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Emergency appeal final report

Myanmar: Cyclone Nargis

 International Federation
of Red Cross and Red Crescent Societies

Final report
Emergency appeal n° MDRMM002
GLIDE n° TC-2008-000057-MMR
18 November 2011



A total of 16,264 houses have been built for families living in sub-standard shelter or who were displaced and living with foster families or in community centres. *Photo: Yin Yin Myint / MRCS*

Period covered by this final consolidated report: May 2008 to September 2011

Appeal target (current): CHF 68.6 million¹

Appeal coverage: 102%

[<click here to go directly to the final financial report, or view contact details>](#)

¹ The budget was revised down to CHF 68.6 million in March and accordingly, the revised appeal was extended by two months from May to end July 2011. This was indicated in Operations Update No 30 issued on 2 March 2011.

Appeal history:

- 2 March 2011, the budget was revised down to CHF 68.6 million and the revised appeal extended by two months from May to end July 2011.
- 8 July 2008: A revised emergency appeal was launched for CHF 73.9 million to assist 100,000 households for 36 months.
- 16 May 2008: An emergency appeal was launched for CHF 52,857,809 to assist 100,000 households for 36 months.
- 6 May 2008: A preliminary emergency appeal was launched for CHF 6,290,909 to assist 30,000 households for six months.
- 5 May 2008: CHF 200,000 was allocated from the International Federation's Disaster Relief Emergency Fund (DREF).

Summary:

The three-year fully-funded Cyclone Nargis recovery operation has been successfully completed, reaching about 174,000 households and 132,460 school children in the Ayeyarwady Delta.

While the operation came to an official close at the end of September with a highly satisfactory reconciliation of National Society working advances, field activities concluded in May and the nine hub offices in the Delta closed progressively between June and July. The conclusion of field activities and the closure of hub offices which involved the departure of staff as per the terms of their employment contracts and a sizeable inventory and transfer of assets and materials, were conducted smoothly thanks to detailed transition planning jointly undertaken by MRCS and IFRC early on in the operation. The month of October 2011 has been devoted to finalizing the required financial and narrative reporting.

Out of the total appeal target of CHF 68.6 million, a total of CHF 65.8 million has been spent. Approximately CHF 5.3 million remains unspent from the total income of the operation which stands at CHF 71.1 million. With the approval of partners, this balance of CHF 5.3 million will be transferred to the annual programme income for use for activities including those under disaster management, water and sanitation, health and care and organizational development, to be conducted by MRCS with IFRC support over the next few years. Details on the sectoral allocation of these funds will be provided in forthcoming programme updates produced by IFRC.

Donors are encouraged to contact the [Asia Pacific zone office](#) within the next 30 days if they have any queries or require clarification regarding this reallocation.

With the Cyclone Nargis operation successfully completed, the Myanmar Red Cross Society (MRCS) stands today as a National Society very much strengthened in terms of improved and new capacities, renewed confidence in its ability to assist the most vulnerable, and funding security for the next few years. The way forward presents a number of possibilities, foremost of which is for the society to sustain and strengthen its abilities, thus making its newly-developed *Strategic Plan 2011-2015* a reality. In this regard, the Cyclone Nargis experiences which have been well captured through a series of *lessons learnt* sessions and documentation, should serve as an important reference point. Observations on the society's present situation and future are presented in the [Lessons Learnt](#), [MRCS Capacity](#) and [Looking Forward](#) sections in this report.

Lessons learnt

There has been a considerable amount of lessons learnt and documented² from this operation – the result of a concerted effort among programmes, operations management and support services in the months preceding the closing of the operation, to take a step back and reflect on successes and challenges encountered over the past three years. For the purposes of brevity and external relevance, only the most essential lessons learnt are presented in this report:

- The most important learning gained from the Cyclone Nargis operation is that, through good coordination, communication and the focused resourcing of required skills, it is possible to successfully run a large and complex recovery operation within a country context that is filled with various challenges.
- Key factors which ensured the success of this operation are:
 - The fact that 77 per cent of funding was secured within the first seven months of the operation, followed by close to 100 per cent of funding by the end of the first year of operations.

² These will also be shared with the IFRC Asia Pacific Zone Office and also with interested partners and stakeholders.

- Restricting the focus of the operation to an “ambitious yet achievable scope” as pointed out in the final evaluation³ of the operation.
 - The availability of experienced delegates during both the relief and recovery phases.
 - The relatively low turnover of delegates and their National Society counterparts during the recovery phase of the operation. In particular, it should be noted that while management of the operations changed hands three times during the first seven months of the operation, the presence of the fourth head of operations over a 30-month period (January 2009-June 2011), was instrumental in ensuring good direction, momentum and stability for the operation.
 - Positive and productive daily interaction between MRCS and the IFRC country delegation.
- Having adequate organizational structures and procedures ready is essential for timely and effective emergency response and recovery operations. In this regard, the lack or inadequacy of important organizational structures (e.g. logistics, human resources) and standard operating procedures within MRCS at the outset of the Cyclone Nargis operation, meant that more time was needed to scale up and effectively deliver programmes.⁴
 - The fact that recovery planning began without much delay during the relief phase, facilitated a timely transition from relief to recovery which enabled emerging recovery interventions to be conducted along with outgoing relief activities. However, some locations saw significant gaps between the time of recovery assessments and the launch of activity planning and implementation because of the decision to complete all assessments over a large geographical area (about 17,558 sq km⁵) prior to planning and implementation – the learning gained from this is that staggering assessments and recovery action according to geographical and accessibility conditions, can be an option to ensure recovery assistance is initiated as early as possible.
 - A lack of integration of recovery assistance was experienced as a result of the initiation of different sectoral activities according to different timelines as well as the wide operational area which needed to be covered. More efforts should therefore have been made at the outset of recovery planning towards integrating activities for the benefit of affected communities.
 - The transition of a large recovery operation to regular programming needs to begin as early as possible, and consultation with beneficiaries, field offices, volunteers and staff has to be carried out with care and on a continuous basis. These practices were adopted to a large extent in the Nargis operation and helped enormously towards its smooth transition.
 - The hub model which was adopted in the operation and provided for the establishment of new National Society field offices (known as hub offices) to complement existing Red Cross structures, to facilitate the robust implementation required of the large-scale Cyclone Nargis operation, has proven to be appropriate and successful. Appropriate measures to counter friction between Red Cross stalwarts (leaders of township-level volunteer brigades) and ‘newcomers’ (hub managers), were also adopted early on, and foremost among these was the monthly hub managers meeting in Yangon attended by leaders of both old and new structures, and who provided insightful updates on field successes and challenges. It should also be noted that the hub model in place of IFRC sub-delegations in the field rightfully gave the National Society a stronger sense of ownership of the operation.
 - Providing assistance holistically to communities is likely to have greater impact than wide and sparse delivery to individual households⁶. To a large extent, this holistic targeting was practised in the Cyclone Nargis operation.
 - The meaningful involvement of communities in assessment, planning, beneficiary selections and monitoring has brought about a high sense of ownership, one of the key ingredients of sustainability.⁷

³ *Final Evaluation of the Cyclone Nargis Operation in Myanmar, 2008-2011.*

⁴ *Ibid.*

⁵ Calculation made by IFRC Geographical Information Systems (GIS) unit based on data provided by the Myanmar Information Management Unit (MIMU).

⁶ *Final Evaluation of the Cyclone Nargis Operation in Myanmar, 2008-2011.*

⁷ *Ibid.*

- MRCS has proven that a National Society is capable of stepping up to immense challenges and in the process, scale up its capacity, if it has the leadership and 'heart' to do so.

Achievements in general

- The recovery operation managed to assist approximately 174,000 households and 132,460 school children, surpassing the overall operation target (relief and recovery) of 100,000 households.⁸
- As a result of the assistance provided, affected communities have regained or improved their pre-cyclone economic situations and living conditions, and are more importantly, better prepared for future disasters thanks to:
 - Health education including disease prevention and positive behaviour change aided in part by the construction of more latrines and promotion of hand-washing.
 - A very substantial number of new and protected water sources and water collection structures, as well as improvements to pre-existing sources and structures. This has been complemented with efforts to encourage communities to adopt household water treatment methods and engage in good hygiene.
 - Dissemination of household water treatment methods and other hygiene practices.
 - A significant number of buildings (new or repaired) which can serve as storm shelters.
 - Livelihoods assistance including training.
 - Disaster risk management awareness and practices inculcated among communities at-risk.
 - Psychosocial support provided in the initial aftermath of the cyclone in the form of one-to-one counselling, followed by social activities aimed at improving the general well-being of communities during the first year of recovery.
- A stronger National Society which has strengthened its human resources, financial, logistics, and reporting abilities, as well as its longstanding core capacities in health and care, and disaster management, and gained new capacities in water and sanitation, livelihoods and shelter.

Challenges in general

- The sizeable reduction in international staff numbers in the second quarter of 2009⁹ when the operation was entering a phase of significant scaling-up of programme implementation, had the potential of slowing down the operation and its ability to reach vulnerable communities. Fortunately, with good direction and management, the Cyclone Nargis operation team (MRCS and IFRC) managed to successfully weather this unexpected transition.

The team faced another setback when the entire IFRC Cyclone Nargis operation team (with the exception of the head of operations) relocated to Bangkok between late October 2010 and January 2011, due to uncertainties related to the impending general elections in November. Fortunately by this time, a significant amount of capacity had been built among National Society staff and IFRC national staff, and this enabled the in-country team to continue activities with adequate momentum, under the leadership of MRCS and IFRC operations managers and the remote guidance of delegates in Bangkok via the Internet and telephone. It was also noted that this situation enabled several local staff members to further enhance their capacities and provide very competent assistance to operations management.

- Discussions with authorities in a few locations, concerning cash grants for beneficiaries receiving shelter and livelihoods assistance, prompted a revision to programming in the first quarter of 2009, which in turn led to slight delays in reaching affected communities. At the same time, the need for hub offices to prioritize resources for shelter and livelihoods interventions to catch up on lost time meant that other sectoral interventions such as water and sanitation had to take a back seat for a while. It should be noted that the project approvals gained by MRCS at central government level facilitated the implementation of activities at a community level, since these gave the municipal authorities the confidence to approve adjustments to activities as best suited the actual needs of affected villages.

⁸ During the relief phase of the operation, support was provided to approximately 280,000 families in need. Recovery phase figures of 174,000 households and 132,460 school children have taken into account possible duplication of beneficiary figures as a result of cross-sectoral assistance provided. They also include 92,950 households reached in non-Nargis operation areas through community-based disaster risk management activities.

⁹ As per new visa regulations affecting all international agencies.

- The gradual shift of the National Society from Yangon to its new headquarters in Naypyidaw, the administrative capital, which began in 2010, affected the frequency of interaction between MRCS and IFRC, and this consequently led to some delays in decision-making and implementation.
- Due to the huge volume of National Society human resources needed for the Cyclone Nargis operation, some aspects of annual programming were inevitably affected but on the whole, an acceptable amount of continuity was seen in annual activities.

The situation

Cyclone Nargis struck Myanmar on 2 and 3 May 2008, devastating the Ayeyarwady and Yangon regions¹⁰. The official figures of 2 July 2008 indicate that 138,300 people were killed. The UN estimates that 2.4 million people were affected. A total of 37 townships were significantly affected by the cyclone¹¹.

The Cyclone Nargis operation conducted by Myanmar Red Cross Society (MRCS) with the support of the International Federation of Red Cross and Red Crescent Societies (IFRC), targeted **100,000 affected households in 13 townships**. They are Kungyangon, Dedaye, Kyaiklat, Pyapon, Bogale, Maubin, Mawlamyinegyun, Labutta, Ngapudaw, Twantay, Kawhmu, Myaungmya and Wakema¹². In total, Cyclone Nargis operation areas in these townships make up a land area of approximately 17,558 sq km.¹³

Red Cross and Red Crescent action

Achievements against outcomes

(For tables of the objectives against which these achievements are measured, [click here](#))

Overview:

Relief phase

While this report focuses on the Cyclone Nargis operation's recovery interventions, a summary of its relief phase will be useful in providing context:

From May to November 2008, relief distributions reached over 280,000 households in the 13 targeted townships, as well as an additional 15 townships¹⁴. The distributions covered over 3,200 villages across 770 village tracts¹⁵ in the delta area. Other support provided included the production of safe drinking water through the deployment of water and sanitation Emergency Response Units, as well as first aid and health activities aimed at preventing disease outbreaks and inculcating good health practices among vulnerable communities.

An external review¹⁶ of the relief phase, commissioned by IFRC/MRCS, found the Red Cross Red Crescent response to Cyclone Nargis to be "broadly effective, providing urgently-needed relief to a large number of people in a relatively timely manner across a wide geographical area".

The emergency shelter cluster which was convened by IFRC, was also noted as one of the more successful clusters (alongside health) which provided a robust response featuring "strong reporting, comprehensive delivery, and close coordination".¹⁷

¹⁰ Myanmar consists of state or regional administrative structures.

¹¹ Source: *Post-Nargis Joint Assessment of July 2008*, prepared by the Tripartite Core Group (comprising the Government of the Union of Myanmar, Association of Southeast Asian Nations, and the United Nations), with the support of the humanitarian and development community.

¹² Full recovery programming is being implemented in 11 of the 13 targeted townships under the appeal. Reduced programming is undertaken in the remaining townships of Wakema and Myaungmya due to the relatively small number of affected households.

