


Mid-Year report

 International Federation
of Red Cross and Red Crescent Societies

Myanmar

Appeal No. MAAMM002

30 June 2010

This report covers the period from
1 January to 30 June 2010



Vulnerability and capacity assessment (VCA) training which includes mapping exercises on available capacity, hazards and evacuation routes at village-level, have been well received by vulnerable communities.
(Photo: Myanmar Red Cross Society)

In brief

Programme purpose:

The programmes of the Myanmar country plan aim to contribute to the attainment of the Global Agenda goals to:

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

Programme summary:

The Myanmar Red Cross Society (MRCS) has been engaged in various activities in states and divisions outside the Cyclone Nargis-affected areas. However, the Nargis operation continues to remain a main priority of MRCS programmes and the national society has, therefore, been obliged to allocate most of its resources to the on-going operation, thus making limited resources available for the activities planned under the country plan for 2010. This has caused some delay in programme implementation and the rescheduling of some planned activities.

The Cyclone Nargis operation has also helped MRCS to review the impact of the large-scale operation on the society in general, and redefine areas for future development. The final review of the *MRCS Strategic Plan for 2007-2010* and the development of a new strategy scheduled for the second half of this year, will serve as an important opportunity to learn from the lessons of the Nargis operation and previous Red Cross Red Crescent experiences, and to draw a roadmap to developing MRCS into a well-functioning national society.

The MRCS partnership meeting took place in Bangkok, Thailand, on 30-31 March 2010, in which representatives of MRCS joined those from 16 partner national societies, the International Committee of the Red Cross (ICRC) and the International Federation of Red Cross and Red Crescent Societies (IFRC), in reviewing the implementation of the Cyclone Nargis operation and the Myanmar country plan. The group also discussed issues regarding future partnerships between MRCS and Red Cross Red Crescent Movement partners.

Disaster management:

The disaster management programme consists of two components, namely response preparedness and community-based disaster risk management (CBDRM). The MRCS's role and tasks have been defined in the *Myanmar Action Plan - Disaster Risk Reduction (MAP-DRR)* which was developed by the Myanmar government to consolidate its contributions to the Hyogo Framework for Action¹. A response plan of the Inter-Agency Standing Committee (IASC), developed in 2009, also specified the roles and responsibilities of MRCS during emergencies and normal times.

As one of the national societies included in the first round of IFRC's regional DIPECHO² programme, MRCS has adopted the DRR framework, the early warning system guidelines, the vulnerability and capacity assessment (VCA) guidelines, and the disaster risk reduction (DRR) education guidelines, and is working to apply these tools to the community-based disaster risk management (CBDRM) programme. It has started the school-based disaster risk reduction programme. It finalized a multi-hazards contingency plan as well as the standard operating procedure for localized disasters in the first half of 2010. The National Society is planning to roll out these documents at the level of states/divisions and townships in the second half of 2010. The MRCS's disaster management policy adopted in 2003, is expected to be revised by August 2010.

Health and care:

Relying on its nationwide network of volunteers, MRCS is striving to promote a healthier and safer environment for people while giving priority to assisting the most vulnerable people and communities. This has been demonstrated in its efforts towards improved community health in emergencies, reduced HIV vulnerability, lower malaria morbidity and mortality, less TB transmission by means of active case detections, and referrals for early diagnosis and treatment.

The National Society also contributes to the safe blood supply with the help of voluntary non-remunerated blood donors. With the support of MRCS, vulnerable communities have had improved access to safe water and sanitation.

The health and care forum held on 25-26 February 2010 provided an opportunity to review the implementation of MRCS's health and care programme from 2007 to 2009; to prioritize the future plan of action; and ensure the integration of all activities under the community-based health and first aid (CBHFA) programme.

Organizational development:

The portfolio of organizational development remains broad - a focus area being the review of the organizational set-up of MRCS, considering all the opportunities and challenges brought about by the Cyclone Nargis response. Notably, key areas of IFRC support include:

- volunteer motivation and management;
- financial and human resource development, calling on the experience of paid staff and established operational structures and systems in the delta area;
- sustainable branch support;
- review of the legal base; and
- a mid-term strategic review.

¹ The *Hyogo Framework for Action 2005-2015: Building the Resilience of Nations and Communities to Disasters* was adopted at the World Conference on Disaster Reduction held in January 2005 in Hyogo, Japan.

² The European Commission Humanitarian Aid department's Disaster Preparedness Programme.

The organizational development delegate provides cross-cutting support and guidance to MRCS – this includes assisting the national society in its objective to review and strengthen its organizational development function. The scheduled strategic review will be re-scheduled in 2010, and attention will be given to two or three significant multi-sectoral areas of development.

Financial situation: The total 2010 budget is CHF 1,818,440 (USD 1.76 million or EUR 1.19 million) which is covered up to 96 per cent. Overall expenditure to date is 29 per cent.

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

No. of people we help:

Some 554,000 people have benefited from MRCS programmes supported by IFRC during this reporting period.

Our partners:

MRCS has important partnerships with ICRC, UNICEF, UNFPA, UNHCR, and Burnet Institute, and has maintained close relationships with the Ministry of Health and the Ministry of Social Welfare and Resettlement, as well as local authorities.

Contributors to this appeal include Austrian Red Cross, Finnish Red Cross, French Red Cross, German Red Cross, Hong Kong branch of Red Cross Society of China, Japanese Red Cross Society, Netherlands Red Cross, New Zealand Red Cross, and Swedish Red Cross.

Also contributing to the work of the national society on a bilateral basis are Australian Red Cross, Danish Red Cross and French Red Cross.

On behalf of MRCS, IFRC would like to thank all partners and contributors for their response to this Myanmar country plan.

Context

Beneficiaries of the recovery programmes of the Myanmar Red Cross Society (MRCS) and the International Federation of Red Cross and Red Crescent Societies (IFRC) in the Cyclone Nargis-affected areas have benefited from the support provided and achieved positive outcomes for their recovery. Given the scale of the disaster caused by the cyclone, the recovery programmes are under significant pressure to try to meet a broad range of community needs across a large disaster-affected geographical area. This pressure is likely to mount in the months to come as many key agencies involved in the Nargis recovery, are now in the process of winding down their activities due to their limited recovery funds. Agencies operating in the delta expect that MRCS will inherit and incorporate additional activities which have been initiated. This expectation will be an ongoing challenge for MRCS, which remains committed to ensuring that support reaches beneficiaries of the Nargis operation. This will need to be balanced against the capacities of the National Society and its need for institutional development.

The gradual move of MRCS headquarters to the new capital of Naypyidaw has continued during this reporting period. Key management staff shuttle between Naypyidaw and Yangon to prevent the disruption of normal Red Cross activities. The final move of staff is expected to be finalized in the second half of 2010, with the exception of key operational staff who will remain in Yangon to support the Nargis operation. The move is expected to affect MRCS capacity to implement the ongoing programmes in one way or another.

