: The fundraising summit organized by the South Asia regional office in Delhi provided capacity building opportunity for the IRCS Secretary General and the managing body members of the IRCS. In lieu of the recent floods in India, the domestic appeal had been launched by the IRCS national headquarters. During the recent floods in Andhra Pradesh and Karnataka, the Karnataka branch was



Indian Red Cross Society branch members attending the national society's induction-cum-branch planning workshop. Photo: Indian Red Cross Society.

nominated as the model agency by the state government to be in charge of donations and resource mobilization with other non-governmental organizations and agencies during this calamity.

IRCS national headquarters has taken a decision to technically and financially support the resource mobilization activities by their state branches. Other notable achievements that have been reported by the IRCS state branches on resource mobilization speak about their potentiality. Gujarat branch generated CHF 1,750,000 from Suzlon Energy Ltd for building a senior citizen home and a training research centre in the premises of the state headquarters at Wadaj, Ahmadabad. Red Cross Bhavan at Tumkur district branch of Karnataka constructed with a total cost of CHF1,000,000 generated these funds from the government and corporate sector. Red Cross Bhavan for the state headquarters at Uttarakhand Dehradun has been constructed by resource mobilization initiatives of the branch from government and corporate identities. The total cost of construction of this building, which is now nearing completion, is CHF494,150.

Expected result 5: For better management of the volunteers, a volunteer database was needed and as a step forward, the IRCS national headquarters is trying to get ready with the available data on volunteers from the states. A pilot project on 100 hours of volunteer service programme with financial assistance from German Red Cross and technical inputs from the International Federation also gained momentum with frequent follow up meetings. A sharing of learning and way forward workshop held by IRCS on their pilot project on Red Cross youth was financially supported by the German Red Cross and technically supported by the International Federation’s India country office. The outcome of the workshop is formulation of youth policy and guidelines .Capacity enhancement of volunteers with wide scale inputs was carried out with various programme related inputs.

Humanitarian Values

Programme Component	Component Outcome
1.Promotion of principles and values of the Movement	IRCS staff, members, volunteers and community have better understanding of the Movement’s principles and values.
2. Scaling-up and strengthening of humanitarian values within the IRCS advocacy	More frequent application of humanitarian values in planning and implementing of all programmes in the targeted states.

Achievements

Expected result 1: A total of 5,000 copies of “Basics About Red Cross” addressing Red Cross history, its principles and values, international humanitarian law, IRCS’s core programmes and volunteering concept was published by the IRCS in the first quarter of the year with support from ICRC and the International Federation.

For keeping the youth updated on the Red Cross Movement’s principles and values, four junior Red Cross camps were organized by the IRCS Punjab state branch at Haridwar and at Taradevi in the hill state of Himachal Pradesh. A total of 223 junior Red Cross girl members aged between 14 to 18, and 236 junior Red Cross boy members aged between 16 to 19 were addressed. Twenty-four school counsellors also attended the camp.

The IRCS has developed its humanitarian values strategy and identified the areas of intervention during the period 2009 to 2012. Violence prevention and mitigation is an additional area identified where the IRCS would like to focus in the future. A representative from the IRCS attended a meeting on violence prevention and mitigation held at Geneva in 2009 and a focal person from the IRCS has been designated for the same.

The humanitarian values workshop at Uttar Pradesh State addressed 50 youth on the humanitarian values and initiated them to organize youth Red Cross units.

Expected result 2: The IRCS Tamil Nadu state branch had organized more than 100 counselling sessions with people living with HIV and AIDS and their family addressing psycho-social support, stigma and discrimination. This programme was supported by the International Federation health programme.

A national level sphere training of trainers for the IRCS staff and volunteers was organized with the support of the American Red Cross disaster management programme. A total of 30 participants attended

the training. Sphere minimum standard and Code of Conduct were the part of the training. The IRCS organized a NDRT training at New Delhi under the International Federation's disaster management programme where 35 staff and volunteers were trained on the Fundamental Principles, Code of Conduct, Sphere standards and humanitarian chartered which was as per the programme plan of the first quarter.

Constraints or Challenges

The flood operation in Andhra Pradesh and Karnataka diverted the attention and resources in the national headquarters, resulting in a slower implementation of the disaster management programmes.

The proper guidance given to ensure timely financial and narrative reporting did not prevent some of the branches to submit their financial reports just in time before the set deadline of end December 2009.

The procedural and administrative systems between IRCS national headquarters and branches have an effect on the programme implementation. Reporting needs further strengthening, with improved coordination and monitoring mechanisms. Technical trainings in various aspects will be carried for the programme staff for further improving their expertise in the areas like project planning, monitoring and evaluation and resource mobilization. The major constraint is high staff turnover at state and district levels, which resulted in a number of activities not being carried out as planned. This caused delays in the overall programme implementation, state and district level monitoring, and narrative and financial reporting.