¹³ Calculation made by IFRC Geographical Information Systems (GIS) unit based on data provided by the Myanmar Information Management Unit (MIMU).

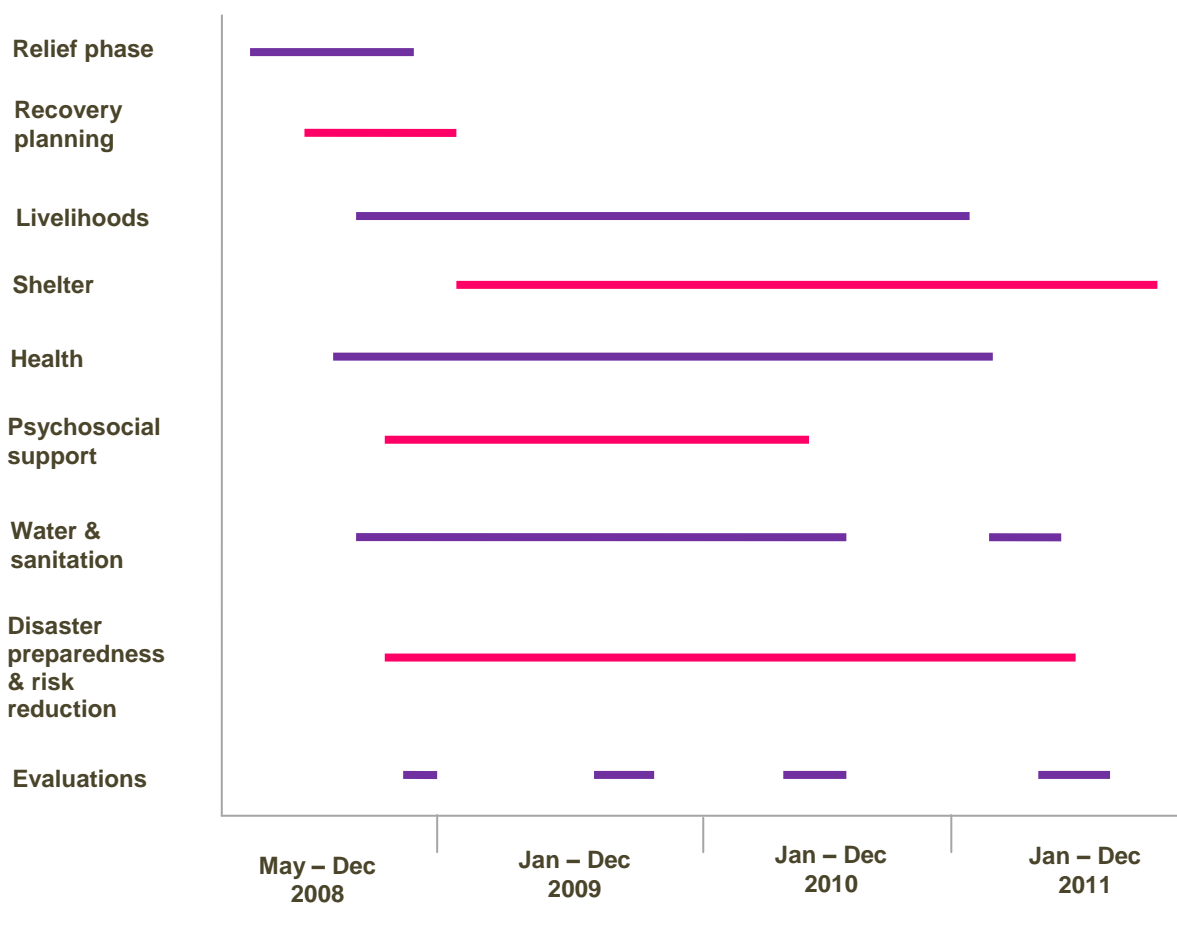
¹⁴ The additional 15 townships were reached mainly in the early stages of the operation – this period preceded the Revised Emergency Appeal of July 2008 which targeted the 13 most-affected townships.

¹⁵ A village tract is the local administrative level below the township, and consists of a varying number of villages.

¹⁶ *Review of the Red Cross Red Crescent Movement response to Cyclone Nargis, Jan 2009* (Andy Featherstone and Jo Shetliffe).

¹⁷ *Emergency Shelter Cluster Review, Cyclone Nargis Myanmar, April 2009*.

Cyclone Nargis operation timeline



Recovery in general

Planning

Recovery-phase interventions were based on an extensive Delta-wide multi-sectoral assessment undertaken between September 2008 and January 2009, in all 13 townships targeted by the operation. Guided by the needs of vulnerable communities derived through this assessment, the Cyclone Nargis operation's recovery phase has been implemented in 161 village tracts¹⁸, taking care to avoid overlaps with other agencies.

It should be noted that while this assessment served as the foundation of planning for the operation's recovery phase proper, some early recovery interventions in health, and water and sanitation, began earlier in July 2008, while livelihoods assistance through cash-for-work opportunities began in October.

Community consultation and participation

An essential component of the village tract-based recovery operation was the establishment of village tract recovery committees to ensure community consultation and participation. The committees have been instrumental in relaying information on community needs during the planning stage, assisting in beneficiary selections which have been based on needs, and facilitating community participation in recovery activities. Provided with training and oriented in the Red Cross Red Crescent Movement's Code of Conduct, the committees have also disseminated information among Delta communities, and assisted with transparency and accountability efforts, and monitoring activities (e.g. checking the quality of household shelter materials provided by suppliers), as well as resolving issues from time to time. The establishment of community notice boards featuring beneficiary lists as well as the provision of mechanisms for various types of community feedback to MRCS through a letter box system and verbal communication, have also aided in transparency and accountability efforts, and ultimately advanced community acceptance and participation in recovery activities.

¹⁸ A village tract is the local administrative level below the township level, and consists of a varying number of villages.

Operations management

While successful operations management at headquarters level was facilitated by daily and positive interaction between MRCS and IFRC managers, the more critical aspect of field management and implementation was greatly aided by the support of hub offices as well as pre-existing Red Cross branches which have complemented each other (for e.g. water and sanitation; and health hub teams comprised a combination of engineers, technicians and medical officers, as well as Red Cross volunteers). While hub offices oversaw field management and implementation, Red Cross branches were relied on for their local knowledge, close interaction with communities and significant level of local human resources (through Red Cross volunteers). It should also be noted that the strong field support received was due to the sheer dedication of hub staff and Red Cross volunteers whose capacity was built up progressively through the course of the operation through on-the-job training as well as formal training sessions.

Coordination efforts with authorities and other humanitarian players through cluster meetings in Yangon and in targeted townships, also greatly aided day-to-day implementation and management.

For an analysis of the operation's income and expenditure, please see the Financial Analysis section towards the end of this report.

Shelter

Outcome 1: To ensure vulnerable households (especially those living in public places, with host families or in emergency shelters) have materials to rebuild their shelters, and increase the capacity of the community to make their shelters storm-resistant.

Outcome 2:

To replace public buildings for health, education and community activities, some of which will provide 'safe havens' in the events of storms.

Activity	Recovery target	Achievement	Households / Beneficiaries reached
Household shelter	16,376 houses	16,264	16,264 households
Red Cross posts	100 posts	100	7,860 households
Repairs to community buildings / infrastructure	232 buildings / infrastructure	232	communities in 232 villages
Sub-rural health centres	20 centres	20	communities in 8 townships
Schools	25 schools	25	approx. 3,250 children

MRCS with the support of multilateral (IFRC) and bilateral Red Cross Red Crescent Movement partners, has carried out one of the largest household shelter construction projects as well as the construction of schools, sub-rural health centres and Red Cross posts, and repairs to community infrastructure in the Delta. Details follow:

1 Household shelter

Impact:

The household shelter project is undoubtedly the most high-profile of the five shelter-oriented interventions undertaken by MRCS/IFRC during the recovery operation, because of the fact that it has served to fill a very pressing need i.e. to provide better and more durable homes to families living in sub-standard shelters (83 per cent of beneficiaries) or displaced families who were still staying with foster families or at community centres months after the cyclone.

In total, 16,264 shelters or homes were constructed during this operation between early 2009 and September 2011. *(For information on the remaining uncompleted 112 shelters, please see 'Pending activities' below)* The project began with a first phase of 7,800 houses and was followed by a second phase of 8,476 houses. This support has been extended over a wide geographical area – 700 villages across 11 townships in the Delta.

Beneficiaries have received these homes very positively, based on feedback received through surveys¹⁹ conducted during the project. Among the survey findings are:

- Most beneficiaries (89 per cent of respondents) say they are living in better shelters than before Cyclone Nargis happened.
- Most beneficiaries believe their shelters can withstand common storms which occur every few years (92 per cent of respondents).
- A large number of respondents believe their houses will last longer than six years (63 per cent).
- Most report a high level of satisfaction with the value and quality of materials supplied (94 per cent). The household shelter project enabled beneficiaries to design their new homes and choose their preferred building materials such as bamboo, thatch, *dani* (a type of palm) and timber. This method of consulting with communities enabled the Red Cross to give due consideration to local customs and knowledge, and to employ them for the success of the activity.



Some houses include storage space in the roof which can be useful during flooding.

Other benefits which beneficiaries or communities as a whole received through this assistance include:

- latrine construction assistance which has provided individual households with greater convenience and the opportunity to engage in improved hygiene.
- the stimulation of the local economy through the supply of local materials, transportation and labour. Overall, about USD 7.9 million worth of indigenous materials were procured for this project. Local costs also helped keep the cost of constructions relatively low at about USD 440 per house.
- the emphasis to local carpenters and beneficiaries to adopt disaster risk reduction (DRR) construction techniques. This was relayed through the dissemination of *build back better* brochures (created jointly with UN Habitat) and reinforced by monitoring visits of field-based shelter technicians. The lack of adoption of DRR construction techniques among house owners in the first phase, led to a renewed emphasis through heightened training for carpenters in the second phase of the project.



A timber framed house featuring wall corner-bracing.

Context and Challenges

The Red Cross is among the largest providers of household shelter in the Delta (providing about 26 per cent of the total shelter support provided by the UN, Red Cross and international and national non-governmental organizations). The MRCS/IFRC household shelter project has been held in high regard by international agencies who have commended it as a good example during cluster meetings.

The recovery phase of the shelter programme was slow to start because of a slight gap encountered between the departure of the shelter delegate in the relief phase and the arrival of the shelter coordinator. Nevertheless, the plan for the recovery phase was put together in good time, focusing on the provision of household shelter to the most vulnerable of affected communities such as single-headed households, the elderly, and the disabled.

Another delay encountered shortly after the household shelter project took off was related to the fact that local authorities in one or two locations were not in favour of the concept of providing cash grants to beneficiaries for the procurement of materials and such (*also mentioned in the 'Challenges in general' section*). As a result, the amount of cash disbursed to beneficiaries was significantly reduced, serving to meet essential costs such as tools and carpenter services.

¹⁹ Two internal surveys conducted in Phase 1 and 2, covering about 20 per cent of beneficiaries in each phase.

Delays were also encountered as a result of monsoon rains (May to October) which hampered field travel and the transportation of materials, particularly to remote communities. This challenge was faced across all programme sectors of the operation, during the implementation of a variety of activities.

Pending activities

A remaining 112 household shelters in the sub-township of Hainggyikun, are scheduled to be completed by late October or November this year²⁰ – this is being monitored by the MRCS township branch and the IFRC field unit. This remainder is part of some 400 shelters which were delayed in construction because they have been provided for recently relocated communities in remote parts of the Delta. The monsoon rains (May to October) have compounded the delays. On the whole, however, this project has progressed well and has met initial and expanded targets.

2 Construction of schools

Impact:

The 25 schools constructed through the Cyclone Nargis recovery operation have benefited approximately 3,250 children in the townships of Bogale and Pyapon.

The schools are seen as an important component of recovery interventions as many schools were either destroyed or severely or partially damaged, resulting in over-crowding of remaining schools or students being

housed in temporary schools or even foregoing school for some time. The schools were completed by mid-2010 in time for the start of the new school year, thus helping to normalize schooling conditions and patterns for children affected by the disaster.

Featuring improved specifications (compared to pre-existing schools) such as reinforced concrete frames, raised floors and in some schools - solar panels²¹ - the schools have also been built to serve as storm shelters. They include 5,000 gallon rainwater collection tanks (at full capacity, the tanks can serve the drinking water needs of entire villages during emergencies) and latrines which have been constructed by water and sanitation teams.

The schools have certainly been well received by students and teachers, local communities, and local authorities, as well as the Ministry of Education to which they have been handed over. Examples of the positive feedback received are reflected in the comments of teachers from Kyon Tar village in Pyapon, where a new school was built to complement a partially destroyed and overcrowded school: “In my 30 years of teaching, I never dreamt of such a nice building,” says one of the teachers. The school headmistress notes that the new building and furniture, have given students fresh enthusiasm to learn.

3 Repairs to community infrastructure and buildings

Impact:

This project has been useful in meeting the recovery needs of affected communities as they have been provided with materials to perform repairs to 232 community buildings or infrastructure such as monasteries (predominantly the main building in most villages), as well as community



Schools

25

schools built
for the benefit
of 3,250
children.

Photo: Ei Ei Chan
/ IFRC



The headmistress of the new school in Kyon Tar village, Pyapon notes student enthusiasm for school has risen with their new facilities.