With the general elections slated for the end of 2010, it is anticipated that international personnel travel could be restricted in certain parts of the country. This will have a negative impact on the carrying out of monitoring visits, assessments and coaching for project development. To overcome this, IFRC will continue to promote the capacity building of MRCS staff, in order to strengthen the monitoring and evaluation of projects and improve the services provided to beneficiaries and communities.

Progress towards outcomes

Disaster management

Programme objective: Reduce deaths, injuries and impact from disasters

Programme component 1: Response preparedness

Outcomes/expected results: Disaster response assistance is improved through organizational preparedness and institutional development to meet the needs of those people affected by disasters.

Progress/achievements

Based on the disaster management resource mapping and in line with the recommendations of the logistics capacity assessment report⁴, MRCS is continuing the upgrading of state/division-level warehouses. Having upgraded five warehouses in 2009, it is targeting seven in 2010. The engineering estimation of four warehouses has been done and that of the other three is in process. With the upgrading of all 20 warehouses in the country, MRCS will be able to store disaster preparedness stocks for 5,000 households in a more systematic and effective way, and ensure better communication between warehouses, branches and headquarters. (See table below for the location of the warehouses to be upgraded in 2010.) The logistics team of UN agencies is also interested in capitalizing on MRCS's country-wide presence and supporting its capacity building. UNICEF is in discussion with MRCS to finalize the details of such a plan.

During the period from January to May 2010, MRCS responded to various disasters such as floods, fires, strong winds, and landslides, by supplying disaster preparedness stock to a total of 813 affected households across 30 townships of ten states/divisions. During the dry season in April-May, it provided 30 tarpaulins to assist in the construction of a temporary water reservoir, and distributed 727 jerry cans of ten litres each to vulnerable people living in Kyuktan and Dhala townships of the Yangon division, which had been affected by the severe water shortage.

Warehouse upgrading plan for 2010

No.	States/Divisions	Location
1	Kayin	Pha An
2	Chin	Hakha
3	Chin	Kalay
4	Tanintharyi	Dawey
5	Bago (East)	Bago
6	Magway	Magway
7	Shan (South)	Taunggyi

With a view to supporting the establishment of an effective early warning system and improving communication between branches and the headquarters, MRCS is planning to install telephones in 15 disaster-prone township branches. (See table below for the location of these selected branches.) Preparations are now underway to install them.

Telephone installation plan

No.	State/Division	Township
1	Kachin	Waingmaw
2	Bago-west	Moeyo
3	Bago-west	Paukkaung
4	Bago-west	Paung De
5	Mandalay	Le We
6	Mandalay	Moe Goke
7	Ayeyarwady	Mawlamyinegyun
8	Ayeyarwady	Pathine
9	Ayeyarwady	Eainme
10	Chin	Har Khar
11	Chin	Tee Tain
12	Chin	Mindut
13	Rakhine	Myebon
14	Rakhine	Thandwe
15	Rakhine	Manaung

Two logistics management training workshops of six days each, were conducted for managers and logistics officers of state/division branches in Yangon and Mandalay in March and May 2010. A total of 65 people were trained in standard operating procedures, as well as the rules and regulations of procurement, warehousing, transportation, fleet management and reporting.

MRCS has finalized a national multi-hazards contingency plan, which comprises coordination, staff and volunteer security, information management, relief, restoring family links, emergency shelter, health services, water and sanitation, finance/administration and logistics management. It has also reflected the Inter-Agency Standing Committee (IASC) response plan. The contingency plan is mainly based on two disaster scenarios, i.e. one affecting less than 50,000 people, and the other, more than 50,000 people, spelling out key actions to be taken during emergencies. It also specifies the capacities which MRCS needs to develop at normal times in order to achieve the objectives of the

⁴ The assessment included a review of the capacity, management and communications systems of 20 warehouses across the country and was conducted from April to August 2009.

contingency plan. The National Society has also finalized the standard operating procedure (SOP) for local disasters. It is now working to introduce these two documents to Red Cross volunteers of states/divisions and township branches.

The Sphere⁵ Project manual was translated into the Myanmar language and is now at the stage of printing. Copies will be available following its launch in the second half of this year. This is a joint initiative of MRCS, IFRC and some international non-governmental organizations working in Myanmar.

Based on the lessons learned from the Cyclone Nargis operation and pursuant to the recommendations of the disaster management review conducted in 2009, MRCS is reviewing its disaster management policy which was adopted in 2003. A consultant recruited in this regard is working on it. It is expected that a revised disaster management policy will be available in August 2010.

A total of 14 volunteers and staff from MRCS attended various training workshops or meetings held abroad to enhance their capacity and improve their knowledge of disaster management. (See table below for details of workshops and meetings attended.)

Participation in workshops and meetings abroad

No	Name of workshop/meeting	Dates and Venue	No. of persons	Position of participants
1	Warehouse and transportation workshop	23-26 February 2010, Thailand	3	Head of logistics unit and two logistics officers
2	Cross-regional indigenous knowledge on disaster risk reduction workshop	8-11 March 2010, Dhaka, Bangladesh	2	2 i-C and logistics officer
3	Disaster management induction course	8-12 March 2010, Thailand	2	Project coordinator and field officer
4	IDRL workshop	1-2 April 2010, Thailand	1	Member of the Executive Committee
5	Seminar on disaster response capacity building of national Red Cross and Red Crescent societies	7-21 April 2010, China	2	G1 and 2 i-C
6	14th regional disaster management committee meeting	3-6 May 2010, Indonesia	2	Head and deputy head, of disaster management dept
7	Asia Pacific disaster management meeting	25-27 May 2010, Brisbane, Australia	2	Head of operations and head of disaster management dept

Note: 2 i-C: Second-in-command who is the manager of a township Red Cross Volunteer brigade; G1: Grade 1 Staff officers of Red Cross Brigades – these officers hold the highest rank in the volunteer system of the States and Divisions, and are members of MRCS State & Divisional Supervisory Committees.

Programme component 2: Disaster risk reduction

Outcomes/expected results: Resilience of individuals and communities is increased to reduce their vulnerabilities to disasters

Progress/Achievements

Having supported 112 communities or villages in 2009 through the community-based disaster risk management (CBDRM) project, MRCS is targeting 84 new communities or villages from five states/divisions in 2010. Up to 72 of them in four States/Divisions are being supported through the Cyclone Nargis operation. MRCS is supporting the remaining 12 communities or villages in the Tanintharyi State through the country plan. It continues to follow up on 24 communities or villages in the Rakhine State and the Ayeyarwady Division, which were supported in 2009. See the table below for the targeted communities. The experience from those communities where CBDRM was implemented has proven useful in consolidating the process of inputs from MRCS. The targeted communities have found the CBDRM guidelines very useful.

