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## Long Term Planning Framework 2012-2015 Myanmar country office



+C International Federation of Red Cross and Red Crescent Societies



Children have been noted to be agents of positive behaviour change as part of community-oriented health initiatives, such as hand washing. (Photo: Myanmar Red Cross Society)

### 1. Who are we?

The Myanmar country office of the International Federation of Red Cross and Red Crescent Societies (IFRC) which was established in 1993, has assisted the Myanmar Red Cross Society (MRCS) in the areas where it needs IFRC support. The size of the country office has varied from year to year and has been determined by the needs of programmes and operational support to MRCS. With the completion of the Cyclone Nargis emergency operation in 2011, the country office will focus on supporting MRCS in achieving the goals and objectives outlined in its Strategy for 2011-2015 which was developed based on the strategic aims and enabling actions of the IFRC's Strategy 2020.

To maintain the capacity to provide MRCS with necessary support in relevant areas, the country office will consist of six permanent delegates, at maximum, in 2012, supported by an appropriate number of national staff, covering international representation, management, and coordination, as well as technical areas in disaster management, health and care, water and sanitation, and organizational development and humanitarian values. The number of delegates will gradually be reduced afterwards in line with the growing capacity of MRCS.

### 2. What is our mission?

The mission of the Myanmar country office is to support MRCS in preventing and alleviating the suffering of the people of Myanmar, especially during times of disaster, and to become an even more effective and accountable humanitarian organization in Myanmar, acting with and for the most vulnerable.

### 3. Where have we come from and what have we done so far?

Myanmar is the largest country in mainland Southeast Asia with a total land area of 676,578 sq km, and a population of 54 million. Its long coastline of about 2,000km covers almost the entire east coast of the Bay of Bengal.

Myanmar has been rated 135 among 179 countries in the 2010 Human Development Index. Despite improvement in some indicators, the health status of the people remains of concern with noteworthy differences in health and nutrition, depending on where they live. A life expectancy at birth is 60-64 years and an under-five mortality rate is 77.77 per 1,000 live births (*Reference: Health in Myanmar 2010*). Acute respiratory infections, diarrhoea, malnutrition and malaria are the primary causes of child mortality. Infectious diseases including malaria, tuberculosis (TB) and HIV continue to remain a concern for the whole population in Myanmar.

Health services are provided through the public and private sectors with significant numbers of the population relying on traditional medicine. Public health services are centralized at the township level. UNICEF estimates that 60 per cent of all visits to health services are to the private sector, with public sector doctors also providing services through private clinics. Formal social welfare systems are quite limited.

Being a country with heavy rainfall, floods occur regularly during the mid-monsoon period from June to August in areas traversed by rivers or large streams. The country is also prone to cyclones, earthquakes, landslides and drought. In recent years alone, the country was hit by a series of big natural disasters including Cyclone Nargis in 2008, Cyclone Giri in 2010 and the Shan earthquake in 2011. Cyclone Nargis, which struck Myanmar on 2 and 3 May 2008, destroyed 450,000 homes and left 140,000 people dead. The UN estimates that 2.4 million people were affected. Cyclone Nargis was the worst natural disaster in the history of Myanmar, and the most devastating cyclone to strike Asia since 1991.

With the support of IFRC and other partners, MRCS mounted emergency relief and recovery operations following the recent disasters. The relief operations of the Cyclone Giri and Shan earthquake have been brought to a successful conclusion and the Cyclone Nargis operation was completed by the end of September 2011.

In the course of implementing various programmes and operations with the support of IFRC and other partners, MRCS has enhanced its capacity in various fields and learned valuable lessons as well. Various reviews and evaluations carried out by MRCS, IFRC and partner national societies made recommendations to reorient the way MRCS organizes its activities, and to improve its performance in specific areas.

Historically MRCS's activities have been conducted based on the structure of its branches at the township level. Volunteers most often travel from the branch to engage with communities to undertake first aid training, dissemination or other activities before returning to their township base. Under this type of structure, communities receive prescribed support as defined by the available skills, funding or interest of donors.