²⁰ This is being monitored by MRCS/IFRC.

²¹ Some schools also feature solar panels, courtesy of individual contractors.

centres, bridges and jetties. The improved buildings and infrastructure also serve to provide communities with some measure of protection in the event of future disasters or emergencies – monasteries served as refuges for many communities during the onslaught of Cyclone Nargis. Furthermore, as a result of community-based disaster risk management interventions undertaken by MRCS among some communities, village-level disaster management teams have identified community buildings such as monasteries as evacuation buildings – these buildings have since been equipped with loud speakers (for early warnings) and related equipment and materials. Due to popular demand among vulnerable communities, this project also saw a second phase.

4 Construction of Red Cross posts

Impact:

The *construction of Red Cross posts* is a project aimed at providing communities firstly with a village-level facility which provides first aid and promotes health education. This aim has materialized well in view of the significant and growing presence of trained Red Cross volunteers and community volunteers, thanks to the health programme's efforts (*please see CBHFA section below for more information*).

Equipped with first aid kits, stretchers, a whiteboard, IEC²² materials as well as solar panels, rainwater collection tanks and latrines, these posts which are located across all 13 townships targeted by the Cyclone Nargis operation have been used for various health-oriented activities such as immunization sessions, hygiene promotions and volunteer meetings. The posts have also been used by MRCS hub officers such as shelter and livelihoods technicians when meeting with beneficiaries. Over time though, the use of these posts has expanded to meet other needs of communities: small-scale village meetings, reference centre, school, nursery, night classes, and even as an overnight guest house for unexpected visitors with the approval of village leaders and authorities.

Field monitoring suggests that the prospect of future sustainability of the posts by communities themselves looks promising particularly in view of the presence of trained Red Cross and community volunteers. In this regard, a survey on the use of Red Cross posts by communities upon the conclusion of the operation is underway.

5 Sub-rural health centres

Impact:

Twenty *sub-rural health centres* have been constructed to meet the maternal healthcare needs of communities in eight townships. The centres have replaced or supplemented those which were damaged by the cyclone. These centres which have been handed over to the Ministry of Health, also contain equipment and furniture. The main personnel at each centre comprises a mid-wife and a public health surveillance worker, both of whom are Ministry of Health staff. The key role of the mid-wife is to conduct immunizations, check-ups for expectant mothers, and promote breast-feeding and nutrition. The centres are also responsible for basic treatment of communicable diseases, emergencies and referrals. In some townships, trained traditional birth attendants (whose main responsibility is to carry out deliveries) as well as volunteers trained as community health workers also assist the mid-wives.

6 Construction of and repairs to MRCS township branch offices

Impact:

On the request of the National Society, repairs and renovations have been carried out to six MRCS township branch offices with funding from this programme. Offices for Red Cross branches in three other townships - Bogale, Labutta and Pyapon - are also being constructed. The offices are expected to be completed by the end of 2011, and IFRC support consists of monitoring of construction progress as well as the disbursement of construction payments. The buildings are meant to aid the Red Cross township branches in implementing activities for the benefit of vulnerable communities.

²² Information, education and communication (IEC) materials.

Livelihoods

Outcome 1:

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

Outcome 2: Cyclone-affected households recover their livelihoods and improve their wellbeing, with increased knowledge and capacity to withstand disasters.

Outcome 3: Community natural resources are restored, enabling livelihoods and protection from natural disasters.

Activity	Recovery target	Achievement (beneficiaries reached)
Cash-for-work	9,000 beneficiaries	7,444 beneficiaries
Community tree-planting	58 projects / villages	Communities in 58 villages
Asset-based recovery		
Fertilizers & cash support (monsoon paddy)	8,721 beneficiaries	8,708 beneficiaries
Crop & vegetable farmers including summer paddy	2,374 beneficiaries	2,374 beneficiaries
Livestock farmers	2,529 beneficiaries	2,529 beneficiaries
Fishing communities	4,528 beneficiaries	4,528 beneficiaries
Small businesses	1,214 beneficiaries	1,214 beneficiaries
Pilot project:		
Community revolving fund	173 beneficiaries	173 beneficiaries

* The total number of beneficiaries targeted for cash-for-work could not be reached due to reduced opportunities for integration between livelihoods and other programmes – integration efforts were planned for the latter phase of the CFW project.

Cash-for-work

Impact:

As an immediate measure to provide the most vulnerable communities such as casual labourers and the landless with much needed income, *Cash-for-Work* interventions were introduced in late 2008. This activity which benefited a total of 7,444 people and their families, ended in mid-2009 and was seen as an intervention which successfully provided cash-strapped families with quick relief. The activities have also led to the strengthening of village infrastructure such as access roads, jetties, river embankments and irrigation canals.

Asset recovery

Impact:

The initial *cash-for-work* assistance was followed by a series of *asset recovery interventions* which have helped communities in the following ways:

- regain or improve on their economic activities which had been destroyed or badly affected by the cyclone. The assistance provided consisted of fertilizer support for paddy farmers, followed by support for other crop farmers (seed/sapling support), livestock farmers (adult chickens and ducks, as well as piglets), fishing communities (boats and/or nets), and small business men and women (grocery supplies, sewing machines, handicraft materials).



Receiving a boat with Red Cross support has helped this village member to break free of the debt cycle and plan for his children's education.

Regular monitoring indicates that these interventions along with the initial cash-for-work interventions have provided effective assistance to Delta families in securing cash – earlier inter-agency surveys or monitoring had found that in their attempts to rebuild their lives in the post-cyclone period, people were borrowing money at high interest rates and as such, the high repayments prevented them from recovering and in fact, kept them in a cycle of debt. An example of the effectiveness of the assistance provided can be seen in the experience of a village member of Kyaiklat township who received a boat through livelihood support, who has been able to make some savings and send his youngest child to school because he no longer has to pay rental charges for a boat. He plans to continue to save so that his two other children can also attend school.

- improve the technical capacities of beneficiaries by providing them with necessary training, thus helping them improve the quality of their livelihoods and improve their earnings. Examples of this are the training provided to paddy farmers to improve their knowledge and practices in reference to pest control and to reap a higher yield; and guidance on livestock care to farmers, with the support of trainers from relevant governmental ministries or agencies such as the Myanmar Agricultural Services department, as well as officers from the fisheries, livestock and veterinary authorities.
- provide beneficiaries with better means of making a living e.g. casual labourers who now earn better incomes as fishermen or boatmen (by providing village transportation), and handicraft weavers.

Revolving fund pilot project

Impact:

Due to the continued need for cash among vulnerable communities, many of whom are still observed to be borrowing money at high interest rates from money lenders, a decision was made to extend the livelihoods programme through a *pilot project on revolving fund assistance*, focusing on women as direct beneficiaries. Launched in May and completed in July this year, the project successfully created two separate funds for women in two villages in Maubin township. The fund enables each group member to receive an income by taking turns and has been positively received by the women with one group opting to put in some of their savings into the fund to increase the overall capital. Upon the completion of the project in July, monitoring responsibilities were handed over to the township Red Cross branch.

Community tree-planting

Impact:

This initiative has helped protect the environment (the Delta comprises vast stretches of flat land with very little tree cover which was significantly damaged by the cyclone), while serving as a disaster risk reduction measure by providing some protection or cover against future storms. It also benefits individual households by helping to supplement their diet and income.

Context and challenges

Implemented in coordination with the Forestry Ministry, the project involved the planting of a variety of shade tree saplings along public pathways, and the distribution of fruit tree saplings (introduced during the second phase of the project, along with shade tree saplings) to individual households. The high rate of sapling deaths (50 per cent) seen in the first phase of the project was addressed in the second phase through the establishment of village-level monitoring committees who were tasked with the care of the saplings and were provided with support to do this. As a result, the survival rate of trees reached 90 per cent in the second phase.



Livelihoods

26,970

people assisted
in recovering
and improving
their
livelihoods.

Photo: MRCS

Community-based health and first aid²³

Outcome 1 (medium and long-term): Ensure access to basic health care, first aid and psychosocial support by training community-based health and first aid volunteers and putting a referral system in place, in coordination with the Ministry of Health, and involving the community in health, hygiene promotion (in support of the hygiene promotion activities carried out by water and sanitation sector) and sanitation activities.

Outcome 2 (medium and long-term): Strengthen the capacity of MRCS to manage an integrated *community-based health and first aid-in-action* approach which includes water and sanitation, and psychosocial support activities, conducted in emergencies and normal situations, in coordination with the Ministry of Health.

Activity	Recovery target	Achievement (beneficiaries reached)
Access to basic healthcare and first aid; health education	200,000 beneficiaries	160,014 beneficiaries
School hygiene promotions	120,000 school children	127,410 school children
Health and water & sanitation integrated activities	100,000 beneficiaries	71,993 beneficiaries
Community-initiated activities facilitated by community volunteers	100,000 beneficiaries	77,255 beneficiaries
TB project: beneficiaries reached with home-based care	7,000 beneficiaries	6,554 beneficiaries
Trained community volunteers	5,000 community volunteers	4,358 volunteers
Red Cross Volunteers trained as CBHFA facilitators	247 RCVs	247 RCVs
Red Cross Volunteers trained in TB support	364	364 (330 active)

Impact:

The most significant achievements reaped through health initiatives under this appeal have been:

- the improved health practices among vulnerable communities, and
- the substantial number of villagers trained as community volunteers (almost 4,358) who have helped bring about this positive behaviour change among their respective communities, and continue to do so.

An impact study²⁴ commissioned by MRCS in the second quarter of this year, and undertaken by an external consultant, using health data from an initial assessment done in late 2008 as a baseline, found a number of improvements reflective of behaviour change such as:

- reduced incidence of diarrhoea among children aged under five years of age (six per cent compared to 14.1 per cent in the baseline survey)
- increased usage of latrines for defecation, among children aged 3 to 12 (81.5 per cent compared with 73.8 per cent in the baseline survey)
- more hand washing facilities were observed in the surroundings of homes (88 per cent compared to 64.4 per cent in the baseline survey)

²³ It should be noted that in Myanmar, the transition from community-based first aid (CBFA) to the community-based health and first aid (CBHFA)-in-action approach is being undertaken in stages, and as such, not all elements of CBHFA have been adopted and put into practice.

²⁴ The study compared its findings with surveys conducted in 2009 and 2008.

- more beneficiaries have knowledge of dengue prevention (e.g. 87.8 per cent compared to 50.9 per cent in the baseline survey, cited the use of a mosquito bed nets as a means of prevention).
- increased number of farmers who use rubber boots to reduce the risk of snake bites (53.7 per cent compared with 37 per cent in the baseline survey).

The study also noted aspects of community health practices which are in need of strengthening:

- The practice of hand washing with soap after cleaning a child's bottom and before feeding children – although an increase in this practice was found, the overall incidence of this practice was low i.e. less than 15 per cent and 10 per cent respectively. Therefore, more hygiene education was recommended for communities.
- While patient referrals to hospitals were undertaken by some Red Cross volunteers, the study noted the need to introduce a systematic referral system for volunteers to follow, and the need to provide volunteers with funds to facilitate referrals

School children

School children represent an important target group reached by the health programme, specifically through school-based hygiene promotions. Reports indicate that children have been very receptive agents of positive behaviour change, eagerly passing on their knowledge to their parents and siblings. One such example is one Grade 5 student at Bant Bway primary school in the sub-township of Hainggyikyun who proudly announces “Yes, I know how to wash my hands properly. Those ‘sisters’ taught us and our teacher also reminds us”. Approximately 127,410 children have been reached through school-based health education activities.

TB patients

Another target group reached by the health programme is tuberculosis (TB) patients. Beginning from 2009, MRCS participated in the government's nationwide TB campaign by training 364 Red Cross volunteers²⁵ in TB care. The volunteers have reached a total of 6,554 TB patients by providing home visits to reduce the incidence of defaulting in treatment.

Context and Challenges

MRCS was able to reach large numbers of vulnerable communities with health care assistance in relatively good speed because of its long-standing expertise in health and care, and a good base of volunteers trained in first aid. In the immediate aftermath of the cyclone, a group of volunteers previously trained as trainers, attended refresher training, and helped initiate early recovery healthcare activities. The beginnings of this phase also saw the training of 247 Red Cross volunteers who later assisted MRCS field-based health officers in conducting community-oriented health activities and in training villagers from affected communities, as community volunteers.

A huge body of community volunteers was trained progressively between the third quarter of 2008 and late 2010, and were the frontrunners of village participants in regular health activities such as hygiene promotions organized by MRCS field-based health teams comprising health officers and Red Cross volunteers.

Upon the departure of MRCS health officers from the field between mid-2010 and early 2011, community volunteers carried on health activities under the supervision of Red Cross volunteers. The most significant responsibilities of community volunteers has been in facilitating or leading community-oriented activities such as environmental clean-up campaigns and in conducting monthly household monitoring visits (each volunteer is assigned about 20 households) for the purposes of checking on hygiene practices and other forms of disease prevention, as well as the health needs of individual households. Community-oriented activities are those identified by villagers during the preparation of a community action plan drawn up previously with the assistance of health officers and Red Cross volunteers.

Sustainability

The future sustainability of Red Cross and community volunteers trained in healthcare looks positive because of a number of factors:



Proper hand washing among school children has been well-accepted through school-based health education activities.

²⁵ Out of the 364 volunteers trained, 330 are still active.