⁵ Humanitarian Charter and Minimum Standards in Disaster Response (Sphere)

Preparations are under way to start the school-based disaster risk management (SBDRM) programme. A total of 20 schools have been selected, with ten from five townships of the Bago East State and the other 10 from five townships of the Ayeyarwady Division, supported through the Cyclone Nargis operation. A separate framework and a training curriculum have been developed for implementation of the SBDRM programme.

MRCS conducted three seven-day training-of-trainers (ToT) workshops on community-based disaster risk management, which were attended by a total 110 volunteers (57 men and 53 women) from 16 townships in the Tanintharyi, Mon, Kayin and Kachin States/Divisions. The workshops in Tanintharyi and Kachin States were supported through the Cyclone Nargis operation. A five-day community-based disaster risk management training-of-trainer refresher course was also conducted for staff from townships in Nargis-affected areas in which 29 volunteers (15 men and 14 women) from ten townships participated. Trained people are taking part in facilitating CBDRM activities at community level. The first vulnerability and capacity assessment (VCA) training-of-trainers was conducted on 15-21 February in Yangon, in which 26 community representatives (20 men and six women) participated. After the workshop, the participants were engaged in VCA exercises at community level. See the table below for workshop details.



A vulnerability and capacity assessment (VCA) field exercise conducted in the Maubin Township in the Ayeyarwady Division in February this year. (Photo: Myanmar Red Cross Society)



Posters which promote hazard awareness and prevention among vulnerable communities are on display in a village in Kachin State in January this year. (Photo: Myanmar Red Cross Society)

Four information, education and communication (IEC) materials produced in 2009 on how to act when faced with fire, floods, earthquakes and storms are being distributed to vulnerable communities. One more IEC material was developed recently in a form of a leaflet in order to promote the understanding of colour codes and basic preparedness measures against a cyclone at the community level. The leaflet was distributed in April 2010 to 20,000 people living in coastal areas.

MRCS is also implementing the disaster risk reduction (DRR) programme in two townships of the Ayeyarwady Division with the support of French Red Cross.

CBDRM targeted communities

No.	State/Division	Targeted communities/villages	Communities/villages identified so far	No. of Townships
1	Mon	20	9	3
2	Kayin	20	9	3
3	Kachin	12	15	5
4	Ayeyarwady	20	20	10
5	Tanintharyi	12	15	5

CBDRM training of trainers workshops


No.	Training Workshops	Dates	Venue	No. of participants
1	CBDRM-ToT	7 -13 January 2010	Tanintharyee	30
2	CBDRM-ToT	25 -31 January 2010	Mon/Kayin state	45
3	CBDRM-ToT	5-13 March 2010	Kachin state	35
4	CBDRM-ToT (refresher)	29 March to 2 April 2010	Yangon	29
5	VCA-ToT	15-21 February 2010	Yangon	26

Constraints or Challenges

The timely completion of planned activities is challenging as many Red Cross volunteers in charge of their implementation have many other duties to perform. Besides this, the disaster management division of MRCS is so preoccupied with the Cyclone Nargis operation that it has limited time and resources available for other disaster management activities in non-Nargis areas. Frequent movement to and from Naypyidaw, and the long stay of senior disaster management division staff in the new capital have also affected programme implementation, and the development of future strategies and plans.

While reviewing its disaster management policy, MRCS is considering not only the different aspects of lessons learned from the Cyclone Nargis operation, as well as the national context and regional and global commitments but also the challenges facing the National Society in carrying out DM activities throughout the country. It is combining the response preparedness with community-based disaster management in order to reach the most affected and vulnerable on time. It is also looking at various options that will allow itself to make the best use of limited human resources.

BENEFICIARY FEEDBACK



“We learnt about reducing risks, how to ensure that there is enough food and safe drinking water, and searching for and rescuing survivors.”

The leader of War Kauk village in Kyaiklat township (pictured), in the Ayeyarwady Delta, on the community-based disaster risk management multiplier training he attended with 29 fellow villagers. The 30 villagers from War Kauk have since formed six groups geared towards responding effectively towards future emergencies or disasters. These groups focus on six separate disaster preparedness components: storage of food and safe drinking water, communications, evacuation to secure places, search and rescue, emergency relief, and reconstruction.

(Photo: Yin Yin Myint / Myanmar Red Cross Society)

Health and care

Programme objective: Reduce the number of deaths, illnesses and impact from diseases

MRCS organized a health and care forum in Yangon on 25-26 February 2010, which was attended by 52 people from MRCS, IFRC, partner national societies of Denmark, Finland and France, ICRC, the Ministry of Health, World Health Organization and the Burnet Institute. The National Society made an overall review of its health and care programme implemented from 2007 to 2009 and discussed the issues regarding future priorities. It also discussed how to ensure the adoption of the community-based health and first aid (CBHFA) integrated programme approach, and explored the potential health areas to be addressed in the upcoming MRCS strategic review. The forum provided an opportunity to draw lessons learned from the health and care programme implemented over the last three years and identify the challenges and solutions in moving from the community-based first aid (CBFA) to the *CBHFA-in-action* approach. It also helped MRCS and its partners to have a shared understanding of potential health areas in which they could develop future cooperation.



Health awareness and disease prevention sessions are targeted at vulnerable communities, with the aim that they will be better prepared during emergencies.

(Photo: Myanmar Red Cross Society)

Programme component 1: Public health in emergencies (PHiE)

Outcomes/expected results: Targeted communities are able to reduce the outbreak of communicable diseases during epidemics, including those that follow a natural disaster.

Progress/Achievements

MRCS developed a preparedness plan which focuses on schools, urban areas and health institutions, as well as high risk groups in targeted States and Divisions. Included in these groups are international travellers and traders under the age of 50 years, pregnant women, and patients who have other diseases such as asthma, respiratory disease, cardiovascular disease, diabetes, HIV/AIDS, and morbid obesity.

Activities conducted in line with this preparedness plan include the following:

- Two PHiE capacity building workshops were conducted in Sittwe and Myitkyina townships in February and March 2010 for 50 Red Cross volunteers from ten townships in the Rakhine and Kachin States. This was complemented by the reprinting and distribution of 48,000 pamphlets and 5,000 posters to people living in targeted areas.
- A total of 100 copies of educational materials were distributed to people in the Kachin and Tanintharyi States.
- In January 2010, MRCS health staff visited the Naungcho, Thipaw, Lashio, Tanyan and Musai Townships in the Northern Shan State for monitoring purposes, and held PHiE awareness raising sessions for 427 Red Cross volunteers in the Bayinnaung camp, Yangon in February 2010.
- A total of 465 vials of ASV (anti-snake venom) Viper and 180 vials of ASV Cobra were distributed to Red Cross branches in areas with high risk of snake bite, namely the Yangon, Ayeyarwady, Bago, Magwe and Sagaing States/Divisions.
- A total of 100,000 sachets of oral rehydration salts were procured and distributed to all 17 state/division branches.

