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# Mongolia Annual Report 2012

 International Federation  
of Red Cross and Red Crescent Societies

**MAMN001**

**30 April 2013**

**This report covers the  
period 1 January 2012 to 31  
December 2012**

MRCS volunteers provide  
social care services to  
beneficiaries.  
Photo: MRCS



## Overview

- During the reporting period, IFRC country office continued its support to the MRCS in implementing projects in the areas of health, social care, disaster management, and organizational development. The community-based health and first aid (CBHFA) project was implemented in four provinces in Gobi areas and three districts of Ulaanbaatar city through its trained volunteers and facilitators. The Finnish Red Cross-supported social care project continued its support to the populations in Uvurkhangai, Khuvsgul, and Tuv provinces. In the disaster management field, three main projects implemented - the Norwegian Red Cross-supported community-based disaster preparedness (CBDP), DFID-funded community-based programming (CBP) and national disaster response team (NDRT), and Australian Red Cross-funded risk reduction and community resilience (RRCR). Japanese Red Cross Society support provided to organizational development of the National Society.
- National Parliament election was held in 2012, therefore resulting in the delay of the establishment of the operational government, causing delay in implementation in some of planned activities.

## Working in partnership

The IFRC and MRCS continue to support the Mongolian Government disaster risk reduction (DRR) and disaster preparedness (DP) initiatives. The IFRC was invited to attend "Humanitarian Country Team Meeting" together with the international organizations and UN agencies, to discuss about the necessary issues for developing the contingency plan document for Mongolia. In the meeting, the IFRC contributed to the sharing of opinions and standpoints among stakeholders, highlighting that the process of contingency planning should be owned and advanced more by local entities, particularly the government. At mid-level branch (MLB) level, there are some initiatives to partner with local companies and other international organization.

IFRC is supporting the MRCS in conducting the nationwide vulnerability and capacity assessment (VCA) and to further develop a nationwide VCA report. This report will identify needs and capacities in the country which will give an opportunity to MRCS to deepen relations with international and local stakeholders in-country.

Umnugobi MLB is cooperating with the mining company, Oyu Tolgoi, on its pilot project “Implementation of STI, TB and HIV/AIDS prevention project for Oyu Tolgoi mine impact area”. The STI/HIV prevention among youths, mobile and most-at-risk populations joint project is being implemented by MRCS and UNFPA. Project activities are mainly focused on HIV prevention activities targeting the youth who are living in border areas.

Operational Partners	Agreement
Australian Red Cross	Memorandum of Understanding
British Red Cross	Memorandum of Understanding
Norwegian Red Cross	Memorandum of Understanding
Finnish Red Cross	Memorandum of Understanding
Japanese Red Cross	Memorandum of Understanding
Netherlands Red Cross	Memorandum of Understanding
Chinese Red Cross	Memorandum of Understanding
DFID	Memorandum of Understanding
ECHO	Memorandum of Understanding
ICRC	Memorandum of Understanding
AusAID	Memorandum of Understanding
USAID	Memorandum of Understanding

## Progress towards outcomes

### **Business Line 1: “To raise humanitarian standards”**

Measurement				
Outcome/Output/Indicators	Baseline (Where available)	LTPF 4-year target	Actual this Year	Actual to Date
<b>Outcome 1:</b> MRCS is a well functioning National Society delivering relevant and efficient services in support of the Mongolian population in adherence with Red Cross Red Crescent Movement Principles and Policies.				
<b>Output 1.1:</b> MRCS has participated in the programmes oriented to standardizing practices across national societies including having completed a review of its statutes following established processes and inputs from the Joint Commission.				
1.1.1 National Society has finished revision of its statutes	Please see narrative below			
1.1.2 National Society has contributed to the establishment and maintenance of federation-wide reporting system.	-	-	At the MRCS HQ and MLB level	At the MRCS HQ and MLB level
<b>Output 1.2:</b> MRCS has successfully implemented a review of its activities ensuring these are in alignment with the decisions adopted at the IFRC General Assembly, the Council of Delegates and the resolutions of				

Measurement				
Outcome/Output/Indicators	Baseline (Where available)	LTPF 4-year target	Actual this Year	Actual to Date
the Red Cross Red Crescent Movement international conferences.				