- A tremendous amount of goodwill towards the Red Cross and indeed, awareness of Red Cross work, has abounded as a result of the Cyclone Nargis operation, and part of this is reflected in the huge number of volunteers in villages assisted by MRCS – some of these villages never had a volunteer presence before Cyclone Nargis and were not aware of the work which MRCS engaged in. This view is supported by the Impact Study which notes: “Almost all the respondents (village leaders, village tract recovery committee members, Red Cross Volunteers) wanted to continue the project activities even after the absence of Red Cross support because the project activities were so beneficial to the communities.”
- Additionally, a good number of these new volunteers are young people in their twenties and teens with a lot of enthusiasm and energy.
- Red Cross posts – 100 built across all 13 townships targeted by the operation – have proven to be important gathering points for communities, for health activities and several other purposes (see *Shelter section for more information*).
- As of early this year, MRCS began to fully embrace the *CBHFA-in-action* approach²⁶ by launching pilot projects in five townships in the Delta and three townships in Mandalay region, Bago West region and Rakhine State respectively. The townships selected in the Delta were those which saw successful implementations of healthcare activities during the Cyclone Nargis operation and which have a significant body of trained community volunteers. They are Maubin, Kyaiklat, Myaungmya, Wakema and Labutta townships.

Challenges

Field-based health officers, most of whom were trained doctors, found it difficult to delegate duties to Red Cross volunteers after being used to managing activities for a considerable period. This challenge was addressed with continuous encouragement to health officers to let go of the reins.



Health

4,358

community
volunteers
trained in
community-
based health
and first aid.

Photo: MRCS

²⁶ Prior to this, the society had only adopted some components of the community-based health and first aid-in-action approach.

Psychosocial support

Outcome 1 (medium and long-term): Enhance the capacity of MRCS to respond to the psychosocial needs of the population as well as staff and volunteers.

Outcome 2 (medium and long-term): Address the psychosocial recovery needs of the population by providing psychosocial support activities and – if relevant – related relief items.

Activity	Recovery target	Achievement	Households / beneficiaries reached
Community activities including competitions; distributions of recreation kits to communities and children	200 community activities/100,000 beneficiaries	199 activities	70,363 beneficiaries
Community kits for affected villages	668 kits	668 community kits	Communities in 668 villages
Recreation kits for affected school children	667 kits	667 kits	67,548 students in 465 schools

Impact:

In the initial aftermath of the cyclone, affected adults and children were provided with psychosocial support by a small group of Red Cross volunteers. These volunteers had been previously trained in psychosocial support, and soon after the occurrence of the cyclone, were provided with refresher training and deployed to the field.



Psychosocial support helped this survivor weather the loss of her family. She now intends to help support people who undergo similar traumatic experiences.

In the months after the cyclone, children and adults were provided with recreation kits which included books and toys for children, and games equipment and radios for adults. They were also encouraged to participate in a range of community-oriented activities such as cooking and boat racing competitions, movie screenings, live comedy shows, and poetry recitals for children. These interventions were aimed at promoting a general sense of wellbeing as well as serving as a form of diversion from the trauma endured, and were well-received by communities.

A small number of community volunteers were also trained in psychosocial support during the early stages of the Nargis operation. Its relevance/usefulness in the future can be seen in the testimony of a survivor in Labutta township (*pictured left*); she received counselling after losing her young son and husband, and has since moved on; she now intends to provide the same support to others in need.

Context and challenges

In 2009, efforts were also made towards integration with the livelihoods programme – while cash-for-work beneficiaries worked on projects, psychosocial support was provided to remaining family members of beneficiaries such as children.

Psychosocial support interventions came to an end in early 2010, during which an external review of the programme was undertaken with the recommendation that it be integrated with core annual programmes.



Psychosocial support

67,548

children in schools and educational institutions were assisted with psychosocial interventions.

Photo: MRCS

Water, sanitation and hygiene promotion

Outcome 1 (medium and long-term phase: January 2009-January 2011): To ensure that the long-term risk of waterborne and water-related diseases has been reduced through sustainable access to safe water and adequate sanitation, as well as the provision of hygiene education to 75,000 households.

Outcome 2 (MRCS capacity building): To improve the knowledge and capacity of MRCS staff to manage water and sanitation programmes in emergency and normal situations.

Activity	Recovery target	Achievement	Beneficiaries/households (hh) reached
Construction of tanks and distribution of fibreglass tanks	1,560 tanks	1,148 tanks	64,849 school children and 9,998 hh
Construction of new ponds	150 ponds	134 ponds	21,301 hh
Pond rehabilitation and fencing	370 ponds	494 ponds	71,214 hh
Construction of dug wells and tube wells	250 wells	213 wells	30,423 hh and 1,664 school children
Rehabilitation of dug wells & tube wells	400 wells	500 wells	12,098 hh
Distributions of buckets, alum and water purification tablets	20,000 units	8,813 units	8,813 hh
Demonstration latrines, full package latrines and pan & pipe distributions	30,000 units	43,017 units	43,017 hh
Latrines for schools	100	69	12,352 school children
Latrines for Red Cross posts	100	100	7,860 hh
Total no. of beneficiaries reached through all activities taking duplication of beneficiaries into account:			
Access to water: 75,000 households and 62,500 school children			
Latrine support: 43,000 households and 12,000 school children			

* In reference to pan and pipe distributions listed in the table, 6,427 units were distributed by the shelter programme to beneficiaries of the second phase of the household shelter project.

Impact:

A large number of affected communities (approximately 75,000 households and about 62,500 school children) now have an improved level of water sufficiency, thus making them more resilient towards future disasters or emergencies. For many of these communities, these interventions have brought them sufficient water the whole year through and much shorter daily commutes to fetch water for household needs.

Additionally, latrine construction assistance²⁷, has meant that about 43,000 households and about 12,000 school children have been provided with the opportunity to use improved sanitation facilities (pour flush toilets, sewer lines and septic tanks) and are engaging in hygiene practices through the proper use of newly-constructed hand washing installations.

Pre-existing ponds have been cleaned and protected with fencing, wells have been cleaned and reinforced, new ponds and wells have been constructed, a variety of rainwater harvesting tanks have been built or installed in community facilities such as schools, Red Cross posts, monasteries, health centres, and community centres.

It has been realized that new ponds are the most effective improved water source because they are low-cost and the resulting large catchment areas are benefiting large numbers of beneficiaries. Particular mention should be made of certain structures which are aimed at withstanding strong weather and contamination, and which serve the long-term needs of communities such as wells connected to hand pumps located above ground and 5,000-gallon concrete tanks in schools – when used at full capacity, these tanks can serve the drinking water needs of entire communities during the dry season.



Access to water

75,000
households &
62,500
school children
provided with
access to clean
water

Photo: MRCS

Context

The operation was able to provide water and sanitation assistance to affected communities fairly quickly after the cyclone, thanks to the presence of a number of ERU²⁸ teams operating water treatment units and the fact that the water and sanitation coordinator was on board in the early days of the operation (late May). This also meant that the sector's early recovery phase took off in good time, with the cleaning of community water sources and collection structures such as ponds beginning as early as July (two months after the cyclone).

Good monitoring and coordination with other agencies, coupled with the growth of the National Society's pioneer water and sanitation team (comprising mostly young engineers and technicians) also enabled the water and sanitation programme to respond to dry season needs in the Delta in the first quarter of 2009, while implementing recovery activities.

School children

School children are a key group of beneficiaries reached by the water and sanitation programme. In this regard, an integrated approach between the water and sanitation programme and health counterparts, was adopted where possible i.e. health teams complemented the construction of water facilities and latrines in *schools* with hygiene promotion sessions.

Similarly, health teams conducted hygiene promotions among *communities in general*, upon the construction of household latrines for the most vulnerable of households or upon the distribution of latrine construction

²⁷ This comprises demonstration latrines (for the poorest of households in an affected community), full package latrines for other beneficiaries, and distributions of pans and pipes to beneficiaries who have other materials needed for a latrine construction, at their disposal.

²⁸ Emergency response unit.

materials to households who would construct their own latrines based on guidance provided by water and sanitation teams through demonstrations of latrine constructions.

In the later stages of the operation and following the recommendations of the mid-term review in mid-2010²⁹, efforts were made to provide beneficiaries of household shelter with latrine assistance. This support consisted of the provision of latrine construction materials paid for by the water and sanitation programme – the distribution of materials to beneficiaries were overseen by the shelter programme. Latrines were also constructed for all Red Cross posts.

An important achievement of the water and sanitation programme is that it has enabled the National Society to gain a new capacity (*for details, see section on 'MRCS Capacity' below*).

Challenges

The gap which ensued between the departure of the water and sanitation coordinator in Dec 2009 and the arrival of the new water and sanitation delegate in late May 2010, as well as the prolonged relocation of the delegate due to visa difficulties (Aug 2010 to Jan 2011), resulted in weaknesses in programme monitoring including the quality of some constructions. Following the alert to these challenges, a decision was made to suspend construction activities in Nov and Dec 2010, pending a review of the programme. Upon the return of the delegate to Yangon in January this year, rectification measures were undertaken. Intensive technical training workshops were then held for the MRCS engineers, technicians and volunteers to apply simple yet effective technical field tests and quality control measures to ensure standard quality.

Other aspects which were in need of strengthening were the soft components of water and sanitation such as hygiene promotions/awareness and community mobilization to advocate for the ownership and maintenance of water and sanitation infrastructure – a lack of attention had been previously paid to these components as the programme was preoccupied with the 'hardware' aspect of activities i.e. constructions. Accordingly, rectification measures including applying selective tools from PHAST³⁰ were introduced from mid-2010.

Disaster preparedness and risk reduction

Outcome 1 (medium to long-term): To improve disaster response assistance through organizational preparedness, thereby meeting the needs of communities affected by disasters in Myanmar.

Outcome 2 (medium to long-term): To improve the lives of identified vulnerable communities in Myanmar by increasing community participation in risk reduction activities.

Activity	Recovery target	Achievement	Beneficiaries/ households reached
Community-based disaster risk management training	180 communities / villages	153 communities / villages (63 in the Delta)	4,080 direct beneficiaries & 374,000 indirect beneficiaries
Disaster preparedness including distributions of early warning equipment	304 communities / villages	232 communities / villages (63 in the Delta)	643,000 indirect beneficiaries
Response preparedness for Red Cross Volunteers in selected vulnerable townships in all states / regions nationwide	376 volunteers	332 volunteers (96 in the Delta)	-

²⁹ Nargis Operation Mid-Term Review (2010).

³⁰ Participatory Hygiene and Sanitation Transformation.

School-based disaster risk reduction	20 schools	20 schools (10 in the Delta)	600 students, 40 teachers & 10,000 indirect beneficiaries
Disaster preparedness stock	15,000 packs	13,500 packs	
Telephone line installations or purchases for branch offices and hub offices	64	73 (13 in the Delta)	

Impact:

Cyclone Nargis operation funding has been used to significantly expand the National Society's annual disaster management programme which has invariably included interventions in Cyclone Nargis-affected areas. As a result, the following benefits to targeted communities or communities in general, have been generated:

- A total of 153 communities or villages-at-risk (63 among these communities were in the Delta) have been trained in community-based disaster risk management. The trained villagers, comprising 30 people per village, have been encouraged and supported to share their knowledge with the rest of their communities and establish village-level committees. To this end, encouraging reports from the field indicate that some communities have done so and have engaged in several disaster preparedness measures such as identifying suitable village structures as evacuation centres, equipping these centres with early warning equipment such as loudspeakers, and planning evacuation routes (*for more on this, specifically in reference to the response of local communities to Cyclone Giri, see 'MRCS Capacity' towards the end of this report*)
- A total of 600 school children and 40 teachers have been trained in disaster risk reduction. They are from 20 schools in the Delta and other parts of the country.
- Up to 73 Red Cross branches across the country now have improved communications facilities thanks to the funding of telephone line installations or the provision of portable telephones.
- Increased numbers of disaster preparedness stock have enabled the National Society to respond to disasters after Cyclone Nargis such as Cyclone Giri in Rakhine State (Oct 2010) and the Tarlay earthquake in Eastern Shan State (March 2011), as well as several small-scale emergencies.
- Warehouses across the country have seen physical upgrades through repairs or renovations, and these improvements have been complemented by the training of selected volunteers in warehouse management, all of which are measures which have helped improve the society's disaster response capacity.

Other significant improvements in the National Society's disaster management capacities facilitated by the Cyclone Nargis operation and funded specifically by Japanese Red Cross Society are:

- The construction of a warehouse in Yangon region. With constructions completed in October this year, the warehouse which is scheduled to start functioning before the year-end, will serve as a centralized warehouse enabling the society to store disaster preparedness stock and equipment in larger quantities and improved conditions compared to previous arrangements in rented facilities.
- The establishment of an emergency management fund. The operating guidelines of this fund enable the National Society to make use of the interest accruing from the fund for disaster response needs as soon as the full capital of CHF 500,000 is secured. The capital which is to be untouched, currently stands at only CHF 170,000, comprising contributions from Japanese Red Cross Society and MRCS.

Other aspects of the operation

Integration of interventions

Evaluations of the Cyclone Nargis operation have pointed out that more could have been done towards integrating the assistance provided to targeted communities e.g. ensuring that beneficiaries provided with household shelter assistance were also provided with household rainwater collection systems, and latrines. The provision of latrines was addressed in the second phase of the household shelter project through assistance to households (in both phases) who were found to be in need of latrines either due to the absence

of one or the poor condition of a pre-existing latrine³¹. The assistance was provided following an assessment which also sought to determine if beneficiaries were already receiving assistance from other agencies.