With this in mind, MRCS has committed itself to taking a community-based approach in all future activities. Through this approach, Red Cross branches and volunteers will change their role from service delivery to the facilitation and support of community organization and mobilization. This way of working requires a different philosophy, operating structure and volunteer skill set. Wherever possible, MRCS will adopt common models and approaches for consistency and clarity. In a new approach, the role of the headquarters will shift the implementation of all projects to supporting branches and communities with tools and resources, allowing them to undertake them on their own.

To adopt a new way of working and to ensure the planned organizational development of the national society in 2012-2015, MRCS will have to address a number of strategic issues, challenges and opportunities, which include, among others:

- To be self-sufficient in covering core costs of MRCS;
- To disseminate the benefits of community-based programmes to all stakeholders;
- To revise the MRCS Act according to the country's new constitution;
- To strengthen the image of MRCS in the country;
- To strengthen volunteer management systems and practices;
- To gradually evolve into a decentralized organization;
- To provide vulnerable people with quality services in core areas of health and care, disaster management, organizational development and humanitarian values;
- To move from a project to an integrated programme approach;
- To promote and disseminate humanitarian values and the International Humanitarian Law; and,
- To ensure a smooth transition of the MRCS's headquarters from Yangon to Naw Pyi Taw, the country's new capital.

MRCS has adopted a new Strategy for 2011-2015 which has outlined its strategic goals and key strategies for different sectors in order to address these issues and challenges in the next five years.

### 4. Who are our stakeholders?

IFRC's country plans for 2010 and 2011 were funded by Austrian Red Cross, Canadian Red Cross, Finnish Red Cross, German Red Cross, Hong Kong branch of the Red Cross Society of China, Japanese Red Cross Society, Netherlands Red Cross, Swedish Red Cross and Taiwan Red Cross Organization. Please see below the partners' support to the MRCS in 2010:

	Disaster Response	DRR	Health	Watsan	OD	Comms	HD	IDRL	Coordination/ Management
Multilateral partne	er national socie	ties throu	gh IFRC:						•
Austrian RC				✓					
Canadian RC			√						
Finnish RC			√						
German RC									✓
Hong Kong branch of Red Cross Society of China		*	*						
Japanese RCS			✓						
Netherlands RC					1				
Swedish RC	✓	✓	✓		1	✓			
Other multilateral	partners throug	h IFRC:							
Bilateral partner r	national societies	s:							
Australian RC			✓			✓			
Danish RC			√			✓			
French RC	✓	<ul> <li>✓</li> </ul>		✓					
Other bilateral pa	rtners:								
ICRC					<ul> <li>✓</li> </ul>	<ul> <li>✓</li> </ul>			
UNICEF	✓	<b>~</b>	✓						
UNFPA	✓		✓						
UNHCR	✓	×							
Burnet Institute			✓						

#### Current partner support<sup>1</sup> to MRCS (CHF)

\* The total is an estimated funding amount. The funding for MRCS's emergency relief operations is not included here.

MRCS is also working in partnership with Australian Red Cross, Danish Red Cross and French Red Cross on a bilateral basis. MRCS has important partnerships with various national societies, including the Red Cross Society of China, International Committee of the Red Cross (ICRC), UNICEF, UNFPA, UNHCR, UNOPS and Burnet Institute; it has also maintained close relationships with the Ministry of Health, Ministry of Social Welfare and Relief and Resettlement, Ministry of Education, Ministry of Information, and Ministry of Home Affairs, as well as local authorities and local non-governmental organizations (NGOs).

In 2010, MRCS reached some 650,000 beneficiaries under the Federation-supported annual plan and another 685,000 or so beneficiaries under the Cyclone Nargis operation. The people reached equally benefit from the National Society programmes under disaster management such as response preparedness and disaster risk reduction (DRR); health and care; and communications.