Comments on progress towards outcomes				
1.1.1 Revision draft is circulated within Steering Committee of MRCS, national experts, and MRCS board members Comment specifically on variance between targets and actual measurements over the year.				
1.2.1 National Society has participated in all relevant trainings and workshops organized by the IFRC and partner national societies.	-	-	13	13

**Business Line 2: “To grow Red Cross Red Crescent services for vulnerable people”**

Measurement				
Outcome/Output/Indicators	Baseline (Where available)	LTPF 4-year target	Actual this Year	Actual to Date
<b>Outcome 1: MRCS is better prepared to adequately respond to major disasters including of the provision of emergency health.</b>				
<b>Output 1.1:</b> MRCS's mandate in disaster preparedness and response becomes clear and reflected in the state disaster law or other relevant documents, and disseminated to concerned parties.				
1.1.1 the National Society improves its collaboration with state disaster response agencies.	Please see narrative below			
1.1.2 the National Society actively participates in the UN cluster system to improve efficiencies in service delivery.	Please see narrative below			
<b>Output 1.2:</b> MRCS has capacity to provide timely relief, emergency health and water sanitation services to affected populations in a timely and efficient manner.				
1.2.1 the National Society has formulated operational procedures, guidelines and plans – in line with international standards – that enable the National Society to respond to major disasters at both national and local level. The National Society has trained, established and maintained the National Disaster Response Team (NDRT).	Please see narrative below			
<b>Outcome 2: MRCS is better positioned and has stronger capacity to achieve the vital goal of helping to protect the most vulnerable, and increasing and safeguarding humanitarian space.</b>				

Measurement				
Outcome/Output/Indicators	Baseline (Where available)	LTPF 4-year target	Actual this Year	Actual to Date
<b>Output 2.1:</b> MRCS has actively advocated decision makers in respect to the humanitarian imperatives in Mongolia in alignment with the resolutions acquired at the International Red Cross Red Crescent Conference.				
2.1.1 MRCS has effectively advocated the Mongolian Government for the enactment of legislation relating to IDRL for Mongolia.	-	-	Planning process	Planning process
2.1.2 the National Society has introduced the IDRL concept for government decision makers.	-	-	Planning process	Planning process
2.1.3 the National Society has actively advocated needs for making necessary changes to the legal environment for major disaster response.	Please see narrative below			
Comments on progress towards outcomes				
<p>1.1.1 Has an agreement with National Emergency Management Agency signed in 2012.</p> <p>1.1.2 MRCS's Disaster Management program is member of lead shelter and protection clusters lead by UNCHR.</p> <p>1.2.1 A contingency plan is being drafted and piloted at MLB level; SOP document is being drafted; NDRT members are being identified and equipped, however specialized NDRT teams are currently in the planning stage.</p> <p>2.1.3 A proposal of additional amendment in Law on legal status of the MRCS was presented to the government but due to Parliament election in 2012, approval of the additional amendment has been delayed.</p>				

**Business Line 3: "To strengthen the specific Red Cross Red Crescent contribution to development"**

Measurement				
Outcome/Output/Indicators	Baseline (Where available)	LTPF 4-year target	Actual this Year	Actual to Date
<b>Outcome 1: MRCS improves health awareness and enhances disaster resilience of a wider community through its integrated community-based approach (combination of community-based health and first aid (CBHFA), water and sanitation, livelihoods, community-based disaster preparedness (CBDP) and other community-based programmes and branch development.</b>				
<b>Output 1.1:</b> MRCS's branches have piloted community-based programme based on community needs prioritization and local context as well as taking into consideration the existing capacities, experience and resources within MRCS.				
1.1.1 training curriculum, guidelines, standards of service delivery at community level has been developed taking into consideration the existing capacities and resources within MRCS.	Please see narrative below			
1.1.2 integrated training events have been planned and	Please see narrative below			