Disaster risk reduction

10,000
school children are benefiting from school-based disaster risk reduction activities.

Photo: MRCS

On the whole, however, a significant amount of integration has been achieved and examples include:

- Hygiene promotions for households, communities in general, and in schools, before and after the installation or construction of water facilities and latrines.
- The provision of latrine construction assistance to household shelter beneficiaries.
- The installation of solar panels, latrines and rainwater collection tanks at Red Cross posts as well as equipping the posts with first aid kits, a stretcher, early warning equipment and IEC³² materials for the benefit of communities in the vicinity.
- The provision of psychosocial support to family members (e.g. children) of beneficiaries of cash-for-work projects implemented by the livelihoods programme i.e. support was provided while adults were at work.

These steps were strengthened in late 2009 by a concerted effort to mainstream disaster risk reduction in recovery interventions. Examples of this effort are:

- The printing and distribution of IEC materials on disease prevention, oral rehydration salts usage, and public health emergencies to vulnerable communities by the health programme as a community-based disaster preparedness measure.
- The distribution of posters on safe shelters and *build back safer* brochures by the shelter programme, as an awareness-raising measure.
- The distribution of posters on pest control by the livelihoods programme complemented by training for paddy farmers to reduce losses or the risk of loss to paddy yield; and the community tree-planting project which has helped protect the environment while providing more cover against weather to communities living in the vast stretches of flat, open fields in the Delta.

Additionally, an analysis of the 161 village tracts targeted by the operation, shows that about 77 per cent of tracts have been provided with four to five different types of assistance from the following sectors:

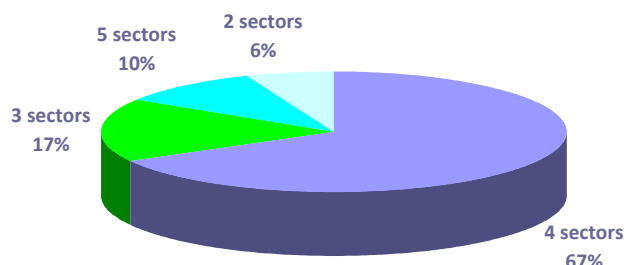
- Shelter
- Livelihoods
- Health
- Psychosocial support (PSP)
- Water and sanitation
- Disaster preparedness and risk reduction

Communities in these tracts have therefore improved their resilience as a result of the concentration of several sectoral initiatives. (see graphics below.)

³¹ While the water and sanitation programme provided the funding for the household latrines, distributions of latrine construction materials to beneficiaries were overseen by shelter teams.

³² Information, education and communication (IEC).

Sectoral integration at Village Tract level



Sectoral integration	No. of village tracts	% of coverage
Health, water and sanitation, shelter, livelihoods and community-based disaster risk management	17	10.56
Health, water and sanitation, shelter and livelihoods	100	62.11
Health, water and sanitation, shelter and community-based disaster risk management	6	3.73
Health, water and sanitation, shelter and community-based disaster risk management	2	1.23
Health, water and sanitation, and shelter	25	15.53
Health, livelihoods, and water and sanitation	2	1.24
Health, water and sanitation	9	5.59
Total	161	99.99

Monitoring and evaluation

Internal evaluations

A substantial amount of internal monitoring of individual programmes has been undertaken by programme staff, and monitoring and evaluation (M&E) officers, all of whom were attached to the nine hub offices in the Delta. Programme staff have also been aided by trained Red Cross volunteers in conducting field monitoring of activities. Besides the regular monitoring conducted by field staff and volunteers, extensive surveys were undertaken by both the shelter and health teams respectively to gauge the impact of assistance on beneficiaries. These efforts comprise the internal household shelter survey conducted for both phases of the project, as well as the health baseline survey in 2008 which was followed by yearly surveys in 2009 and 2010, and concluded with an impact assessment.

Headquarters programme staff (MRCS & IFRC) have also overseen monitoring activities with field visits, while field officers and field delegates have helped with monitoring of overall implementation and management of activities at field level, providing support when challenges were faced. Hub-based reporting officers have been responsible for providing monthly situation reports to headquarters. The combined efforts of all these sectors contributed towards the early introduction and maintenance of a substantial body of monitoring which in turn helped the day-to-day management of activities and the overall efficacy of the operation. In fact, for some interventions such as the household shelter project, it was possible to report on the progress of each shelter constructed because of the considerable and detailed level of support provided by hub staff, Red Cross volunteers, village tract recovery committees and village authorities.

These efforts gained momentum and direction towards the end of the first year of the operation (second quarter of 2009) with the introduction of an overarching monitoring and evaluation initiative, which focused on monitoring impact through the identification of qualitative indicators. Learning gained has indicated that this effort could have been strengthened through regular involvement of programme heads and a review of indicators to ensure relevance, as opposed to allowing the system to develop entirely through the efforts of field-based M&E officers and the headquarters-based database unit.

External evaluations and reviews

A number of external evaluations of the recovery phase of the operation have been conducted over the past three years and have provided guidance and direction on strengthening needed in a few areas. The evaluations comprise the review of health; and water and sanitation initiatives³³ (a joint initiative by partner national societies), the review of the shelter and livelihoods recovery framework³⁴ (another joint initiative of partner national societies), a mid-term review³⁵ of operations in general, and the final evaluation recently undertaken between June and August this year.

Beneficiary satisfaction

A number of initiatives have also been undertaken to gauge beneficiary satisfaction. These include:

- The internal household shelter project surveys which found a very high level of beneficiary satisfaction with the programme support provided by MRCS and village tract recovery committees (98.5 per cent of beneficiaries surveyed). *For more information, please see the Shelter section.*
- Almost all the respondents of the health programme's Impact Study *"wanted to continue the project activities even after the absence of Red Cross support because the project activities were so beneficial to the communities"*.
- The external final evaluation recently conducted between June and August, also engaged in beneficiary surveys. Findings included 48 per cent of respondents stating that the assistance provided by MRCS to individual households met their most urgent needs "fully", while 41 per cent said the assistance met their most urgent needs "to a great extent".

Building the capacity and resilience of Delta communities

Due to the substantial amount of cross-sectoral assistance received through the Cyclone Nargis operation, targeted communities have been able to regain and in many instances, improve on their pre-cyclone economic situations and living conditions, thereby becoming more resilient towards future disasters or emergencies. Examples of this improved capacity and resilience are:

- Improved water security through an abundance of new or improved water sources and water collection structures.
- Individual household access to latrines and thus better hygiene. Similarly, general community access to better hygiene through latrines and rainwater collection tanks installed at Red Cross posts, and access to latrines and water facilities for school children (*see data in Water and Sanitation section*).
- Improved health awareness and practices among adults and school children (*see data in Health section*).
- Protection against the elements through more durable housing featuring disaster risk reduction (DRR) construction techniques.
- Protection against storms through newly constructed schools and sub-rural health centres (which have been raised above ground level) and repaired community structures such as monasteries, some of which served as shelters during the cyclone.
- Improved livelihoods through technical know-how such as pest control, application of fertilizers, and proper care of livestock. The protection of agricultural land through river embankment and canal repairs (as cash-for-work projects) have also contributed towards regained livelihoods.
- The significant presence of 247 Red Cross volunteers and 4,358 community volunteers/villagers trained in health, along with 330 community volunteers trained in TB prevention and care, augurs well for continued health awareness and improved health practices among communities. In communities where villagers have been trained in community-based disaster risk management, this presence along with that of health-trained volunteers, provides the general community with significant capacity to deal with a future disaster or emergency. The presence of trained volunteers in a community also signifies the high probability of Red Cross posts being put to good use, and thus the sustainability of these structures.
- Improved skills through knowledge of disaster risk reduction construction techniques for household shelters (such as bracings) provided to local carpenters and household beneficiaries, and knowledge of proper construction techniques for household latrines (as demonstrated by water and sanitation teams to households).

³³ *Report on PNS visit to Myanmar for Sectoral Review of Response to Cyclone Nargis - Health and Water & Sanitation* (by Bob Handby and Theresia Lyshøj-Landiech, Sept 2008).

³⁴ *Joint Partner National Society Review of the Recovery and Accountability Frameworks in directing the Shelter and Livelihoods Programmes* (British Red Cross, Japanese Red Cross Society, Netherlands Red Cross, and representative from Disaster Management Unit at IFRC AP Zone Office, Nov 2009).

³⁵ *Cyclone Nargis Operation Mid-Term Review (2010)*.

- The protection of the environment through the planting of shade and fruit trees has also provided more cover to communities living in vast expanses of flat terrain.



School children

127,410

school children
taught to
practise good
hygiene

Photo: MRCS

Profiles of beneficiaries

Children:

A significant number of school children were targeted and reached through the following interventions:

Red Cross support	Children reached
Construction of schools	3,250
School-based health education	127,410
Construction of latrines at schools	12,000
Construction of water facilities at schools	62,500
School-based disaster risk reduction	10,000

Women:

Efforts were also undertaken to ensure that women were reached in specific interventions such as:

- Composition of 161 village tract recovery committees (VTRC) – a minimum of two women were required in the membership of each VTRC.
- A total of 18.8 per cent of women were beneficiaries in livelihoods interventions (compared with 81.2 per cent of men). However, it should also be noted that while a large number of recipients (signatories) of livelihoods assistance such as paddy farmers were men, in many instances, their wives with whom they farmed the land jointly, were co-beneficiaries.
- Community-based disaster risk management training efforts for 153 communities have ensured a 50:50 male-female ratio among all villages targeted for assistance.
- The construction of 20 sub-rural health centres – the centres are aimed at meeting the maternal healthcare needs of communities.

Women have also participated in large numbers in health activities particularly as community volunteers who have received training in components of community-based health and first aid, and have gone on to contribute to the well-being of their families and villages by conducting monthly household visits aimed at checking the health practices of families (e.g. incidence of diarrhoea, maintenance of latrines, use of mosquito nets), as well as health-related needs of families.

The elderly, single-headed households and disabled:

The beneficiary selection process in certain interventions such as household shelter ensured that the most vulnerable were given priority. Accordingly, the largest group of household shelter beneficiaries was the elderly at 29.5 per cent. Other priority groups included:

- Households headed by single men (28.5 per cent)
- Households headed by single women (14.9 per cent)

- The disabled (9.9 per cent)



Trained communities

A substantial number of village members trained in community-based interventions are women.

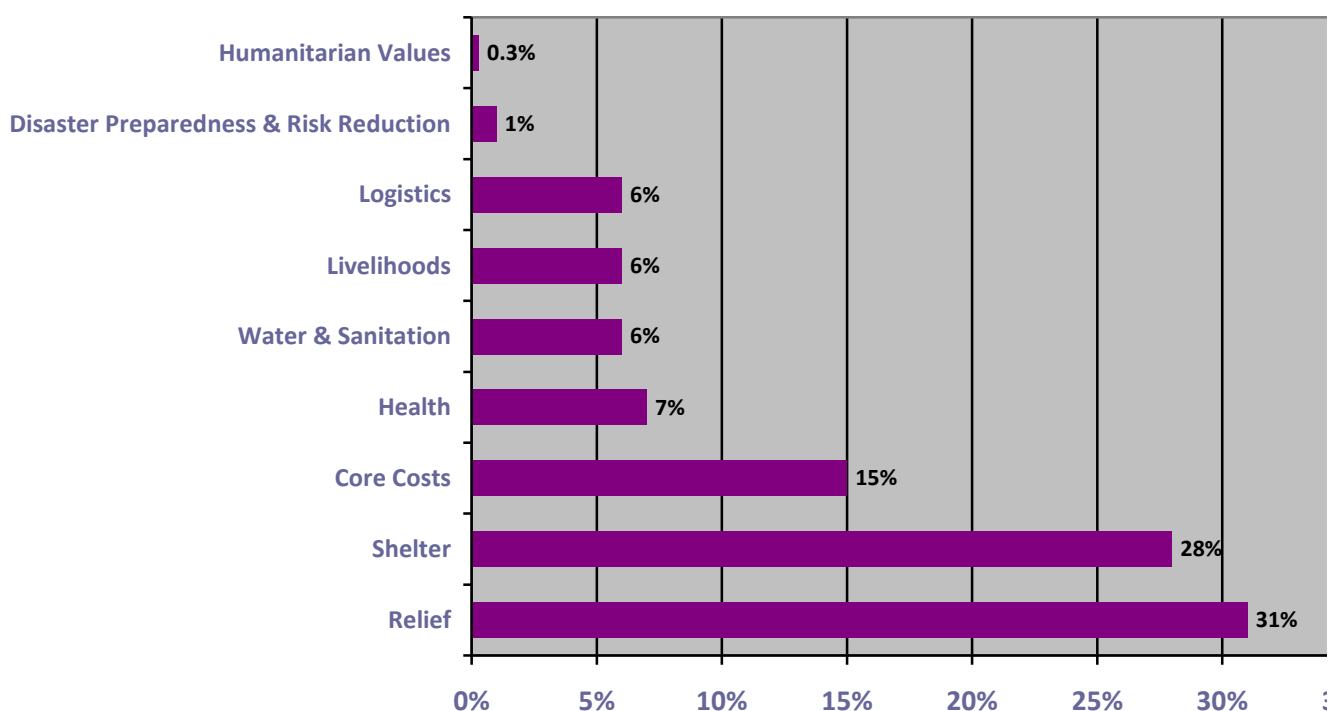
Photo: MRCS

Financial analysis: income and expenditure

As mentioned previously, the fact that 77 per cent of funding for the operation was secured within the first seven months and close to 100 per cent by the end of the first year of operations, has been an important element in the success of this operation. While the total funding secured for the operation was CHF 71.1 million, it should be noted that a budget revision in 2010 brought this down to CHF 68.6 million, owing to the reduction in core costs.