<sup>&</sup>lt;sup>1</sup> Disaster risk reduction (DRR) – water and sanitation (watsan) – organizational development (OD) – communications – humanitarian diplomacy (HD) – international disaster response laws, guidelines and principles (IDRL) – resource mobilization/planning, monitoring, evaluation and reporting (RM PMER)

## 5. Where are we going and how are we going to get there?

IFRC remains committed to supporting MRCS in carrying out its humanitarian mission in the country in accordance with its Strategy for 2011-2015. In close cooperation with its key partners, IFRC will focus on supporting MRCS in achieving the following outcomes along the five business lines described below in the next four years:

### 5.1 Business Line 1 – "To raise humanitarian standards"

**Outcome 1:** MRCS, with IFRC support, has improved the quality of its services to vulnerable people and raised humanitarian standards in the country.

**Output 1.1:** MRCS has promoted the application of SPHERE standards in humanitarian response in the country and advocated for the adoption of the international disaster response laws, rules and principles (IDRL).

Target: by 2015,

- The new SPHERE handbook translation in the Myanmar language has been finalized and the handbook has been made available to all humanitarian stakeholders in Myanmar
- A advocacy workshop on IDRL context and application in other Southeast Asian countries has been conducted with the relevant government authorities

### 5.2 Business Line 2 – "To grow Red Cross Red Crescent services for vulnerable people"

**Outcome 1:** MRCS, with IFRC support, has improved response preparedness by strengthening staff, volunteers and national society structures and facilities at all levels.

**Output 1.1:** MRCS's warehousing and management capacity is improved to pre-position disaster preparedness stocks for 12,000 households.

Target: by 2015,

- All MRCS warehouse staff has been trained on the MRCS warehouse manual, and the guidelines are applied
- The disaster preparedness stock is used and well-managed, and a sustainable system for the replenishment of stock is in place

**Output 1.2:** MRCS's emergency response capacity is enhanced through clear operational guidance and procedures, well-trained national and regional emergency response teams, improved communication, efficient logistics management systems and increased funding resources.

Target: by 2015,

- The standard operating procedures (SoPs) for emergency response action are reviewed on an annual basis and revised according to the findings
- The emergency response team structure has been established and is utilized in natural and complex disaster situations
- Communications and logistics systems and assets are in place at headquarters and the most disaster-prone states/regions, and these are regularly updated
- Disaster relief emergency fund (DREF) and local fundraising are more frequently used and emergency appeals are funded by 70 per cent

Output 1.3: MRCS has signed pre-disaster agreements with partners concerned.

Target: by 2015, MRCS has finalized a pre-disaster agreement with all relevant Red Cross Red Crescent Movement and non-Movement partners

Output 1.4: MRCS has enhanced its capacity for emergency response in water and sanitation.

Target: by 2015, MRCS has trained stand-by teams and emergency equipment for providing safe drinking water at six States and Regions to provide safe drinking water

**Output 1.5:** MRCS is better prepared to respond to public health in emergencies, and provide first aid in times of emergency.

Target: by 2015,

- Public health in emergencies (PhiE) sessions are integrated into all response preparedness training for emergency response teams (ERT)
- All response teams members will have advanced first aid training and refresher training every third year

**Output 1.6:** MRCS with the support of IFRC conducts timely, effective and multi-sectoral responses to major disasters in the country and undertakes specific mandated tasks (such as supporting IFRC in its role as the emergency shelter cluster convenor), as and when they arise.

Target: by 2015,

- Under the emergency response team (ERT) concept, immediate assessments and emergency response teams are activated in all major disasters
- MRCS will target at least 20 per cent of the affected population in each major disaster with multisectoral response including the distribution of non-food items, emergency shelter materials, safe drinking water, emergency health and psychosocial support
- MRCS will support IFRC in case the emergency shelter cluster is activated

# 5.3 Business Line 3 – "To strengthen the specific Red Cross Red Crescent contribution to development"

**Outcome 1 :** Communities have increased their safety and resilience through community-based programming in disaster risk reduction (DRR), health, and water and sanitation, facilitated by IFRC/MRCS.

**Output 1.1:** 320 communities in 80 townships with disaster and health-related risks are reached through community-based programmes in disaster risk reduction (DRR), health, and water and sanitation.