Measurement				
Outcome/Output/Indicators	Baseline (Where available)	LTPF 4-year target	Actual this Year	Actual to Date
implemented.				
1.1.3 training events have been coordinated among partners to maximize their impact.	Please see narrative below			
<b>Output 1.2:</b> An adequate volunteer recruitment and management framework and specific policies are in place at a national and local level.				
1.2.1.1 the National Society has revised its volunteer management policy.	-	-	The policy is to be reviewed/ revised	The policy is to be reviewed/ revised
1.2.2 the National Society has started to introduce initiatives that are to ensure volunteer safety and security.	-	-	MRCS staff attended 'Volunteering in emergencies' training	MRCS staff attended 'Volunteering in emergencies' training
<b>Output 1.3:</b> The social care programme offers comprehensive social service which is widely accessed by vulnerable groups in the rural and urban areas.				
1.3.1 MRCS's social care policy has further developed to clearly identify its role and responsibility and in so doing implementing the services in selected areas.	Please see narrative below			
1.3.2 the National Society has formulated an agreement with the Mongolian Government and key stakeholders in order to ensure sustainability and long-term impact of the programme activities.			Agreement was signed in May 2012	
1.3.3 the "Red Cross Social Care Centres" provide more comprehensive services and act as reference centres in the identified communities, enriched through the integration of programmes (such as CBHFA, HIV/AIDS) and in so doing addressing the identified needs within particular communities with relevant and timely services targeting the most vulnerable groups including the elderly, disable, single parents, at-risk youth, and the extremely poor.	Please see narrative below			
<b>Comments on progress towards outcomes</b>				
1.1.1 The CBHFA project contributed to a certain extent to shaping the healthy behavior and safe living environment within targeted communities. In Gobi area, 306 CBHFA volunteers and facilitators conducted household visits, community meetings, dialogues, trainings, simulation exercises and competitions to motivate the local people for safe and healthy behaviours and to identify the most				

Measurement				
Outcome/Output/Indicators	Baseline (Where available)	LTPF 4-year target	Actual this Year	Actual to Date
<p>urgent health risks and solutions through community-based participatory approach. Despite being implemented in rural areas with the least population density scattered in nomadic and residential settings, 10 per cent of the total target population (approximately 1,360 people) and about 400 students achieved positive behaviour change through CBHFA, as reported by local RC branches.</p> <p>1.1.2 CBHFA's concept was introduced to other RC programmes of MRCS for closer integration by conducting the CBHFA sensitization sessions for local branch staff from DM programme and for youth participants in Annual RC Youth Camp Meeting, resulting in reaching 7 regional disaster mitigation areas and 400 peer educators from all around the country.</p> <p>1.1.3 To raise awareness about CBHFA project among local leaders and decision makers and to create a supportive implementing environment, MRCS local branches have made efforts to improve leaders' awareness through training, study of CBHFA manual, and field visits. This resulted in the municipal government giving priority to health promotion, which has finally been reflected in the local government's agenda with growing attention to the CBHFA project. Together with MRCS facilitators, volunteers, health officials, doctors, and school teachers visited rural areas to share health messages and knowledge with IEC materials that were updated and simplified.</p> <p>1.3.1 At least 40 per cent of mid-level branches have a Memorandum of Understanding with local social welfare departments on funding grant for activities that address needs of the most vulnerable groups such as the elderly, disabled, single parents and extreme poor. But it has been delayed due to newly formed government</p> <p>1.3.3 Social care programme through its multilateral and bilateral projects provided 35,513 services to 16,390 beneficiaries through 7,572 volunteers in 17 locations. The services include food assistance, psychosocial support (PSS), home services, reading newspapers, and health assistance. In addition, it provided a ger to 16 homeless people and assistance to 743 people to be trained in vocational training. Also, 900 volunteers trained on "Home care for bedridden people" and 4,571 volunteers were trained on RC and RC branch programmes, social care project, home care, first aid, registration for government benefits, fundraising, and vocational skills.</p> <p>The multilateral project of social care programme continued its services to over 450 families and 1,350 indirect beneficiaries, who are amongst the most vulnerable population, throughout 150 volunteers and 120 junior RC members, and three provincial social care centers in Tuv, Khuvsgul and Uvurkhangai provinces. In a duplicated number, 3,389 people received social services through social care centers in three targeted locations, and 450 families obtained 2,857 home care services. The services include fuel, water, and food distribution, disability aids including provision of wheelchairs, eye glasses, and false teeth, and access to health care centers and medical checkups. This project ensured the close coordination and harmonization with other two social care projects funded by British Red Cross Society and EU/FRC.</p> <p>RC Humanitarian Rooms in all 12 CBHFA targeted communities were properly equipped with necessary items like desks, chairs, flipchart stands, cabinets and IEC materials to disseminate CBHFA modules and other promotional messages, also serving as the venues for volunteers to have regular meeting and operational guideline for Humanitarian Rooms was developed and introduced to local RC branches. CBHFA introduction and dissemination campaign has been held three times for the communities and public at each targeted areas for health promotion on prioritized topics such as accidents, STDs, hepatitis, ARI, TB and cardio-vascular diseases. 40,200 pieces of IEC materials such as leaflets and posters on health related topics were printed based on information and content from CBHFA manual and distributed to local people and school children in CBHFA targeted</p>				