Enhancing the concept of organizational development from the narrow lanes of salary support and infrastructural support to a wider concept of strengthening systems and procedures of the organization is the biggest opportunity in our relationship with IRCS. Additionally, the International Federation will further work with the national society on its capacity building in human resource management.

The major constraint during the reporting period is the lack of funding for the humanitarian values and organizational development programmes. Many more projects could have been implemented if funds were available.

Working in partnership

The working relationship of the International Federation with the IRCS, ICRC and partner national societies as well as with external key stakeholders in the disaster management programme has been very effective over the last two years and has been further strengthened during this reporting period.

The disaster risk reduction consortium has been formed in the latter half of 2009. Partner national societies within the country, along with the International Federation supporting IRCS in its various disaster risk reduction initiatives, are part of this consortium.

The International Federation coordinated the process of developing the IRCS's disaster risk reduction Global Alliance baseline and project proposal where partner national societies gave their valuable contribution. The project will be targeting 12 communities from six states within the timeframe of three years.

Good working relationship with organizations such as Sphere India, United Nations Population Fund (UNFPA), and the National Disaster Management Authority (NDMA) has been further strengthened. These organizations were involved in various studies and consultation processes, like on food security, and carried out by the International Federation. Also, the coordination during disaster response and sharing of resources is also being discussed and enhanced. The country office will further work and develop the implementation of the global Memorandum of Understanding between UNFPA and the International Federation.

During disasters, the International Federation supports the IRCS through its coordination role within and outside the Movement. In addition, the International Federation continues to provide technical and financial support to the IRCS post-graduate diploma course towards strengthening its coordination with internal and external stakeholders and to increase the in-country strength of the disaster management expertise with enhanced skills and knowledge.

In order to promote and protect the health of the population by encouraging healthy behaviour, the IRCS is supplementing the efforts of the government, National AIDS Control Organization (NACO), the National Tuberculosis Control Programme and the International Federation's HIV Global Alliance initiative. In line

with the Memorandum of Understanding between the World Health Organization (WHO) and the Red Cross Movement, the IRCS has been revoking the WHO's support in various ways and has also been technically supporting them too, thus operationalizing the global Memorandum of Understanding. The IRCS has strengthened its network with the various cooperating agencies and organizations, both governmental and non-governmental. To improve coverage and knowledge sharing, the exchange of resources was encouraged for better cooperation. This leads to further supporting and extending cooperation with bilateral partners as well as with the local community-based organizations. In order to address the community health needs, the IRCS is developing a cadre of community volunteers through PHIE and Red Cross volunteers/CBHFA programmes.

A great cooperation was observed during the reporting period with the ICRC in conducting the humanitarian values programme. The ICRC gave dissemination and promotional materials to the International Federation to encourage young students in junior Red Cross camps/workshops. This cooperation with ICRC is further enhanced through regular meetings between the Head of India Office and the ICRC management in India.

There has been a major step in more focussed integrated meetings with the IRCS health and care, organizational development and disaster management departments at the national headquarters with an aim to discuss cross cutting issues. After a gap, the frequency of meetings with partners in the Movement has been increased resulting in positive collaborations.

Interactions with the Asia Pacific organizational development coordinator and zonal volunteering co-coordinator during their visit to India has given a great impetus to the International Federation organizational development staff and were provided with inputs on new initiatives that can be taken up in the second half of the year.

Contributing to longer-term impact

In order to achieve the IRCS strategic objectives by 2012, key steps have been taken to enhance the timely implementation of activities at branch as well as at community level.

Project monitoring, evaluation and reporting trainings have been scheduled in 2010 which are supposed to further strengthen the capacities of the state branches in developing more project proposals (in order to increase the scope of intervention at community level) and enhance monitoring, reporting and evaluation skills of the staff and volunteers. With good project proposals, branches are expected to attract good funding support for their projects.

The pilot project on IPA, which has been for the overall development of the Andaman and Nicobar branches, will be replicated in other branches in the country.

The IRCS is a part of HIV Global Alliance for South Asia. The Global Alliance on HIV is promoting partnership within the Movement. A new IRCS HIV strategy was developed and shared. In line with the Global Alliance on HIV, this project will provide support to government efforts in the area of HIV/AIDS in the targeted districts. Furthermore, the IRCS is working in close collaboration with the government, NACO and the Red Cross Movement. Trained staff at state and district branches significantly contributed in the project development and implementation. This resulted in better project management in terms of conducting training at various levels, regular monitoring and submission of reports.