Water and sanitation

MRCS is working on the selection of villages and townships where a new water and sanitation project will be implemented with the support of Austrian Red Cross. In this regard, in April 2010, MRCS, Austrian Red Cross and IFRC signed a two-year cooperation agreement, specifying their roles and responsibilities in implementing the project.

Constraints or Challenges

Since the position of a deputy head of the health division who is a focal point for the PHiE project has been vacant for some time, this has affected project implementation and limited the field trips undertaken by the project officer. As a measure to address this challenge, MRCS has advertised this position and the recruitment process is underway.

Programme component 2: Community-based health

Outcomes/expected results: Improved capacity of targeted communities to reduce the incidence of priority communicable diseases and effectively respond to emergency and life-threatening cases.

Progress/Achievements

The community-based health project started in 2007 in Natmauk and Pwintphyu townships of Magway Division. In 2010, each township expanded community-based health activities to another five new villages. They comprised Bawaung, Sankan, Shawchaunglay, Gwaykone and Tharsi villages (totalling 830 households) in Natmauk township; and Yephyudwin, Chaungson, Anountlayaein, Inngone and Zeegyun villages (totalling 694 households) in Pwintphyu township. Two field workers recruited in each township are visiting every village once every three months and conduct health education based on needs in the field.

During this reporting period, project staff, Red Cross volunteers and community volunteers have held a total of 41 health education sessions for 5,739 people in 20 villages and one ward, to improve their health knowledge. They also held monthly meetings with township steering committees. A total of 600 community volunteers received relevant training from MRCS township branch staff and programme field officers. In addition, 5,000 LLINs (long lasting insecticide-treated mosquito nets) were distributed to beneficiary households in Natmauk and Pwintphyu townships, and 600 school hygiene kits are due to be handed over to the primary schools in all villages in June when they reopen.

With the support of MRCS project staff and Red Cross volunteers, community volunteers have carried out community-based health activities (according to their monthly plans of action), and participated in health talks and mosquito net distributions. MRCS project staff members have also supported the communities in developing the work of village health committees, and working out their community action plans which provide for the following activities:

- Organizing village clean-up activities
- Reducing vector breeding sites
- Establishing refuse sites
- Selecting beneficiaries for distribution of mosquito nets, and latrine pans and pipes
- Identifying topics for health education sessions
- Organizing referral systems

Following a water and sanitation training workshop, MRCS carried out a detailed water and sanitation assessment of 20 villages with the support of project staff and Red Cross volunteers. The villages comprised ten in Pwintphyu township (Yebokegyi, Chaungson, Okpho, Thanatwa, Pyilonekyaw, Saidaw, Lema, Ahshailayaein, Kanpyit, and Hnabegone) and another ten villages in Natmauk township (Myoma, Na-Thamongone, Wetchoke, Taung Oo, La-tagundaing, Zaytha, Pa-Kyarhtoo, Thetyintaw, Ywarthit and Kyauktaga). Following this, the following structures were constructed:

- A deep-tube well and storage tank was constructed in the Yebokegyi village in Pwintphyu township
- A deep-tube well was constructed in Chaungson village in Pwintphyu township.
- A deep-tube well and a filter tank were constructed in La-tagundaing village in Natmauk township.

During a visit to Magway in May, by the MRCS health team, headed by the deputy head of the health department, the community in Yebokegyi village reported that they were happy to have access to safe drinking water. The deep tube well in the area supplies water to 2,700 people every day.

Two project staff also attended a HIV review workshop held in Yangon on 23-24 February 2010.



Constraints or Challenges

Field monitoring trips to community-based health projects are likely to be restricted by heavy rains during the monsoon season which is expected to start in June.

A community volunteer distributes mosquito nets to a vulnerable family. Distributions of health-related items complement community-initiated activities which focus on disease prevention and improved hygiene.

(Photo: Tin Tin Wai / Myanmar Red Cross Society)

Programme component 3: Malaria

Outcomes/expected results: To reduce malaria morbidity and mortality among vulnerable populations in endemic areas.

Progress/Achievements

The malaria prevention programme continues to be implemented in 137 villages in five townships across five States/Divisions. These locations, which have been identified as areas with a high incidence of malaria by the Ministry of Health, comprise:

- Moe Kaung township in Kachin State
- Mong Set in Eastern Shan State
- Minbu in Magway Division
- Medayar in Mandalay Division
- Zeegone in Bago Division

The project aims to distribute LLINs (long lasting insecticide-treated mosquito nets) to 80 per cent of the households in the targeted villages, to reduce the number of circulating anopheles mosquitoes. A total of 11,200 LLINs have so far been distributed to households but beneficiaries have asked for more LLINs and insecticide tablets; 15,000 tablets which have been purchased will be distributed to the five townships in June.

A total of 320 community Red Cross volunteers trained in malaria prevention and the use of mosquito nets have so far, met with 6,500 households and disseminated knowledge on malaria prevention through individual talks and small group discussions.

During a monitoring visit to Minbu township in April, the MRCS deputy head of the health division observed that the number of reported malaria cases had dropped as compared to before.

Programme component 4: HIV

Outcomes/expected results: To prevent further HIV infection among the key population groups at higher risk (i.e. youth and mobile populations); improve the quality of life for people living with HIV; and reduce stigma and discrimination associated with HIV and AIDS.

Progress/Achievements

The HIV/AIDS project is aimed at supporting truck drivers with home care and support. By applying a peer-to-peer approach, trained educators support them by giving health education on preventing further HIV/AIDS infection, expanding care, reducing stigma and discrimination. In co-ordination with the National AIDS Programme, they give nutritional support to people living with HIV (PLWHIV).

A HIV review meeting was held in Yangon on 31 March-1 April 2010. The discussion was facilitated by the regional HIV coordinator. The meeting came up with a number of recommendations regarding the implementation of the Global Alliance on HIV programme, and the strengthening of the reporting and monitoring system.

A total of 180 health education sessions were conducted for 6,000 people during this reporting period. In addition, 5,400 condoms, 3,600 IEC materials and 3,636 money belts/purses were distributed to the target population. Up to 18 people were referred to the voluntary counselling and confidential testing (VCCT) services. Also, 300 PLWHIVs received nutritional packets and 24 PLWHIVs were referred for opportunistic infection treatment.

Constraints or Challenges

DICs (drop-in centres) have run out of condoms as quantities supplied have not been sufficient. In this regard, the MRCS headquarters is reviewing the condom distribution system.

Programme component 5: Voluntary non-remunerated blood donation

Outcomes/expected results: MRCS contributes to improving the amount of safe blood available in Myanmar through increased recruitment and retention of voluntary non-remunerated blood donors.

Progress/Achievements

A total of 688 blood bags (each consisting of 500 ml) were donated by volunteers in various parts of the country from January to May 2010. In coordination with other social organizations, MRCS organized a voluntary blood donation drive on New Year's Day at the Shwe Dagon pagoda, attracting donations from 500 people. The event contributed to improving coordination and collaboration between MRCS and the Ministry of Health; and increasing the number of regular blood donors by strengthening the link between Red Cross blood donor recruiters and the national blood centres.