Target: by 2015,

- The model of community-based programming integrating health, water and sanitation, disaster risk reduction (DRR) and branch development activities is ready for replication in other townships
- At least 75 per cent of the townships branches involved in the community-based programme will give ongoing support to their respective communities
- At least 50 per cent of the townships branches involved in the community-based programme will have raised income on the township level to support ongoing capacity building activities
- At least 50 per cent of the communities involved in the community-based programmes are sustaining the programme activities through their own financial means
- The safety and resilience of at least 75 per cent of the communities targeted under this programme has improved

**Output 1.2:** Disaster risk reduction (DRR) is mainstreamed into various emergency and recovery activities to reduce vulnerability and future disaster risks.

Target: by 2015, all interventions after major disasters will include DRR activities as a cross-cutting issue in the respective plans of action

**Output 1.3:** MRCS has contributed to the control of HIV and other communicable and non-communicable diseases in the country.

Target: by 2015,

- The prevention of HIV and other communicable and non-communicable diseases will be integrated into community-based health and first aid (CBHFA) activities in all townships where it has been identified as a priority by the communities
- MRCS will participate in the country coordination mechanism (CCM) meetings by the Government of the Union of Myanmar to control HIV, communicable and non-communicable diseases

Output 1.4: MRCS has provided first aid and safety services to people in need throughout the country.

Target: by 2015,

- At least 100,000 community members will receive basic first aid skills per year provided by MRCS first aid trained volunteers
- Standardized updated training manuals, curriculum and training modules are provided to support first aid and safety services activities

**Output 1.5:** MRCS has supported the mobilization of voluntary non-remunerated blood donors (VNRBD) in the country.

Target: by 2015,

- The number of voluntary non-remunerated blood donors (community, youth) by respective blood recruiters is increased and retained every year.
- Red Cross youth and Red Cross volunteers have scaled-up activities in mass blood donation campaigns and youth camps

**Outcome 2:** MRCS is better structured and organized at all levels to deliver quality community-based services to the vulnerable people in Myanmar.

**Output 2.1:** MRCS is supported technically and financially in achieving its strategic goals set in its Strategy for 2011-2015.

Target: by 2015,

- The new Strategic Plan 2011-2015 is disseminated among at least 80 per cent of township Red Cross branches
- Fundraising and income generation will contribute towards 30 per cent of the headquarters core costs
- Township branches with community-based programmes have sufficient financial means to sustain minimum branch standards and support to communities
- The financial management system is revised and extended to targeted township Red Cross branches

**Output 2.2:** MRCS's capacity and systems are improved at all levels to undertake community-based and disaster response activities.

Target: by 2015,

- The branch development model and branch financial guidelines are implemented in over 80 per cent of the townships with community-based programming and minimum branch standards are achieved
- The branch development model is known by 80 per cent of all townships in Myanmar
- All present training curricula are revised to better support community-based activities

**Output 2.3:** MRCS has progressively involved the Red Cross youth in active participation in the MRCS's decision-making and playing a key role in programme implementation through improved branch youth activities.

Target: by 2015,

- MRCS Youth Red Cross representatives are part of the MRCS Central Council and other relevant decision-making committees
- 30 per cent of Red Cross Volunteers involved in programme activities are under 25 years of age

**Output 2.4:** MRCS has maintained a pool of highly competent staff, fulfilling their defined roles and being fairly rewarded within a human resource (HR) system of accountability.

Target: by 2015,

- Human resource policy and staff regulations are developed and implemented
- 40 per cent of the core staff of MRCS is funded through MRCS's own financial means

**Output 2.5:** A volunteer management system is developed to enhance voluntary service to vulnerable people.

Target: by 2015,

• A volunteer management handbook is developed, and effective volunteer management is implemented in 40 per cent of all Red Cross branches

# 5.4 Business Line 4 – "To heighten Red Cross Red Crescent influence and support for our work"

**Outcome 1:** IFRC/MRCS has promoted the understanding and respect for the Red Cross principles, diversity, human dignity, and reduced intolerance, discrimination and social exclusion in Myanmar.

**Output 1.1:** MRCS is actively involved in humanitarian diplomacy to support vulnerable people in Myanmar by defining strategies to advocate and disseminate to higher-level authorities.