Measurement				
Outcome/Output/Indicators	Baseline (Where available)	LTPF 4-year target	Actual this Year	Actual to Date
communities for public awareness increase on tackling the main health issues.				

**Business Line 4: “To heighten Red Cross Red Crescent influence and support for our work”**

Measurement				
Outcome/Output/Indicators	Baseline (Where available)	LTPF 4-year target	Actual this Year	Actual to Date
<b>Outcome 1: MRCS’s communications are utilized to highlight key areas of interest and concern for the Red Cross Red Crescent Movement stressing its competitive advantage in the humanitarian market place.</b>				
<b>Output 1.1:</b> Closer cooperation takes place with relevant stakeholders to highlight the humanitarian imperatives in Mongolia.				
1.1.1 the National Society has improved its collaboration and communication with partner media agencies in Mongolia;	-	-	Campaign organized and local pledges announced	Campaign organized and local pledges announced
1.1.2 the National Society has established different means to establish new partnership in accordance with IFRC policy.	-	-	0	0
<b>Output 1.2:</b> The National Society is better positioned through a comprehensive resource mobilization strategy.				
1.2.1 the National Society has secured funding to support its initiatives through long-term commitments and diversified sources from existing and new partners.	-	-	Please see narrative below	
1.2.2 resource mobilization strategy has been developed.	-	-	Process is to be initiated but no staff appointed	Process is to be initiated but no staff appointed
<b>Comments on progress towards outcomes</b>				
1.2.1 Only 2 projects received extensions bilaterally - social care and health and first aid programmes received funding support through long term commitments from existing partners.				

**Business Line 5: “To deepen our tradition of togetherness through joint working and accountability”**

Measurement				
Outcome/Output/Indicators	Baseline (Where available)	LTPF 4-year target	Actual this Year	Actual to Date
<b>Outcome 1: MRCS has increased capacity to deliver services by maximizing its support through a permanent coordination structure.</b>				
<b>Output 1.1:</b> Partnership agreements are executed with relevant partners under a comprehensive cooperation framework.				
1.1.1 a locally relevant cooperation framework has been adopted (Operational Alliance, CAS).	-	-	0	0
1.1.2 partnership meetings have been held at regular intervals and communication between partners is timely and relevant.	-	-	Rescheduled to June 2013	Rescheduled to June 2013
<b>Outcome 2: MRCS practices systematic planning, monitoring, evaluations and reporting (PMER) approach in order to ensure greater accountability to donors, partners and people reached.</b>				
<b>Output 2.1:</b> A four-year PMER plan for the National Society is developed and implemented efficiently and effectively.				
2.1.1 a PMER toolkit has been developed, tested and in use	-	1	MRCS PMER guide to be translated into Mongolian language	MRCS PMER guide to be translated into Mongolian language
2.1.2 the national headquarters and branches are regularly trained on PMER practices.	-		1	1

## Stakeholder participation and feedback

An integral part of the programme and project delivery is the ongoing consultation with key stakeholder groups. Community members are consulted on the relevance of the services being provided and their input is used as essential aspects in the design and review processes. Community participation will be increased as national VCA is conducted in nine districts of Ulaanbaatar and 21 provinces of Mongolia. Therefore, community involvement was strengthened as herders consultations were conducted in one of the most disaster prone province and the community addressed the sustainability of such activities in province and region.