A total of CHF 65.8 million was spent during this operation amounting to 96 per cent of the budget. An efficient clearance of working advances was undertaken by the National Society – out of a total of CHF 21.3 million which MRCS received as working advance transfers throughout the duration of the operation, a total of 99.9 per cent was cleared by the end of September 2011. A balance of CHF 5.3 million remains upon the completion of the Cyclone Nargis operation and the required financial closing this month (October 2011). As per consultations with Red Cross Red Crescent Movement partners, this balance of funds will be transferred to the National Society's annual programme conducted with the support of IFRC. It is estimated that this balance will be spent over the next four years.

Overall utilization of funds



Bilateral support for Cyclone Nargis-affected communities

The Myanmar Red Cross Society engaged with several partners in separate bilateral initiatives to provide support to communities affected by the cyclone. Details follow:

International Committee of the Red Cross (ICRC)

The ICRC provided both multilateral and bilateral support for MRCS's response to affected communities. Multilateral support was provided under the umbrella of IFRC, a departure from ICRC's practice of supporting National Societies independently. Cumulatively, the ICRC provided the following support to the MRCS:

- *Dead body management training* was provided to MRCS staff and volunteers.
- Technical and financial support was provided to MRCS to establish a *Restoring Family Links* unit in the aftermath of the cyclone. This support was provided between May 2008 and March 2009 (*for details, see 'MRCS Capacity' below*).
- *Water and habitation*: In cooperation with the MRCS/IFRC water and sanitation programme, ICRC provided water and habitation support to about 20,000 families between May and December 2008 in the township of Dedaye and sub-township of Amar.
- *Livelihoods*: ICRC supported the initial planning of the MRCS/IFRC livelihoods programme through the provision of an economic security delegate.
- *Geographic Information Systems*: In-country GIS training was provided by ICRC delegates to IFRC and MRCS staff, and this represented the foundation of the IFRC Myanmar country office's GIS capacities which flourished during the remainder of the Cyclone Nargis operation, and enhanced monitoring and reporting efforts.
- Contributions to induction training organized for new Cyclone Nargis operation staff during the course of the operation.

Danish Red Cross

In the early days of the disaster, the in-country Danish Red Cross delegation provided reporting support through daily information updates and also re-deployed field staff (employed for annual programming) to assist in the emergency.

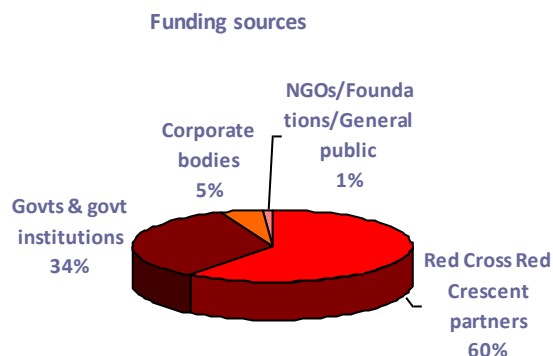
During the recovery phase in late 2008 and the first quarter of 2009, Danish Red Cross-funded consultants provided monitoring and evaluation support which led to the establishment of an overarching M&E framework.

French Red Cross

The French Red Cross which also has a country delegation, provided assistance in the establishment of an information/monitoring room during the early days of the disaster.

Other support extended to MRCS includes the following interventions conducted in the township of Mawlamyinegyun:

- *Water and sanitation* activities which benefited 25,869 direct beneficiaries and 45,373 indirect beneficiaries. Following the completion of activities, a hand-over was made to the township Red Cross branch.
- *Health*: Renovation works were carried out on the township hospital and a station hospital. Both hospitals which cumulatively serve a population of 256,872 people, were also equipped with surgical and laboratory instruments and other equipment.
- *Livelihoods*: Repairs to damaged infrastructure were conducted and asset recovery assistance extended to 3,920 direct beneficiaries and 18,573 indirect beneficiaries.



- An office building was constructed for the township Red Cross branch which was also supported through branch development activities such as income-generating activities, donations of equipment and furniture, and volunteer recruitment.

Japanese Red Cross Society

Sixty schools have been constructed in seven townships³⁶, with Japanese Red Cross Society funding. The schools feature the same specifications as IFRC-funded schools. The IFRC Cyclone Nargis operation budget also supported the construction of 5,000 gallon-rainwater collection tanks in some of these schools.

Magen David Adom

A primary school was constructed in Ngapudaw township.

Malaysian Red Crescent

A two-storey multipurpose Red Cross centre which can also function as a storm shelter, has been constructed in the township of Mawlamyinegyun.

Singapore Red Cross

A school-shelter has been constructed in Mawlamyinegyun township.

Thai Red Cross

Support comprised the following:

- A new national blood centre in Yangon for the Ministry of Health.
- A 16-bed hospital and a health centre in Pyapon township.
- Donation of 100 vials of anti-snake venom.

Taiwan Red Cross Organization

Two integrated school-shelters have been constructed in Dedaye and Maubin townships, while five health centres based on improved MRCS/IFRC project designs have been built in three townships.

Transition from recovery operations to regular programming

Mindful of the fact that the hub structure in the field was temporary and for the sole purpose of facilitating the implementation and management of a huge recovery operation, planning for the transition from recovery to regular programming began as early as the end of 2008.

In 2009, a transition team was established and comprised representatives of MRCS and IFRC. Over the past two years, the team has worked extensively to support and institute measures and procedures to facilitate a smooth transition from recovery operations back to regular programming for the National Society. These efforts included the following:

- The organization of sensitization sessions for Cyclone Nargis operation field and headquarters staff³⁷ to facilitate awareness that their employment with the society would end in line with the completion of operation activities, as per the terms of their contracts³⁸ of employment. In this regard, appreciation ceremonies were conducted in batches for outgoing staff who were also awarded with certificates of acknowledgement. Prior to the departure of staff which took place progressively based on the completion of various programme activities, training in resume writing and interview skills was conducted to help them to move on to other jobs. Eligible staff also received bonus salary payments based on the duration of their employment.
- The making of inventories of equipment, materials and other assets; archiving and packing of documentation; the timely closure of rented warehouses in the Delta; the transfer of some assets to selected Red Cross branches, and the remaining assets to Yangon, for re-distribution to branches in other parts of the country.

³⁶ Dedaye, Kyaiklat, Bogale, Pyapon, Mawlamyinegyun, Labutta and Hainggyikun (a sub-township).

³⁷ National Society staff, as well as IFRC national staff.

³⁸ It should also be noted that induction training was organised for all new Nargis Operation staff during the course of the operation.

This meticulous planning and coordination enabled field operations to come to a smooth end with the closure of hub offices in two phases between late June and July. This was followed by the closure of programme units at headquarters.

MRCS capacity

As a result of its willingness to step up to the needs and challenges of a large recovery operation in the form of Cyclone Nargis three years ago, the scale of which, it had not seen in its 88-year-history, MRCS has come out stronger in several respects:

New capacities

It has gained new capacities namely:

Water and sanitation

Water and sanitation has been a totally new venture, and while the society's team of mostly young engineers and technicians will need to hone their skills in the years to come, the society has already been commended as the strongest in Southeast Asia for its professional manner of erecting and operating water emergency response equipment (ERE)³⁹ of various capacities. It has a total of 14 EREs⁴⁰. In fact, the society was able to successfully deploy this newfound capacity before the conclusion of the



New capacities

Water and sanitation is a newly-acquired capacity which MRCS aims to harness.

Photo: MRCS

Cyclone Nargis operation – in October 2010, as part of its response to Cyclone Giri which hit western Myanmar, as well as its response to the earthquake in Eastern Shan State in March this year. At the time of production of this report, two ERE units are also being deployed as part of the society's recently launched flood operation in Magway region. MRCS is understandably proud of its network of volunteers trained in operating emergency response equipment and the number of EREs maintained at its warehouses.

Livelihoods

While the society engaged in sporadic livelihoods interventions prior to Cyclone Nargis, these were limited. Consequently, through the Cyclone Nargis operation, the society has gained a wealth of knowledge in several livelihoods interventions, and this includes technical know-how which has been documented as a toolkit for future use. The society's livelihoods unit (which was within the disaster management division) was closed down in line with the closure of the Cyclone Nargis operation – yet the learning gained has already proven useful through the deployment of experienced Red Cross volunteers from the Delta to Cyclone Giri-affected areas in Rakhine State as well as the re-employment of former Cyclone Nargis operation staff. The volunteers have assisted with recovery assessments for Cyclone Giri-affected communities, while the former Cyclone Nargis operation staff have been employed for the society's ongoing recovery operation for the same communities.

Shelter

Meeting the shelter and construction needs of communities from a recovery perspective has also been a new experience for the society. While the society's shelter unit has closed down in line with the conclusion of the operation, the overall responsibility for meeting shelter recovery needs continues to lie with the Disaster Management division, and undoubtedly, the learning gained in the Cyclone Nargis operation, for several shelter initiatives, have proven to be useful in the society's ongoing recovery operation for communities in Rakhine State who were affected by Cyclone Giri in October 2010 (*as in the case of livelihoods interventions described above*).

³⁹ Emergency response equipment is the term MRCS uses to refer to equipment used by water and sanitation Emergency Response Units during the emergency phase of the Nargis operation, and which were thereafter donated to the society.

⁴⁰ Six of the 14 EREs are ready for deployment while the remaining 8 are undergoing repairs and awaiting spare parts.

Restoring Family Links

The National Society has a Restoring Family Links (RFL) unit which was established in the aftermath of the cyclone, and which has expanded its functions and outreach three years on. The unit was set up following support received from ICRC between May 2008 and March 2009. This support comprised training Red Cross staff and volunteers to provide services such as telephone facilities, the registration of nearly 500 separated and unaccompanied children, and a Red Cross registration and messaging service (consisting of 'Safe and Well' and 'Anxious for News' messages) to help individuals displaced by the cyclone, including children, to be reunited with their families. By the end of the RFL operational period following the cyclone, a total of 447 family links were re-established and 15 reunifications of unaccompanied children with their parents were successfully completed.

Upon the conclusion of this service and ICRC assistance, the unit continued to function with Australian Red Cross support from April 2009 onwards. Following a review undertaken by MRCS/Australian Red Cross, the unit expanded its services in order to ensure rapid RFL response to future natural and man-made disasters as well as other humanitarian situations. In this regard, more recent efforts include:

- Following Cyclone Giri (Oct 2010), the RFL unit responded by providing a *Safe and Well* telephone service.
- Earlier this year, following a strong storm which displaced thousands of fishermen to other parts of Myanmar and other countries such as Sri Lanka and India, the RFL unit compiled lists of fishermen being registered and repatriated and received inquiries from relatives anxious for news of the affected fishermen.
- A Red Cross message service has also commenced, enabling Myanmar nationals in other countries with limited or difficult access to communications facilities, to re-establish and maintain contact with their families in Myanmar, and vice-versa.

Current efforts include the preparation of a procedural manual and a training manual, which will be followed by the training of Red Cross volunteers across the country.

Geographical Information Systems

The National Society's disaster management division has an officer trained in Geographical Information Systems - as a result of training support provided by ICRC to IFRC and MRCS in 2009. The enhancement of this officer's capacities and longer-term functions are now being studied.

Strengthening of existing capacities

Human resources

The society's human resources unit has expanded into a full-fledged structure based on set policies and procedures, thanks to the inevitable scaling-up which the Cyclone Nargis operation required, and organizational development support provided by IFRC.

Volunteer management

The National Society has improved its volunteer management through the establishment of a volunteer database, and the provision of insurance coverage to volunteers – both initiatives were facilitated through the Cyclone Nargis operation.

Approximately 14,500 volunteers from Cyclone Nargis and non-Nargis areas have been registered in the computerized database maintained at MRCS headquarters (an additional 25,500 volunteers have been registered manually at township level throughout the country). All registered (computerized and manual) volunteers located across 330 branches in the country, are ready for emergency deployment.

While a total of 6,755 volunteers received insurance coverage between 2008 and 2010 with Cyclone Nargis operation funding, this number was reduced to 514 for 2011 due to a reduced budget.

The branch development model, an initiative begun a few years ago, but which was revised and enhanced over the past year and is currently being fine-tuned, is being used to facilitate volunteer mobilization particularly in response to disasters, and this effort has been received positively by township-level Red Cross governance.

Logistics

Similarly, the logistics unit which used to mainly serve disaster management-related needs has experienced an overhaul and has been placed within the administration unit with key logistics staff in place. It has received guidance in the use of warehouse management software, and fleet and procurement procedures. A series of training sessions over the years has also helped build the capacity of staff and volunteers at headquarters, in the Delta and other parts of the country. These efforts have been complemented by the production of warehouse and procurement manuals, and fleet policy guidelines, all of which have been adapted to the Myanmar context. The warehouse manual has been printed in the Myanmar language, while the procurement manual and fleet policy guidelines are being finalized.