Target: by 2015, MRCS is promoting and strengthening its auxiliary status to the Myanmar government and has increased its influence in humanitarian matters in the country

**Output 1.2:** MRCS has promoted the Red Cross Red Crescent principles, values and international humanitarian law (IHL) to mobilize support to the Red Cross Red Crescent Movement within the country.

Target: by 2015, MRCS is providing regular dissemination and training in IHL and Red Cross Red Crescent principles to its voluntary base and officials at all levels

Output 1.3: MRCS's communication system and capacity are strengthened at all levels.

Target: by 2015,

- 40 per cent of all township branches will have communication means (telephones etc.) to communicate with other branches and MRCS headquarters
- Regular reports of 40 per cent of the township branches are received, analysed and summarized for better information management
- The number of quality news reports (newspapers, radio and TV) and articles about MRCS has increased

**Output 1.4:** IFRC has actively participated in the Humanitarian Country Team (HCT) meetings and kept a close working relationship with the donor community and other national and international humanitarian actors.

Target: by 2015,

- Observer status in the HCT and INGO Forum is maintained
- Donors and other national and international humanitarian actors are regularly updated on the

humanitarian and development action through direct information meetings and bulletins

**Output 1.5:** MRCS, supported by IFRC, has contributed to collecting reliable information on humanitarian issues in Myanmar and strengthening advocacy towards the Myanmar government, donor governments and other stakeholders to increase the humanitarian space.

Target: by 2015,

- MRCS and IFRC will regularly contribute to the UN-OCHA Humanitarian Update
- MRCS as auxiliary to the Government of the Union of Myanmar in humanitarian action has extended its humanitarian activities to at least 30 new townships in all states and regions

**Output 1.6:** MRCS's legal base is revised and approved to enhance the national society's functions and service delivery in the country.

Target: by 2015, the legal base of MRCS is revised and approved by the Government of the Union of Myanmar

**Outcome 2:** MRCS has achieved a higher level of self-sufficiency, sustainability and independence by improving its income generation activities

**Output 2.1:** A resource mobilization division in MRCS is established with defined policy, objectives and strategies.

Target: by 2015, the resource mobilization division is established and will contribute at least 20 per cent of the core costs

**Output 2.2:** Existing income generation activities are mapped, and a donor database and pilot income generation activities for branches are developed for replication in the future.

Target: by 2015, a catalogue of best practices in income generation on branch level will be produced, regularily updated and disseminated to all townships

**Output 2.3:** Income generation initiatives are rolled out to a minimum of five township branches with community-based programmes per year.

Target: by 2015, at least 80 per cent of the targeted township branches will have identified income generation activities based on the income generation best practices and guidelines

**Output 2.4:** Business opportunities for higher income generation are identified and strengthened.

Target: by 2015,

- The businesses run by MRCS will result in a 30 per cent higher revenue than in the base year 2010
- Three new business proposal are elaborated and submitted to MRCS decision-making bodies

**Outcome 3:** Sufficient resources are mobilized by MRCS with IFRC assistance to support the implementation of the 2012-2015 Planning Framework.

**Output 3.1:** MRCS, with the support of IFRC, has developed an appropriate resource mobilization strategy.

Target: by 2015, a MRCS resource mobilization strategy is developed and adopted by the Central Council

**Output 3.2:** MRCS, with the support of IFRC, has closely worked with all partners and donors to mobilize the resources to support the implementation of the 2012-2015 Planning Framework.

Target: by 2015, long-term funding for all core programmes of MRCS is secured and funding from donors is diversified

# 5.5 Business Line 5 – "To deepen our tradition of togetherness through joint working and accountability"

**Outcome 1:** Close coordination and management between MRCS and IFRC are maintained to ensure joint working and accountability.

**Output 1.1:** The IFRC country office has maintained an effective management structure to provide MRCS with technical and financial support.

Target: by 2015,

- The structure of the IFRC country office is adapted to the requirements of MRCS on a yearly basis
- The country office has raised sufficient donor funding to sustain the technical and managerial support MRCS needs

**Output 1.2:** MRCS, with IFRC support, has strengthened its planning, monitoring, evaluation and reporting (PMER) capacity and financial management to improve its accountability and donor reporting.and their qualifications and competencies through learning, training, knowledge and experience sharing.