As there was the drop-out of several Red Cross volunteers for blood donor recruitment, MRCS is now replacing them with newly trained people who have been selected from the township Red Cross management level. Their roles and responsibilities have been identified and a plan of action is being developed in their respective regions for submission to the township blood donor working group.

In collaboration with the National Blood Bank and through blood donor recruitment campaigns, the MRCS working group recruited 400 new blood donors in Yangon and Mandalay Divisions, Kachin State, the townships of Moenyo, Shwe Bo and Nyaung Tone; the West University and Computer College in Yangon. Certificates of honour signed by the MRCS president, together with donor pins and badges, were presented to them to as a token of appreciation for their regular donations.

Some 202 Red Cross volunteers from universities and colleges in Yangon and Mandalay received donor recruitment training and learned how to conduct education sessions, caring, motivation and retention for donors. However, 85 of them failed to take part in recruitment activities for various reasons. MRCS commissioned an assessment to analyse the reasons of their drop-out. According to the results of this assessment, they dropped out because they were not given proper follow-up by the programme and some of them changed their jobs. MRCS is revising its action plan for volunteer management to prevent further drop-outs.

Coordination meetings were held in March and April in Yangon and Mandalay, to discuss the issues of regular blood donation.

Constraints or Challenges

It is challenging to maintain blood donor volunteers. MRCS is taking steps to maintain volunteers for its blood donor programme.

Programme component 6: First aid and safety

Outcomes/expected results: MRCS and its nationwide network of volunteers support communities in identifying their health needs and respond effectively with first aid and community-based first aid skills and knowledge.

Progress/Achievements

The MRCS Training Unit conducted the following training sessions during this reporting period:

- Four separate first aid instructor courses in the months of March to May for a total of 107 school teachers and Red Cross volunteers in Bago (West) Division, Kayah State and Mon State.
- A community-based first aid (CBFA) training-of-trainers (ToT) course which was held in May for 34 people from Sagaing, Naypyidaw and Chin States.
- Six CBFA multiplier training workshops which followed the CBFA training-of-trainers workshop above.

The teachers and Red Cross volunteers who attended training-of-trainers or instructor courses are required to pass on their knowledge by conducting multiplier training courses with each multiplier course to be attended by 30 participants. Multiplier training participants in turn, pass on their knowledge to ten indirect beneficiaries in their individual communities. First aid multiplier training participants then share their knowledge of essential first aid techniques, while participants of CBFA multiplier training engage others in community mobilization activities such as hygiene promotion, the dissemination of hygiene information, and disease prevention activities.

MRCS has also provided commercial first aid training to 1,122 people from non-governmental organizations and companies.

A CBFA lessons learnt workshop was held on 12-14 February 2010 in Nyaung-U Township, Mandalay Division. Present there were 60 people, including health officers from the Nargis-affected areas, and Red Cross volunteers trained in CBFA as well as community-based health project staff from Nargis and non-Nargis areas. The workshop participants noted that CBFA activities in both Nargis and non-Nargis areas are reaching different levels - while there are no follow-up activities after CBFA multiplier training workshops in non-Nargis areas, there are active community initiatives in Nargis areas after such workshops, with the supervision and support of health officers and CBFA trainers from township Red Cross branches. Workshop participants made a number of recommendations to improve the CBFA programme at township and community levels.

Constraints or Challenges

Out of three CBHFA master facilitators, two are no longer available to conduct training as they have left their current positions. MRCS is therefore taking steps to maintain key staff.



BENEFICIARY FEEDBACK

This mother (pictured) demonstrates how she saved her six-year-old son from choking on a drink, thanks to a basic first aid technique she learnt during multiplier training in August 2009.

From Myauk Oo Township in Rakhine State, she is very thankful she was able to go the aid of her son during the incident in the October holidays.

She now willingly demonstrates essential first aid techniques to neighbours.

(Photo: Myanmar Red Cross Society)

Tuberculosis (TB)

Progress/Achievements

The community-based TB project is focused on training and supporting Red Cross volunteers in informing people of the ways to prevent the occurrence of TB and explain the importance of completing effective TB treatment. A total of 306 trained Red Cross volunteers in the Nargis operational areas are providing TB patients with psychosocial support, health talks and TB home care kits with hygiene items, cereals and multivitamins.

A total of 904 people were referred to the National TB Programme for diagnosis and treatment. Of this number, 177 were tested positive and are receiving medical treatment from the National TB Centre. They are also under observation by Red Cross volunteers. At the request of the TB centre, 24 defaulters have been traced and have resumed their medication - they are now receiving support from the Red Cross volunteers. The TB Centre and MRCS have so far been able to discharge 452 people from their care and support programme as they have successfully completed their treatment and made a full recovery.

Through their direct support to TB patients and their families, as well as health education to communities during the National Immunization Day and school health education sessions, MRCS has supported a total of 35,396 people. A total of 470 care kits and 300 sputum cups were also donated to TB patients at the New Yangon Hospital and the Aung San TB Hospital.

The deputy head of health division of MRCS attended the Red Cross Red Crescent Global TWG (TB) meeting in Cape Town, South Africa in March 2010, which standardized TB indicators and set them in line with the CBHFA programme. Now MRCS uses these TB indicators and deals with TB/HIV in one programme.

Constraints or Challenges

The number of Red Cross volunteers involved in the TB programme in Labutta township is reducing as they have moved on to new jobs. MRCS is therefore taking steps to maintain its volunteer base.

Psychosocial support programme (PSP)

- In January 2010, MRCS undertook a PSP outcome survey in Yangon, as well as Kungyangon, Labutta, Ngapudaw and Bogale townships in the Ayeyarwady and Yangon Divisions.
- The community-based PSP activity conducted in Padamyargone Village Tract in Bogale township, was completed in March 2010.
- A PSP training-of-trainers session for 32 people was conducted in Naypyidaw in April 2010.

Organizational development

Programme objective: Increase local community, civil society and Red Cross and Red Crescent capacity to address the most urgent situations of vulnerability.

Programme component: A well structured and better organized MRCS with more competent human resources at all levels for efficient and effective delivery of community-based services to meet the needs of the most vulnerable in Myanmar.



MRCS aims to deliver community-based services more efficiently and effectively, by improving the structure and organization of its human resources. (Photo: Myanmar Red Cross Society)

In March 2010, MRCS incorporated the development and cooperation unit with the training unit (formally under the health division), to form the division of organizational development (DOD) with an appointed head of division. It is in the process of defining the role of the training unit within the DOD, and reviewing the role and structure of the division.

The size of the organizational development portfolio remains broad with key areas of support being to review MRCS's organizational and supporting structure, legal and strategic base, branch support, volunteer management, financial and human resource development, sustainability, and relocation to Naypyidaw, the new federal administrative capital. MRCS is in the process of outlining its priorities for 2010 and beyond.