Health programmes have gained considerable pace and have adapted to the emerging needs of the national society. The availability of trained volunteers has gone a long way in proving the same as they are very useful for immediate deployment during emergencies. The health and care programmes integrate activities to promote humanitarian values and gender diversity.

The new projects, H2P and the India tuberculosis programme, initiated in 2009, enhances the close cooperation with the government health programmes, highlighting IRCS's role as auxiliary to the government.

The partnership meeting highlighted the need for a more important emphasis on organizational development in the national society. The IRCS national headquarters has agreed to financially support the state branches in capacity building and fundraising activities. This will bring a change in the national society development processes.

The integrated approach with the health and disaster management programmes in capacity building and volunteer development will deal with a lot of issues related to capacity building of branches and volunteer management at the local level.

Looking ahead

The International Federation's country office in India plays a key role in assisting IRCS with the coordination of international development support and the facilitation of all ongoing and future partner national society-supported programmes/projects. This is in order to prevent duplication of services and to ensure certain conditions and procedures are, as far as possible, standardized within IRCS.

The initiatives taken towards strengthening NDPRM has already started giving results which can be confirmed with the successful deployment of more than 21 RDRT, NDRT, NDWRT and SDRT trained volunteers and staff during the Andhra Pradesh and Karnataka flood relief operation. The complete process of the relief operation is assessment, mobilization of relief items, deployment of water and sanitation units, selection of beneficiaries, and distribution of relief items was completed in just one month. Thus, the significant reduction in response/turnaround time was achieved in 2009.

However, more standardization in trainings and use and maintenance of equipments is required, which ultimately will further enhance the efficiency and effectiveness of the deployment of the IRCS disaster response tools during emergencies.

The disaster risk reduction "Building Safer Communities" initiatives have been taken to Maharashtra. Looking at the response from the communities, there is a scope of expanding this programme within and outside Maharashtra. IRCS has already set its scaling up target to six more states.

Interstate capacity building workshops for programme staff on project management, including Red Cross Red Crescent principles, finance, planning, monitoring, evaluation and reporting (PMER) and other programmatic and technical aspects are scheduled for the 2010. These workshops will give an opportunity to learn and exchange knowledge from other participants from different districts and states.

The focus of the health and care programmes in 2010 will be on: emergency health; community based health and first aid; HIV and AIDS; tuberculosis; pandemic preparedness and voluntary non-remunerated blood donation. The IRCS will continue to take the necessary steps to mark an increased presence among the global HIV players in the region for scaling-up its capacity, response and visibility in the country. Furthermore, the issues related to non-discrimination have also been included in the training contents of the HIV/AIDS, PHiE and Red Cross volunteers programmes. Steps will be taken towards promoting an integrated approach to programming and revision of statutes, systems and procedures which will contribute towards improved efficiency of the organization and sustainability of programmes.

In case of the organizational development programme, the national societies looks forward to receiving support from the Danish Red Cross and further continue the pilot project on branch development through the IPA with the other partner national societies.

The humanitarian values and integrated programming approach model will be considered and applied at various levels in an effective programme delivery to provide dignified, appropriate and timely assistance to the people reached.

How we work

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

Global Agenda Goals:

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

Contact information

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

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

International Federation of Red Cross and Red Crescent Societies

MAAIN001 - India

Annual Report 2009

Selected Parameters	
Reporting Timeframe	2009/1-2009/12
Budget Timeframe	2009/1-2009/12
Appeal	MAAIN001
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	1,785,831	611,806	207,820		0	2,605,457
B. Opening Balance	1,325,887	869,402	252,130		0	2,447,418
Income						
<u>Cash contributions</u>						
<i>British Red Cross</i>	118,391					118,391
<i>China RC, Hong Kong branch</i>	404,171					404,171
<i>Danish Red Cross</i>	37,661	0				37,661
<i>Danish Red Cross (from Danish Government)</i>	67,761					67,761
<i>Netherlands Red Cross (from Netherlands Government)</i>	5,590					5,590
<i>Norwegian Red Cross</i>			0			0
<i>Norwegian Red Cross (from Norwegian Government)</i>	12,952					12,952
<i>OPEC Fund For Int-l Development</i>	327,189					327,189
<i>Sweden Red Cross</i>		0	-0		-0	-0
<i>Sweden Red Cross (from Swedish Government)</i>		345,849	0		-1	345,848
C1. Cash contributions	973,715	345,850	0		-2	1,319,564
<u>Outstanding pledges (Revalued)</u>						
<i>British Red Cross</i>	-103,040					-103,040
<i>Danish Red Cross</i>			44,895			44,895
<i>Netherlands Red Cross (from Netherlands Government)</i>	5,580					5,580
<i>New York Office (from Schering Plough)</i>	8,628					8,628
<i>USAID</i>		129,074				129,074
C2. Outstanding pledges (Revalued)	-88,832	129,074	44,895			85,137
<u>Income reserved for future periods</u>						
<i>Danish Red Cross</i>			-44,217			-44,217
<i>USAID</i>		-105,980				-105,980
C3. Income reserved for future periods		-105,980	-44,217			-150,197
C. Total Income = SUM(C1..C6)	884,883	368,944	678		-2	1,254,504
D. Total Funding = B + C	2,210,770	1,238,346	252,808		-2	3,701,922
Appeal Coverage	124%	202%	122%		#DIV/0	142%