A notable capacity building initiative has been the placement of two National Society logistics staff members within the IFRC logistics unit from 2008 till 2011 – these individuals have undoubtedly gained a wealth of learning from this on-the-job experience.

The National Society now has an expanded fleet of vehicles due to the transfer of vehicles⁴¹ over the past three years.

Disaster Management

While the National Society's disaster management growth has been steered from an annual programming perspective, significant support for this growth was provided through the Cyclone Nargis operation. A few examples of improved capacity attributed to the Cyclone Nargis operation are upgraded warehouses complemented by the training of volunteers and staff; increased quantities of disaster preparedness stock, the recent construction of a central warehouse for the Yangon Region with all warehouse equipment already in place, the creation of an emergency management fund, the expansion of community-oriented training programmes which in turn have led to an increase in disaster risk reduction awareness among communities-at-risk and the provision of early warning equipment to these communities, as well as improvements in communications facilities for Red Cross branches across the country.

In reference to disaster risk management training for communities-at-risk, it should be noted that this guidance was put to good use by communities in Rakhine State who were affected by Cyclone Giri which hit the coast in October 2010. Red Cross volunteers and villagers trained in community-based disaster risk management (CBDRM) played important roles in relaying early warnings to their communities, using previously identified evacuation routes, and assisting with search and rescue efforts. They also provided significant support in rapid assessments undertaken and the emergency relief operation which followed. It is believed that this preparedness and response was a contributory cause of the relatively low casualty rate resulting from the cyclone. During the society's emergency response efforts, Red Cross volunteers were also trained by the water and sanitation team to operate and maintain emergency response equipment, with the result that there is now one ERE unit on standby in the society's warehouse in Sittwe, the capital of Rakhine State, for deployment during emergencies in the area. Additionally, five other ERE units have been maintained and are on standby in Yangon⁴².

CBHFA-in-action

While MRCS has had longstanding capacities in health, the Cyclone Nargis operation helped further strengthen and indeed, expand them among vulnerable communities through the training of a substantial number of villagers as community volunteers (4,358 people). It is this strengthening which has helped the National Society to make the move to fully embrace the *CBHFA-in-action* approach through pilot projects embarked on early this year (see *Health section for details*).

Financial reporting

The society's finance division has seen a significant surge in capacity as a result of the sheer scale of the Cyclone Nargis operation and the support provided by IFRC. This support involved daily interaction and consultation, as well as the provision of software introduced in hub offices in January 2010. Particular mention should be made of the fact that the MRCS finance division handled (and successfully reported on) an unprecedented scale of cash working advance disbursements and large-scale local procurements – 99.9 per cent of the CHF 21.3 million in working advances was cleared by the National Society by the end of September this year. The surge in capacity also involved an expanded number of finance staff at

⁴¹ These included nine vehicles from the ICRC, as well as vehicles from the British Red Cross, German Red Cross and Austrian Red Cross. The MRCS has also procured boats with funding from partners such as the Singapore Red Cross and the German Red Cross.

⁴² A remaining 8 EREs are undergoing repairs and awaiting spare parts.

headquarters and hub offices supported by Cyclone Nargis funding (see also the 'Skilled staff' section below). The procurement of new and more appropriate financial software will be finalized in the first quarter of 2012.

Communications and reporting

The society's communications and reporting capacities has grown significantly as a result of the sheer need to step up to the occasion, on the job training, and the leadership of its communications division which also oversees reporting functions. As a testimony to these improvements, Cyclone Nargis personnel were deployed to both the Cyclone Giri and Tarlay earthquake operations (October 2010 and March 2011 respectively) to provide communications and reporting support. In addition, one former Cyclone Nargis operation hub-based officer has been retained to take on a long-term position at headquarters, to assist with the society's future reporting efforts.

Another capacity building effort initiated by the communications division was the preparation of a reporting manual which also provides for emergency situations, and which has since been shared with field-based volunteers through a series of training sessions undertaken by hub-based reporting officers. It should be noted however that, while reporting capacity within the society's communications division has been strengthened significantly as a result of the Cyclone Nargis experience, the society's overall reporting and accountability needs strengthening particularly at programme level (see the 'Looking forward' section below for more information).

As a result of its efforts, the National Society has built a solid relationship with the local media which has highlighted the work of the Red Cross on numerous occasions. The communications products produced by the National Society have been useful for IFRC's outreach to global audiences.

Information technology capacity and infrastructure which is managed by the society's communications division, has also expanded tremendously with Cyclone Nargis operation support.

Skilled staff

The Cyclone Nargis experience has also contributed skilled staff for the society's longer-term needs. Examples of this can be seen in the disaster management, health, finance, reporting, and water and sanitation units at headquarters which now include (or will soon have) officers previously working at hub offices in the Delta or Cyclone Nargis operation officers previously based at headquarters, who applied for and were selected for long-term positions upon the conclusion of their Cyclone Nargis contracts.

The fact that several other Cyclone Nargis staff (headquarters and field-based) have moved on to jobs with other humanitarian or development agencies, as well as the private and diplomatic sectors, is also testimony to the capacity built over the past three years.

MRCS Strategic Plan 2011-2015

Learning which MRCS gained from the Cyclone Nargis operation has also been incorporated into its *Strategic Plan 2011-2015*. This learning includes:

- the need to maintain country-wide disaster response mechanisms.
- the benefits of shifting from project-based approaches to integrated programmatic approaches focusing on beneficiary impact.
- the benefits of engaging in community-based approaches which involve the training of vulnerable communities to enable them to play leading roles in carrying out activities aimed at improving their resilience, as opposed to providing support driven by MRCS township branches.
- the need to establish and maintain a common planning, monitoring, evaluation and reporting (PMER) system throughout the society to ensure quality and improve accountability to donors.

Looking forward

In several respects, MRCS has experienced a key aspiration of large recovery operations i.e. it has become a better and stronger National Society - a happy ending which not all national societies may have had the privilege to experience.

Plan of action

At the same time though, the society needs to be mindful of the fact that the momentum and capacities gained, need to be carried forward. In this regard, it is recommended that lessons learnt from the Cyclone Nargis operation be shared widely across the society. More importantly, key lessons and capacities that the society wishes to take forward, should be incorporated into a specific plan of action designed to facilitate this

move. Learning captured in a variety of technical documentation on programming and support services such as shelter, livelihoods, reporting, finance, logistics, procurement should also be shared widely and used as guides or adapted in future programming.

Strengthening of management

In order to operate more effectively, the National Society's leadership could also consider delegating a greater amount of strategic and technical decision-making to managers (i.e. heads of divisions). More interaction between various MRCS heads of divisions is also encouraged to facilitate better coordination and ultimately, efficacy in assisting the most vulnerable.

Strengthening of reporting and accountability

Reporting at programme level will need to be significantly strengthened in the future to facilitate a higher quality of overall reporting produced, and consequently, accountability to donors. In this regard, the society has begun to take steps in this direction with the support of IFRC, by welcoming a capacity building plan that will specifically target information gathering, monitoring, evaluation and reporting within programmes, and will be initiated upon the conclusion of the Cyclone Nargis operation. Additionally, the society is also targeting to have a harmonized monitoring and evaluation system in place for all emergency, recovery and development programmes, by 2015.

Finance development

The recruitment of a finance development officer (a former staff member of the Cyclone Nargis operation), along with the development and roll-out of branch financial guidelines and the purchase and introduction of a more appropriate financial software for the National Society, will also strengthen management and accountability efforts.

Human resource management

The society's capacity in human resource management received a big boost as a result of the entire Cyclone Nargis experience. The structures and procedures built up as part of this capacity should therefore continue to be used and further developed to aid in the overall effectiveness of the society.

It is vital that the interest of trained and experienced volunteers be sustained by engaging them meaningfully in activities and in refresher courses. The presence of a significant body of volunteers trained through the Cyclone Nargis operation (approximately 855 volunteers who received on-the-job and formal training by working with various sectoral teams at hub offices) should also be an impetus to build volunteer management even further.⁴³



Sustainability

100

Red Cross posts are positioned to improve the resilience of vulnerable communities but the sustainability of these structures will be very much dependent on communities themselves.

Photo: MRCS

⁴³ Final Evaluation of the Cyclone Nargis Operation in Myanmar, 2008-2011.

Structures and sustainability

The operation's activities have produced a number of structures which targeted communities will be able to make use of for a mid- to long-term period. These include a host of water sources and water collection structures such as ponds, wells and tanks; Red Cross posts, sub-rural health centres, schools, and community buildings or infrastructure which have been restored or strengthened.

The sustainability of many of these structures well after the Cyclone Nargis operation, will be dependent on communities themselves. At the same time, it will be helpful for the society to maintain or institute proper processes and systems to ensure community ownership of these structures and assets. It should be noted that some communities have already demonstrated their willingness and ability to maintain structures such as Red Cross posts and water facilities. In fact, some communities are also benefiting from in-kind support for the enhancement or maintenance of facilities, from certain members within their communities who are supporters of Red Cross assistance. An example of this is the village of Tha Main Hta Thein Kone in Pyapon township which has received wooden chairs and tables for its Red Cross post from monastery leaders nearby. In Aung Doe village in Wakema township, a 65-year-old farmer donated part of his land for the construction of a community pond, and in Kyar Hone Ywar Ma village in Mawlamyinegyun township, another paddy farmer donated part of her land for the construction of a multi-purpose two-storey Red Cross building⁴⁴ which can also serve as a storm shelter.

Emergency response structure and mechanisms

The management-level lessons learnt exercise conducted in July this year included discussions on the need to further strengthen the society's emergency response mechanisms. To this end, it was recommended that a national disaster response team with various types of expertise, be formed for the purposes of activation during an emergency response. It is heartening to note that an NDRT training module has been developed and followed up by training launched in September. Recommendations also included the need to strengthen mechanisms to facilitate the processing of visas and field travel permits, as well as the import of materials and vehicles, for the purposes of ensuring the rapid movement required in an emergency operation.

Partnerships

The National Society's reputation among partners has been strengthened and its partnership prospects with Government, the Red Cross Red Crescent Movement, other humanitarian and development organizations, and foreign governments, has increased considerably due to the high profiling of its work through the Cyclone Nargis operation. The society engaged in a significant amount of cooperation and coordination with agriculture, fisheries, and forestry authorities (while implementing Cyclone Nargis livelihoods interventions); and the ministries of health and education (health and shelter interventions). It should also be noted that recent meetings between Government representatives and MRCS, IFRC and other in-country partners within the context of a new administration, are helping to advance understanding and awareness of the work of the Red Cross, and this augurs well for the National Society's internal and external partnerships and ultimately, its outreach to the most vulnerable.

ECHO⁴⁵ support which was provided for the Cyclone Nargis operation, continued for both the Cyclone Giri and Tarlay earthquake operations. Other forms of support received include spontaneous support from foreign governments in Myanmar through embassies, and the continuous flow of pledges for regular programming. The United Nations also continues to value its partnership and coordination with MRCS – at the recent World Humanitarian Day gathering where the MRCS President was invited to make an address, he took the opportunity to talk about the society's aspirations towards strengthening its existing partnerships and to forge new ones.

The [final evaluation](#) notes that the National Society should continue to strengthen its coordination with Government, expand its partnerships in areas where it lacks expertise, and enhance fundraising efforts, particularly by engaging with the corporate sector to sustain regular activities and fund emergency operations.⁴⁶

New headquarters in Naypyidaw

The National Society's reduced presence in Yangon, as opposed to Naypyidaw, the new administrative capital where the society's new headquarters is located, will continue to affect the frequency of face-to-face

⁴⁴ Built with Malaysian Red Crescent support.

⁴⁵ The European Commission's Humanitarian Aid and Civil Protection department.

⁴⁶ *Final Evaluation of the Cyclone Nargis Operation in Myanmar, 2008-2011.*

interaction and coordination with IFRC and other in-country Movement partners, and consequently decision making and programme implementation. As such, all measures required to facilitate and maintain a high level of interaction need to be undertaken.

Cyclone Nargis operation: Final evaluation

Finally, special mention should be made of the areas for improvement and recommendations noted in the final evaluation of the Cyclone Nargis operation, as these will serve as guidance for the way forward for MRCS and IFRC.

The main areas for improvement cited are:

- A relatively low level of inter-sectoral integration and as such, holistic assistance towards vulnerable communities was seen in the early recovery phase, particularly through 'stand-alone' activities. This caused duplication of efforts and missed opportunities for enhanced impact. However, to a moderate extent, mutual integration was achieved in 2010 and 2011.
- The lack or inadequacy of important organizational structures (logistics, human resources) and standard operating procedures at the outset of the Cyclone Nargis operation meant that more time was needed to scale up and effectively deliver programmes.

Main recommendations:

- **Focus** on the stringent implementation of the society's Strategic Plan 2011-2015 to raise organizational capacity, and review implementation at least annually.
- **Sustain** by systematically recording and sharing the experiences of the Cyclone Nargis operation, and sustaining trained volunteers and their knowledge, and retaining the expertise of former hub staff.
- **Open up** by sharing plans and achievements regularly with relevant government units; collaborating with other humanitarian actors; and attracting private sector funding.
- **Build further** by continuing to improve volunteer management, further integrating the work of MRCS divisions, and improving vertical communication and support to branches.



Community support

The paddy farm owner and the multipurpose Red Cross building on farm land she donated for the benefit of her community.

Note: Stories on the improved resilience of Delta communities will be published and made available in the weeks following the publication of this final report.