MRCS has gained much experience from the Nargis operation. Its standing within Myanmar has been greatly enhanced and the national society feels proud of its achievements. It does, however, recognize a number of key issues in scaling up its support to the vulnerable:

- Defining a common community-based approach to deliver services to the vulnerable which is realistic and appropriate to the Myanmar context.
- Defining the appropriate operating structure to support township branch and community-based activities.
- Reconciling MRCS objectives with the scale of the organization which includes the national headquarters, States and Divisions (17), Districts (64) and township branches (325).
- Revising the current branch development programme, following the recognition that the current support is not having the desired long-term impact.

- Supporting internal communication and cooperation within the headquarters while maintaining harmonious relationships.

Conscious of the demands placed on the National Society, IFRC seeks to support internal dialogue and consensus building within MRCS. Many of the issues are cross-cutting by nature and will feed into the constitutional review, and strategic and transition plans. MRCS is supported to implement recommendations from the various reviews and evaluations conducted in the past, and this will be a key issue to be addressed in all training, monitoring visits, reviews and recommendations in the coming years.

The organizational development delegate remains integrated within MRCS, which views it positively as it had recently reconfirmed to the head of operations of the Asia Pacific zone office. MRCS also agreed that the organizational development delegate would support its internal discussion on issues related to organizational development, and offer guidance to the MRCS leadership. This has proven challenging due to conflicting priorities and work demands of the leadership. The delegate has shared the perceived “platform of reality” with the leadership of MRCS and the management of the IFRC in-country office. This has led to a shared understanding of the main factors influencing the National Society and provided a solid foundation to develop joint initiatives in support of MRCS.

Outcomes/expected results 1: MRCS branch capacities in selected states/divisions/townships are strengthened to take a leadership role in implementing humanitarian activities which address the needs of the local communities.

Progress/Achievements

Pursuant to the recommendations made by a review of the branch development programme completed in April 2009, MRCS is targeting selected branches to achieve greater impact in branch development. The current plan for 2010-2011 is to provide branch development support to three townships - Pyin Ma Na Township in the Mandalay Division, Hah Kha Township in Chin State and De Pae Yin Township in Sagaing Division.

During this reporting period, advocacy visits have been undertaken to increase communication, collect branch data and explore branch capacities. While these branches have been supported to some extent, MRCS leadership recognizes that it has yet to agree on a systematic approach towards branch development. IFRC remains committed to supporting MRCS, working closely with the national society to maximize the sustainable impact of this initiative. Once engaged, IFRC will seek to fine-tune the programme to be more relevant to the Myanmar context.

An area of priority has been the recognition that inter-division cooperation and shared planning needs to be improved. IFRC is supporting the internal communication and coordination within the National Society to ensure better integrated programming. The national society has postponed the G1 (state and division branch leaders) meeting planned for the first half of 2010.

Outcomes/expected results 2: MRCS legal base is reviewed and updated, and its national headquarters capacity strengthened to assist branches in delivering community-based services efficiently and effectively.

Progress/Achievements

No progress has been made in MRCS’s legal base review since the drafting of its new statutes in October 2009. It is likely that the general elections in Myanmar slated for the end of 2010 might further delay this review process. Meanwhile, MRCS and IFRC are considering linkages between the review process and “Lessons learnt from Nargis,” and issues identified in the ongoing transitional planning process initiated in January 2009.

MRCS and IFRC have agreed on how to review the implementation of the MRCS Strategic Plan for 2007-2010 and develop a new strategy for four or five years on the basis of the review results and the IFRC’s *Strategy 2020*. The new strategy will integrate programmatic issues; streamline branch development support; and define the role of the headquarters in facilitating and supporting regional networks of branches as a means to share knowledge, good practices, resources and technical expertise. The strategic review and planning process is expected to start in June, and be completed by the end of 2010.

Outcomes/expected results 3: MRCS capacity to mobilize, develop and manage Red Cross youth and volunteers in a systematic way is further strengthened.

Progress/Achievements

A total of 6,715 Red Cross volunteers have been insured by MRCS insurance scheme, which they highly appreciate. No claims have been received during this reporting period.

The MRCS's volunteer management team has been engaged in various activities as outlined in the 2010 plan. It facilitated branch leadership meetings in the Mon and Kayin States as well as in the Magway Division. Participants included university representatives, police officers, township medical officers and key township Red Cross players. This has led to a much clearer understanding of Red Cross roles and responsibilities. During the meetings, the team emphasized the need to give more importance to the quality of volunteers rather than their quantity.

From January to May 2010, a total of 1,023 Red Cross community volunteers were recruited and 46 school Red Cross teams were formed in four townships in the Naypyidaw area. The Youth and Volunteer Unit provided Red Cross Youth leadership training to 68 outstanding Red Cross volunteers in Bagan, Nyaung Oo Township, Mandalay Division.

MRCS focuses its effort on strengthening Red Cross activities in schools and universities. It uses various opportunities to promote health talks, voluntary blood donor motivation and the organization of blood donation camps. Participants were supported with standard first aid kits, Red Cross Movement diaries, identity cards, and vests for youth volunteers. This year, the main focus is to better link the university and school activities with those of the township branches.



Youth members at a Red Cross Youth Leadership Training camp in Bagan township, Mandalay Division, in May this year. (Photo: Myanmar Red Cross Society)

Outcomes/expected results 4: MRCS financial management and resources are strengthened to promote self-reliance and sustainability.

Progress/Achievements

The computerized system of bookkeeping and accounting at MRCS's hub offices began in January with supervision by the MRCS head of the finance division. The Federation regional finance delegate will visit Myanmar in June to support an internal review of the new financial management system. This review will feed into longer-term discussions on finance systems for branches outside the Nargis areas.

IFRC supports MRCS in its efforts to develop its capacity of resource management and project planning. Following the training workshop on the project planning process on 24-27 May in Yangon, MRCS is working to organize a project/programme planning workshop at the end of August 2010 with the help of IFRC.

Outcomes/expected results 5: MRCS human resource systems are strengthened to promote improved recruitment, retention and management of staff.

Progress/Achievements

Like many National Societies, MRCS has historically managed its human resources within its administration structure. This structure is consistent with what could commonly be described as a 'personnel department' type of approach. Although MRCS took some steps for human resource improvement in 2005, it resulted in the unintended consequence of splitting the broader human resource functions between the administration and the human resources unit. Besides, the advent of the Cyclone Nargis has further complicated the human resource system and procedures with overwhelming recruitment demands and a heavy workload.

While MRCS is continuing the staggered relocation of its headquarters to Naypyidaw, there are indications that a number of staff will choose not to relocate. In this regard, MRCS, IFRC and partner national societies are discussing how to restructure and support the National Society's human resource system.