II. Balance of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
B. Opening Balance	1,325,887	869,402	252,130		0	2,447,418
C. Income	884,883	368,944	678		-2	1,254,504
E. Expenditure	-1,236,802	-441,048	-126,498		2	-1,804,346
F. Closing Balance = (B + C + E)	973,968	797,298	126,310		0	1,897,577

International Federation of Red Cross and Red Crescent Societies

MAAIN001 - India

Annual Report 2009

Selected Parameters	
Reporting Timeframe	2009/1-2009/12
Budget Timeframe	2009/1-2009/12
Appeal	MAAIN001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance A - B
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A		B					A - B	
BUDGET (C)		1,785,831	611,806	207,820		0	2,605,457	
Supplies								
Construction - Facilities/Infrastruc	515,067	497,876					497,876	17,191
Clothing & textiles	13,928	82,877	1				82,878	-68,950
Food	30,000		18,244				18,244	11,756
Water & Sanitation	88,397	73,354	9				73,363	15,034
Utensils & Tools		301,991	96				302,087	-302,087
Other Supplies & Services	538,152	81,655	10,107				91,762	446,391
Total Supplies	1,185,545	1,037,752	28,458				1,066,210	119,335
Land, vehicles & equipment								
Land & Buildings	40,000							40,000
Computers & Telecom	42,329	796	5,680	9,397		4,617	20,491	21,838
Office/Household Furniture & Equipm.			200	341		-176	366	-366
Others Machinery & Equipment		-215	229	-107		-4,442	-4,535	4,535
Total Land, vehicles & equipment	82,329	582	6,109	9,631		0	16,322	66,007
Transport & Storage								
Storage	1,825	1,437					1,437	388
Distribution & Monitoring		22					22	-22
Transport & Vehicle Costs	24,927	10,766	11,208	87			22,062	2,865
Total Transport & Storage	26,753	12,225	11,208	87			23,521	3,232
Personnel								
International Staff	125,908	35,795	46,685	13,631		0	96,111	29,798
National Staff	176,825	40,191	77,730	47,015			164,936	11,889
National Society Staff	196,601	19,728	89,935	21,842			131,505	65,096
Consultants	66,569	14,632	10,184	1,294			26,110	40,459
Total Personnel	565,903	110,346	224,534	83,781		0	418,662	147,241
Workshops & Training								
Workshops & Training	346,226	166,547	55,782	18,121			240,450	105,776
Total Workshops & Training	346,226	166,547	55,782	18,121			240,450	105,776
General Expenditure								
Travel	32,612	7,889	9,458	1,706			19,054	13,559
Information & Public Relation	81,428	9,122	6,954	15,113			31,189	50,239
Office Costs	38,929	716	4,527	104		17,679	23,025	15,903
Communications	17,767	2,427	3,537	699		5,324	11,987	5,780
Professional Fees	23,100	398				25,212	25,610	-2,510
Financial Charges	36,463	-5,714	11,084	869		12,182	18,422	18,042
Other General Expenses	-954	14,747	17,538	7,960		-60,398	-20,154	19,200
Total General Expenditure	229,346	29,585	53,098	26,451		-2	109,133	120,213
Programme Support								
Program Support	169,355	85,325	31,947	8,222		-0	125,493	43,861
Total Programme Support	169,355	85,325	31,947	8,222		-0	125,493	43,861
Services								
Services & Recoveries		11,206					11,206	-11,206
Total Services		11,206					11,206	-11,206
Operational Provisions								
Operational Provisions		-216,767	29,912	-19,797			-206,652	206,652
Total Operational Provisions		-216,767	29,912	-19,797			-206,652	206,652
TOTAL EXPENDITURE (D)	2,605,457	1,236,802	441,048	126,498		-2	1,804,346	801,111
VARIANCE (C - D)		549,029	170,758	81,322		2	801,111	