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Click here

1. **Final financial report [below](#)**
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-

How we work

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

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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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 non-violence and peace.
-

Selected Parameters	
Reporting Timeframe	2008/5-2011/9
Budget Timeframe	2008/5-2011/7
Appeal	MDRMM002
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Funding

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
A. Budget	54,074,487	6,315,226		264,186	7,945,314	68,599,213
B. Opening Balance	0	0		0	0	0

Income

Cash contributions

American Red Cross	1,554,089					1,554,089
Andorra Government					22,607	22,607
Andorran Red Cross	23,550					23,550
Australian Red Cross	2,408,158				1,000,000	3,408,158
Australian Red Cross (from Australian Government)	2,447,746	9,719			560,355	3,017,820
Austrian Red Cross	360,114					360,114
Austria - Private Donors	1,585					1,585
Belarus Red Cross	2,391					2,391
Belgian Red Cross	18,986					18,986
Belgian Red Cross (Flanders)	46,294					46,294
Belgium - Private Donors	323					323
Brazil - Private Donors	8,033					8,033
British Red Cross	1,844,737			60,300		1,905,037
British Red Cross (from British Government)	634,268					634,268
British Red Cross (from DFID - British Government)	3,074,258					3,074,258
China Red Cross, Hong Kong branch	480,491	1,132,241		66,775		1,679,507
China Red Cross, Macau branch	20,000					20,000
Cook Islands Red Cross Society	11,205					11,205
Cyprus Government	80,050					80,050
Cyprus Red Cross	16,123					16,123
Danish Red Cross	498,991					498,991
Danish Red Cross (from Danish Government)	166,226				2,061,632	2,227,858
Estonia Government	51,607					51,607
European Commission - DG ECHO	1,272,513					1,272,513
Finnish Red Cross	58,338	222,086				280,424
German Red Cross	1,068,205					1,068,205
Great Britain - Private Donors	466					466
Hellenic Red Cross		48,810				48,810
Hong Kong - Private Donors	5,200					5,200
IATA	8,650					8,650
Icelandic Red Cross	174,295					174,295
IFRC at the UN Inc (from Applied Materials)	32,583					32,583
IFRC at the UN Inc (from Black Rock)	47,542					47,542
IFRC at the UN Inc (from ChevronTexaco Corp.)	1,051,073					1,051,073
IFRC at the UN Inc (from Citadel Investment group)	9,311					9,311
IFRC at the UN Inc (from EMC Corporation)	71,313					71,313
IFRC at the UN Inc (from Hospira)	105,107					105,107
IFRC at the UN Inc (from Lehman Brothers Foundation)	94,597					94,597
IFRC at the UN Inc (from Mellon Bank)	23,771					23,771
IFRC at the UN Inc (from Motorola Company)	105,107					105,107
IFRC at the UN Inc (from Nordic Custom Builders Inc.)	5,250					5,250
IFRC at the UN Inc (from Schering Plough)	47,542					47,542

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IFRC at the UN Inc (from United States - Private Donors)	2,756			2,756
Indian Red Cross Society	7,732			7,732
India - Private Donors	10,607			10,607
Irish Red Cross Society	550,290			550,290
Italian Government Bilateral Emergency Fund	198,645			198,645
Italian Red Cross	58,984			58,984
Japanese Red Cross Society	4,389,770	884,700	632,100	5,906,570
Japan - Private Donors	4,730			4,730
Kuwait Red Crescent Society (from Kuwait Government)		1,650,000	3,600,000	5,250,000
Lithuanian Red Cross Society	976			976
Luxembourg Red Cross	11,862			11,862
Malaysian Red Crescent Society	10,546			10,546
Malaysia - Private Donors	2,414			2,414
Maldives Private Donors	2,597			2,597
Netherlands - Private Donors	323			323
New Zealand Red Cross	196,574			196,574
Norwegian Red Cross	106,786			106,786
Norwegian Red Cross (from Norwegian Government)	1,237,200			1,237,200
On Line donations	248,510			248,510
Other	-102,934	104,008		1,074
Peru - Private Donors	214			214
Philippines - Private Donors	520			520
Polish Red Cross	5,196			5,196
Portuguese Red Cross	32,300			32,300
Qatar Red Crescent Society	7,470			7,470
Red Crescent Society of the United Arab Emirates	20,781			20,781
Red Cross of Monaco	81,350		63,023	144,373
Red Cross of Viet Nam	173,800			173,800
Republic of Korea - Private Donors	191			191
Russia - Private Donors	2,686			2,686
Singapore - Private Donors	21,119			21,119
Singapore Red Cross Society	338,843			338,843
Slovakia Government	97,845			97,845
Slovak Red Cross	15,813			15,813
Slovenia Government			80,750	80,750
Spain - Private Donors	651			651
Spanish Red Cross	42,771			42,771
Stavros Niarchos Foundation	156,000			156,000
Swedish Red Cross	-38,529	2,092,800		2,054,271
Swedish Red Cross (from Swedish Government)	2,209,345			2,209,345
Swiss Red Cross	313,772			313,772
Swiss Red Cross (from Swiss Government)	5,541			5,541
Switzerland - Private Donors	9,398			9,398
Taiwan Red Cross Organisation	774,238			774,238
The Canadian Red Cross Society	1,405,814			1,405,814
The Canadian Red Cross Society (from Canadian Government)	2,534,636			2,534,636
The Netherlands Red Cross	89,370			89,370
The Netherlands Red Cross (from Netherlands Government)	1,437,275			1,437,275
The Republic of Korea National Red Cross	378,344			378,344
The Sri Lanka Red Cross Society	3,250			3,250

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Tides Foundation	50,993				50,993
Tides Foundation (from United States - Private Donors)	104,000				104,000
Total	2,182,000				2,182,000
Turkish Red Crescent Society	5,264				5,264
United Arab Emirates - Private Donors	1,115				1,115
United States - Private Donors	15,644				15,644
UN Staff Council / UNOG	11,479				11,479
VERF/WHO Voluntary Emergency Relief	7,000				7,000
C1. Cash contributions	37,365,955	6,144,364		270,849	7,876,694

Inkind Goods & Transport

American Red Cross	1,824,002				1,824,002
Australian Red Cross	354,274				354,274
Austrian Red Cross	473,041				473,041
Belgian Red Cross	403,280				403,280
Belgian Red Cross (Flanders)	103,912				103,912
British Red Cross	2,676,521				2,676,521
Canadian Government	279,939				279,939
China Red Cross, Hong Kong branch	275,291				275,291
Danish Red Cross	817,094				817,094
Finnish Red Cross	1,413,058				1,413,058
French Red Cross	424,745				424,745
German Red Cross	405,901				405,901
Japanese Red Cross Society	4,334,191				4,334,191
Luxembourg Red Cross	409,897				409,897
Norwegian Red Cross	118,635				118,635
Qatar Red Crescent Society	281,160				281,160
Spanish Red Cross	1,045,369				1,045,369
Swiss Government	154,743				154,743
Swiss Red Cross	350,197				350,197
The Canadian Red Cross Society	71,199				71,199
The Netherlands Red Cross	1,160,086				1,160,086
The Republic of Korea National Red Cross	477,916				477,916
C2. Inkind Goods & Transport	17,854,450				17,854,450

Inkind Personnel

Australian Red Cross	22,147				22,147
Austrian Red Cross	39,453	4,400			43,853
British Red Cross	41,866				41,866
Finnish Red Cross		137,360			137,360
Japanese Red Cross Society	59,313	49,600			108,913
Other	127,581			166,047	293,628
Swiss Red Cross	19,800				19,800
The Canadian Red Cross Society	8,680				8,680
The Netherlands Red Cross	86,706	43,400			130,106
C3. Inkind Personnel	405,546	234,760		166,047	806,353

Other Income

Fundraising Fees	-178,786				-178,786
Sales				0	0
Sundry Income				31	31
C4. Other Income	-178,786			31	-178,755

C. Total Income = SUM(C1..C4)	55,447,165	6,379,124		270,849	8,042,772
D. Total Funding = B + C	55,447,165	6,379,124		270,849	8,042,772
Appeal Coverage	103%	101%		103%	101%

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II. Movement of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
B. Opening Balance	0	0		0	0	0
C. Income	55,447,165	6,379,124		270,849	8,042,772	70,139,910
E. Expenditure	-51,630,010	-5,859,266		-223,967	-7,128,017	-64,841,259
F. Closing Balance = (B + C + E)	3,817,155	519,858		46,882	914,755	5,298,651

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III. Consolidated Expenditure vs. Budget

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A							B	A - B
BUDGET (C)		54,074,487	6,315,226		264,186	7,945,314	68,599,213	
Relief items, Construction, Supplies								
Shelter - Relief	5,036,117	6,285,639					6,285,639	-1,249,522
Shelter - Transitional		586					586	-586
Construction - Housing	3,926,273	915,952					915,952	3,010,321
Construction - Facilities	2,773,373	2,225,096	54				2,225,151	548,223
Construction Materials	4,801,323	7,149,594					7,149,594	-2,348,272
Clothing & Textiles	3,099,368	2,885,687	137,505			362	3,023,554	75,813
Food	132,175	16,938					16,938	115,237
Seeds & Plants	787,936	1,010,939					1,010,939	-223,003
Water, Sanitation & Hygiene	2,501,399	2,679,539	1,870,539			270	4,550,347	-2,048,948
Medical & First Aid	825,845	451,643	388,593			367	840,604	-14,759
Teaching Materials	307,370	39,418	178,345		12,427	487	230,677	76,693
Utensils & Tools	3,971,782	3,956,891					3,956,891	14,891
Other Supplies & Services	5,521,115	534,313	257,850			964	793,127	4,727,988
Cash Disbursement		1,096,777				40	1,096,817	-1,096,817
Total Relief items, Construction, Su	33,684,076	29,249,012	2,832,887		12,427	2,491	32,096,816	1,587,259
Land, vehicles & equipment								
Land & Buildings	89,275	23,756					23,756	65,519
Vehicles	586,807	510,635				77,240	587,875	-1,068
Computers & Telecom	531,771	252,269	558		11,065	119,745	383,637	148,134
Office & Household Equipment	243,492	206,561	2,783			51,955	261,298	-17,806
Others Machinery & Equipment		6,287					6,287	-6,287
Total Land, vehicles & equipment	1,451,346	999,509	3,341		11,065	248,940	1,262,854	188,492
Logistics, Transport & Storage								
Storage	493,846	225,453	758			184,881	411,091	82,754
Distribution & Monitoring	7,372,539	8,634,326	2,867			176,019	8,813,213	-1,440,673
Transport & Vehicles Costs	2,400,629	169,906	703			445,516	616,125	1,784,504
Logistics Services		331,919	6,967			32,717	371,603	-371,603
Total Logistics, Transport & Storage	10,267,014	9,361,603	11,296			839,133	10,212,032	54,982
Personnel								
International Staff	6,132,125	2,698,408	886,724		117,738	1,964,088	5,666,959	465,166
National Staff	964,665	164,323	36,666			536,249	737,237	227,427
National Society Staff	3,463,109	1,041,443	717,506		243	1,380,871	3,140,064	323,045
Volunteers		351,512	210,635		191	138,404	700,742	-700,742
Total Personnel	10,559,898	4,255,686	1,851,530		118,173	4,019,612	10,245,001	314,897
Consultants & Professional Fees								
Consultants	238,835	114,077	22,149			100,008	236,234	2,601
Professional Fees	98,429	21,517	1,556		126	46,170	69,370	29,059
Total Consultants & Professional Fe	337,264	135,594	23,706		126	146,178	305,604	31,660
Workshops & Training								
Workshops & Training	2,122,250	747,619	524,927		42,786	381,136	1,696,467	425,783
Total Workshops & Training	2,122,250	747,619	524,927		42,786	381,136	1,696,467	425,783
General Expenditure								
Travel	597,731	325,439	99,042		1,031	128,714	554,225	43,505
Information & Public Relations	406,378	162,889	47,908		21,843	62,316	294,957	111,422
Office Costs	737,655	184,618	2,798		72	385,576	573,063	164,592
Communications	511,060	185,041	1,132		244	261,405	447,821	63,239
Financial Charges	2,296,684	2,020,842	88,570		2,531	180,166	2,292,109	4,575
Other General Expenses	42,828	32,877	13			28,065	60,955	-18,127

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Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A							B	A - B
BUDGET (C)		54,074,487	6,315,226		264,186	7,945,314	68,599,213	
Shared Office and Services Costs		750					750	-750
Total General Expenditure	4,592,336	2,912,456	239,462		25,721	1,046,242	4,223,881	368,455
Contributions & Transfers								
Cash Transfers National Societies	1,147,500	997,500					997,500	150,000
Total Contributions & Transfers	1,147,500	997,500					997,500	150,000
Indirect Costs								
Programme & Services Support Recov	4,437,529	2,932,975	363,561		13,669	435,279	3,745,485	692,044
Total Indirect Costs	4,437,529	2,932,975	363,561		13,669	435,279	3,745,485	692,044
Pledge Specific Costs								
Pledge Earmarking Fee		38,056	8,556			9,007	55,619	-55,619
Total Pledge Specific Costs		38,056	8,556			9,007	55,619	-55,619
TOTAL EXPENDITURE (D)	68,599,213	51,630,010	5,859,266		223,967	7,128,017	64,841,259	3,757,954
VARIANCE (C - D)		2,444,477	455,960		40,219	817,297	3,757,954	