Constraints or Challenges

Limited coordination between health/disaster management divisions, and the organizational development division regarding youth and volunteer activities is affecting their effectiveness. MRCS's ability to concentrate on specific issues with clear focus, cooperate internally and reach consensus with unambiguous decisions is the greatest challenge. IFRC is facilitating inter-divisional coordination meetings and internal dialogue within the National Society. All activities under the area of organizational development require reflection and space for internal dialogue while planning the way forward.

The retention and recruitment of suitable finance staff was a major challenge throughout 2009. However, now that staff consolidation has taken place, a full team is in operation. The planned move to the new capital may significantly impact the ability of the IFRC to support MRCS.

Humanitarian values

Programme objective: Promote respect for diversity and human dignity, and reduce tolerance, discrimination and social exclusion.

Programme component 1: Communications development

Outcomes/expected results: Communications capacity of national headquarters and selected branches is developed to deliver timely support to the vulnerable, with particular focus on emergency response, and maintain a high public profile and positive image for MRCS.

Progress/Achievements

During this reporting period, information and communications packages were developed for internal and external audiences. Video clips covering five main sectors and three standard activities were distributed to the communication divisions of partner national societies. The 2009 report of MRCS was produced and distributed to the participants during the MRCS partnership meeting held in Bangkok on 30-31 March 2010. Three articles written by the Nargis operation hub reporting officers were posted on the websites of MRCS and IFRC.

In February, six staff from MRCS's communication and health divisions were trained in graphic design. A communications officer attended an international humanitarian law (IHL) teaching course in India on 20-28 April 2010 with the support of ICRC. Two communications officers participated in a photography skills training workshop held in Bangkok from 30 May to 1 June 2010.

Training for nine hub reporting officers recruited for the Cyclone Nargis operation is going on. Following a training session in February 2010, another session was conducted on 26-27 May 2010. As part of disaster preparedness, volunteers in seven townships of the Tanintharyi Division were given training on writing appeals, project proposals and reports. Now these trained volunteers send monthly reports to the communications division. A new training is scheduled for volunteers in six disaster-prone townships of the Magway Division in June 2010. Strategic report-writing training for two newly recruited headquarters-based MRCS reporting officers, conducted by the Federation reporting delegate, began in May.

Two new songs were composed in honour of the World Red Cross and Red Crescent Day. One of them depicts the activities of MRCS and IFRC all over the world, and the other describes the humanitarian efforts of Red Cross volunteers throughout the globe. As many as 10,000 Red Cross emblem posters and 10,000 posters on the seven Principles were printed and distributed to 325 townships on the occasion of World Red Cross and Red Crescent Day.

News about World Red Cross and Red Crescent Day was covered by local newspapers and TV channels. The two new Red Cross songs were also broadcast on TV channels. Also, a five-minute TV clip on hand-washing with five episodes, produced by MRCS and approved by the Ministry of Health, is being broadcast on Myanmar TV channels.

IT officers visit hub offices regularly to ensure the maintenance of satellite Internet connections.

The capacity of the MRCS communications division has been strengthened with the recruitment of the two new reporting officers. Now, the total number of its staff has increased from four in 2002 to 14 this year.

Programme component 2: Dissemination

Outcomes/expected results: Promotion of key national and global advocacy programmes, and humanitarian programming incorporating Movement principles and values in Myanmar, through ongoing communications work.

Progress/Achievements

A total of 1,140 people, including Red Cross volunteers, workers, students, military officers, and local authorities, have benefited from MRCS advocacy and dissemination activities carried out throughout the country.

In accordance with the bilateral agreement signed with Australian Red Cross in April 2009 regarding its support for restoring family links activities in the years to come, MRCS is now conducting a needs assessment in order to define the scope of relevant activities to be conducted.

Working in partnership

MRCS and IFRC continue to maintain close coordination through daily and weekly meetings. With the support of IFRC, the National Society is better able to conduct inter-divisional IFRC/MRCS meetings as well as the coordination meetings together with partner national societies. IFRC holds Movement coordination meetings on a monthly basis with the four in-country partner national societies and ICRC.

MRCS, IFRC and Japanese Red Cross Society cooperate with each other in the implementation of the CBFA programme in Myanmar, in accordance with the tripartite agreement concluded in 2008. MRCS, IFRC and Austrian Red Cross signed a two-year cooperation agreement in April 2010, which stipulates their roles and responsibilities in implementing a water and sanitation project in Myanmar.

IFRC continues to provide standard services to the in-country delegations of Australian Red Cross, Danish Red Cross and French Red Cross, in accordance with the Administrative Service Agreements signed with them. The MRCS partnership meeting took place in Bangkok, Thailand, on 30-31 March 2010, at which representatives of MRCS joined those from 16 partner national societies, ICRC and IFRC in reviewing the implementation of the Cyclone Nargis operation and the Myanmar country plan, and discussing the issues regarding future partnerships with MRCS.

MRCS also has important partnerships with ICRC, UNICEF, UNFPA, UNHCR⁶, and Burnet Institute, and has maintained close relationships with the Ministry of Health and the Ministry of Social Welfare and Resettlement, as well as local authorities.

Contributing to longer-term impact

MRCS and IFRC are working closely together to make the best use of the Cyclone Nargis operation, in the best interests of the National Society. The two sides are implementing a jointly-developed transition plan aimed at making MRCS much stronger at the end of the operation. The experience and capacity building gained by Red Cross staff in the course of developing an effective monitoring and evaluation system for the Nargis operation with

⁶ United Nations Children's Fund (UNICEF), United Nations Population Fund (UNFPA), and United Nations High Commissioner for Refugees (UNHCR)

the support of IFRC are being shared with the staff involved in annual programmes. MRCS is being supported in a holistic review of its development through the ongoing review of the legal base and the integrated CBHFA approach, and through working together to address the key issues raised during the Nargis transition.

MRCS is giving due attention towards maintaining a good gender balance and diversity among staff, volunteers and beneficiaries. In the coming years, it will be encouraged to expand this to key decision-making positions as well at the governance and management levels. It will be supported to address this while pursuing the revision of its statutes.

Looking ahead

MRCS stands at an important crossroads of its development. The Cyclone Nargis operation - the largest of its kind ever implemented by the National Society - is due to be completed by May 2011, and the society's current Strategic Plan for 2007-2010 is to be reviewed and re-developed in the second half of this year. The new Plan will be based on the review results and IFRC's *Strategy 2020*.

With the successful completion of the Nargis operation, MRCS will have an even better image and reputation in the country and find itself in a better position to develop it into a stronger National Society. Besides this, the revision of its legal base and the development of a new strategy will pave the way to strengthening its mandate in Myanmar society and set clear directions for its development and programming.

Despite these promising elements, MRCS is also faced with challenges such as to ensure a successful transition from the Nargis operation to country-wide annual programming; enhance volunteer management; the development of an appropriate organizational structure; and, more importantly, to diversify its sources of funding. The pace of programme implementation in the second half of 2010 may slow down because of the move of the MRCS headquarters from Yangon to Naypyidaw and the general elections scheduled for the end of this year.