## Key Risks or Positive Factors

Key Risks or Positive Factors	Priority High Medium Low	Recommended Action
<p>MRCS is facing challenges in human resource management. For example staff retention and a number of trained volunteers are decreasing along with staff, which increases the challenges faced by the MRCS management. Lack of proper handover by outgoing staff to new staff remains a gap that needs to be addressed.</p> <p>In the reporting period, MRCS overall programme coordinator resigned along with number of staff in charge of foreign relations and OD, marketing, CBHFA project officer and ICRC officer (total of five persons at MRCS HQ). As of the end of reporting period, MRCS overall programme coordinator and foreign relations and OD officer's position have not been filled.</p>	H	<p>MRCS human resource policy was updated in 2010, as many national societies are facing challenges in terms of financial sustainability to remain its capacity in an adequate functional level. Therefore, fundraising activities need to be foreseen to tackle this issue.</p> <p>Supervision of newly recruited staff needs to be improved,</p>
<p>Procurement and distribution of relief items are being delayed during emergencies and disasters due to operational gaps in logistics as well as other factors such as road conditions and extreme weather. As a result there have been cases of beneficiaries receiving relief winter items in summer.</p>	H	<p>Plans to construct a national warehouse in Tuv province is one aspect which could meet the lack of operational capacity in MRCS. MRCS logistics needs to improve its structure and policy to reduce delays in procuring items within the organization. There is currently no logistics' policy and structure in place. Also, there need to be agreements with local suppliers who supply relief stock items to ensure smoother and more efficient transactions.</p>
<p>The National Parliament election was held in June 2012 followed by a local election in November 2012. In some places re-election was announced. Election processes led to a delay in the establishment of an operational government which in turn had an effect in some of the implementation of planned activities. As a result of the Parliament, Mongolian Democratic Party (MDP) formed a central government under the theme of 'renovation government'. At a local level, MDP won more than half the districts and provinces. Therefore, significant personal changes occurred in collaborating state organizations.</p>	M	<p>MRCS needs to introduce itself to the new government to revive the MoU which was made with the previous government as well as carry out its agreement with all levels of government administration units.</p>
<p>A risk audit exercise in May 2012 which produced a "Risk Register" and an action plan,</p>		<p>During September and October (2012) the</p>

<p>became the basis for MRCS to establish an OD process. One of the outcomes of the internal audit for the IFRC is that the PNS and IFRC have to cooperate better – at least two PNS have chosen to work exclusively bilateral which has isolated them from other Movement support activities.</p>		<p>head of East Asia regional delegation in Beijing spoke with all concerned PNS, the MRCS, the Mongolia IFRC HoD, Director AP and the secretary general and with these partners, attempt to create a cooperative environment which contributes to MRCS' capacity building and a Federation-coordinated approach for Mongolia. Some of the issues from the risk audit will be further worked on in 2013.</p>
<p>The winter 2012/2013 was harsh with thick snow coverage, high frequency of snowing, and extremely cold compared to the multi-year average in Mongolia. According to the information from NEMA in 16 January 2013, approximately 90 % of Mongolian territory has been covered with snow and the winterization in 91 soums of 16 provinces was in dzud condition.</p>	<p>M</p>	<p>Close monitoring of the country's situation is needed by MRCS's MLBs and updated information from NEMA. MRCS's DM programme needs to initiate an action plan for dzud and submit a proposal for an appeal.</p>

## Lessons learned and looking ahead

It is essential that the MRCS continues to explore the available opportunities to enhance their cooperation with the Mongolian authorities and private sector to secure their sustainability as an organization. It is also of vital importance that the partners of the MRCS work more closely and collaborate in supporting the interests of the MRCS towards the MRCS Strategy 2015 and IFRC Strategy 2020.

## Financial situation

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

## How we work

All IFRC assistance seeks to adhere to the [Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations](#) (NGO's) in Disaster Relief and the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable.

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

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The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of nonviolence and peace.

Find out more on [www.ifrc.org](http://www.ifrc.org)

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