Target: by 2015, a harmonized monitoring and evaluation (M&E) system for all emergency, recovery and development programmes is expanded and utilized

Output 1.3: MRCS, with IFRC support, has improved its coordination with all partners concerned.

Target: by 2015, regular meetings with the Red Cross Red Crescent Movement and non-Movement partners are organized by MRCS

**Output 1.4:** MRCS has participated in the Federation-wide reporting system (FWRS), and the organizational capacity assessment and certification process.

Target: by 2015, MRCS is involved in the FWRS, the certification process and the organizational cacpity assessment

In the implementation of this long-term planning framework, technical programme support will be provided to MRCS mainly through the health, disaster management, water and sanitation, and organizational development delegates, and under the coordination and guidance by a programme coordinator and a head of country office. Support will also continue to be available from the IFRC Southeast Asia regional office in Bangkok.

Considering delays in getting travel permits and limited access to project areas, the IFRC country office will give priority to building up the MRCS capacity for planning, monitoring, evaluation and reporting (PMER). IFRC will continue to maintain close coordination with various partners in the country, in particular, ICRC and three incountry bilateral partners: Australian Red Cross, Danish Red Cross and French Red Cross, as well as future partners wishing to work with MRCS; it will continuously promote harmonized approaches towards working with MRCS, with partners being committed to overall capacity building of the national society.

IFRC will help MRCS expand its bilateral and multilateral partnerships with different external agencies, including UNICEF, UNFPA, UNHCR, UNOPS and Burnet Institute, in the implementation of various projects in the country.

## 6. What are some of the key risks/assumptions?

The implementation of the 2012-2015 Planning Framework is subject to the following key risks and assumptions:

- The overall political situation in the country remains stable in the years to come.
- MRCS, even after the move of its headquarters from Yangon to Nay Pyi Taw, the new capital, is able to maintain its key staff and ensure effective communication between its programme staff and the IFRC country office.
- The IFRC country office is provided with unlimited access to vulnerable people and operational areas.
- MRCS facilitates smooth visa processes and travel authorizations for visitors from IFRC, partner national societies, and donors.
- Major disasters do not strike the country to detract the focus of the 2012-2015 Planning Framework.
- Sufficient funds are mobilized to support the implementation of the 2012-2015 Planning Framework.
- Donor governments' decreasing interest in supporting programmes in Myanmar do not undermine the MRCS/IFRC fundraising strategy.
- Changes emerging from the decentralization of the country's administrative power do not seriously affect the MRCS's branch structures at various levels.
- MRCS/IFRC remains committed to full cooperation in implementing this 2012-2015 Planning Framework and maintains the principle of independence in the field of humanitarian activities.
- Exchange rates between the Myanmar Kyat (MMK) and the US dollar (USD) and Swiss franc (CHF) remain stable.

## 7. How much will it cost?

#### Long Term Financial Projections 2012-2015

Myanmar	2012	2013	2014	2015	Total
BL 1. Humanitarian Standards	26,625	27,000	27,000	27,000	107,625
BL 2. Disaster Management Services (total)	1,264,675	1,479,000	1,479,000	1,479,000	5,701,675
Response preparedness	1,189,500	0	0	0	
Ongoing emergency operations	43,954	0	0	0	
Projected emergency operations	300,000	0	0	0	
BL 3. Sustainable Development	2,319,445	2,233,329	1,350,000	1,350,000	7,252,774
BL 4. Humanitarian Diplomacy	94,301	94,301	93,700	93,700	376,001
BL 5. Effective working and accountability	512,142	474,260	470,490	470,490	1,927,382
Total Budget	5,750,642	4,307,890	3,420,190	3,420,190	15,365,457

### How we work

All IFRC assistance seeks to adhere to the <u>Code of Conduct for the International Red Cross and Red</u> <u>Crescent Movement and Non-Governmental Organizations</u> (NGOs) in Disaster Relief and the <u>Humanitarian</u> <u>Charter and Minimum Standards in Disaster Response (Sphere)</u> 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.



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

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

#### Find out more on www.ifrc.org

### **Contact information**

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