How we work	
<p>The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".</p>	<p>Global Agenda Goals:</p> <ul style="list-style-type: none"> • Reduce the numbers of deaths, injuries and impact from disasters. • Reduce the number of deaths, illnesses and impact from diseases and public health emergencies. • Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability. • Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.
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International Federation of Red Cross and Red Crescent Societies

MAAMM002 - Myanmar

Mid-year Report 2010

Selected Parameters	
Reporting Timeframe	2010/1-2010/6
Budget Timeframe	2010/1-2010/12
Appeal	MAAMM002
Budget	APPEAL

All figures are in Swiss Francs (CHF)

I. Consolidated Response to Appeal

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
A. Budget	298,690	813,524	550,161	56,065	100,000	1,818,440
B. Opening Balance	120,249	609,312	268,668	60,359	40,031	1,098,619
Income						
Cash contributions						
<i>China Red Cross, Hong Kong branch</i>	88,279					88,279
<i>Finnish Red Cross</i>		15,659				15,659
<i>Finnish Red Cross (from Finnish Government)</i>		88,734				88,734
<i>French Red Cross</i>	-40					-40
<i>Japanese Red Cross</i>		55,104				55,104
<i>Netherlands Red Cross</i>			14,680	55,784	17,616	88,080
<i>Netherlands Red Cross (from Netherlands Government)</i>	6,952					6,952
<i>New Zealand Red Cross</i>	-9					-9
<i>Other</i>	49	325				374
<i>Swedish Red Cross (from Swedish Government)</i>	51,753	73,933	92,416	3,697		221,798
C1. Cash contributions	146,984	233,754	107,096	59,481	17,616	564,930
Outstanding pledges (Revalued)						
<i>Finnish Red Cross</i>		6,158				6,158
<i>Finnish Red Cross (from Finnish Government)</i>		34,894				34,894
<i>Netherlands Red Cross</i>			-14,879	-56,539	-17,854	-89,272
<i>Netherlands Red Cross (from Netherlands Government)</i>	-7,439					-7,439
<i>Swedish Red Cross (from Swedish Government)</i>	49,226	70,323	87,904	3,516		210,970
<i>Taiwan Red Cross Organisation</i>			6,800			6,800
C2. Outstanding pledges (Revalued)	41,787	111,375	79,825	-53,023	-17,854	162,110
Inkind Personnel						
<i>Germany Red Cross</i>					51,000	51,000
C5. Inkind Personnel					51,000	51,000
Other Income						
<i>Miscellaneous Income</i>			-138,137			-138,137
<i>Services</i>					539	539
C6. Other Income			-138,137		539	-137,598
C. Total Income = SUM(C1..C6)	188,771	345,130	48,784	6,458	51,301	640,443
D. Total Funding = B + C	309,020	954,442	317,452	66,816	91,332	1,739,061
Appeal Coverage	103%	117%	58%	119%	91%	96%

II. Balance of Funds

	Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination	TOTAL
B. Opening Balance	120,249	609,312	268,668	60,359	40,031	1,098,619
C. Income	188,771	345,130	48,784	6,458	51,301	640,443
E. Expenditure	-86,128	-181,990	-128,393	-24,999	-77,029	-498,538
F. Closing Balance = (B + C + E)	222,892	772,452	189,059	41,817	14,303	1,240,523

International Federation of Red Cross and Red Crescent Societies

MAAMM002 - Myanmar

Mid-year Report 2010

Selected Parameters	
Reporting Timeframe	2010/1-2010/6
Budget Timeframe	2010/1-2010/12
Appeal	MAAMM002
Budget	APPEAL

All figures are in Swiss Francs (CHF)

III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Disaster Management	Health and Social Services	National Society Development	Principles and Values	Coordination		
A		B					A - B	
BUDGET (C)		298,690	813,524	550,161	56,065	100,000	1,818,440	
Supplies								
Shelter - Relief	30,000							30,000
Clothing & textiles	70,464							70,464
Food			1,709				1,709	-1,709
Water & Sanitation	100,308		9,943				9,943	90,365
Medical & First Aid	38,073		20,644	1,453			22,097	15,975
Teaching Materials	2,825		1,016				1,016	1,809
Utensils & Tools	2,500							2,500
Other Supplies & Services	28,076	3,457	10,987				14,444	13,632
Total Supplies	272,246	3,457	44,299	1,453			49,209	223,037
Land, vehicles & equipment								
Land & Buildings				7,267			7,267	-7,267
Vehicles			7,866				7,866	-7,866
Computers & Telecom	7,604	1,920	1,744	2,267			5,930	1,674
Office/Household Furniture & Equipm.	3,000							3,000
Others Machinery & Equipment		1,593					1,593	-1,593
Total Land, vehicles & equipment	10,604	3,512	9,610	9,534			22,656	-12,052
Transport & Storage								
Storage	42,502	9,045	5				9,051	33,451
Distribution & Monitoring	17,840		924	12			937	16,903
Transport & Vehicle Costs	6,437		3,775	266			4,041	2,396
Total Transport & Storage	66,779	9,045	4,705	278			14,028	52,751
Personnel								
International Staff	440,900	5,498	366	34,707		73,699	114,271	326,629
National Staff			437	603			1,040	-1,040
National Society Staff	257,718	7,406	36,856	21,046	4,209		69,516	188,202
Consultants	10,331	1,155	952				2,107	8,224
Total Personnel	708,949	14,059	38,612	56,355	4,209	73,699	186,934	522,015
Workshops & Training								
Workshops & Training	434,415	15,925	63,756	17,164	354	405	97,604	336,811
Total Workshops & Training	434,415	15,925	63,756	17,164	354	405	97,604	336,811
General Expenditure								
Travel	63,617	1,193	4,342	3,822		395	9,752	53,866
Information & Public Relation	95,892	3,110	10,252	4,973	9,484	75	27,894	67,998
Office Costs	32,655	1,391	7,200	1,526	246	845	11,208	21,446
Communications	10,795	1,807	224	49			2,080	8,714
Professional Fees	4,048							4,048
Financial Charges	241	2	103	32		21	158	83
Other General Expenses			4	16			21	-21
Total General Expenditure	207,248	7,502	22,127	10,418	9,730	1,336	51,113	156,135
Programme Support								
Program Support	118,199	5,688	11,810	7,707	1,534	1,589	28,328	89,870
Total Programme Support	118,199	5,688	11,810	7,707	1,534	1,589	28,328	89,870
Operational Provisions								
Operational Provisions		26,940	-12,928	25,482	9,172		48,666	-48,666
Total Operational Provisions		26,940	-12,928	25,482	9,172		48,666	-48,666
TOTAL EXPENDITURE (D)	1,818,440	86,128	181,990	128,393	24,999	77,029	498,538	1,319,901
VARIANCE (C - D)		212,562	631,534	421,769	31,066	22,971	1,319,901	