



Myanmar Red Cross Society

2016 | ANNUAL REPORT

www.myanmarredcross.org.mm

2016

ANNUAL REPORT

TABLE OF CONTENTS

1.	President Foreword	2
2.	Myanmar Red Cross Society Structure	4
3.	GOAL 1	
	1. Health Activities	8
	2. First Aid and Safety Services	16
	3. Disaster Management	18
4.	GOAL 2	
	1. Humanitarian Value and Communication Activities	25
	2. Restoring Family Links	26
	3. Child Protection and Mine Risk Education Services	26
	4. South East Project	28
	5. Community Engagement and Accountability	28
5.	GOAL 3	
	1. Organizational Development Activities	30
	2. Resource Mobilization Activities	35
	3. Human Resource Management Activities	35
	4. Partnership Framework	37



Prof. Dr. Daw Mya Thu

PRESIDENT'S FOREWORD

Mingalarbar!

I am proud to confirm that Red Cross humanitarian assistance reached millions of people in Myanmar, 2016. Thanks for all staff and volunteers throughout the Society.

During 2016 the Myanmar Red Cross Society dynamic changes in the Legal Status, Structure, Strategy and 2015 MRCS Law. The election of newly Central Council members and executive committee members in the 12th Red Cross Assembly is one of the significant events in this year.

The Myanmar Red Cross Society provided humanitarian assistance through 43 community-based programs and projects. In this report, it is clearly stated that the MRCS has achieved its strategic goals by innovatively carrying out programs and projects with the Red Cross volunteers and staff for promoting vulnerable people's lives and communities. Within this year volunteers have worked in disaster preparedness information in their local communities and they have distributed relief items to families who lost everything in floods, storms, earthquakes and conflict also.

Helping to build safer, more resilient communities is at the heart of all Myanmar Red Cross Society activities. As we focus on improving communities' resilient program on helping families to prepare for disaster and response to emergencies.

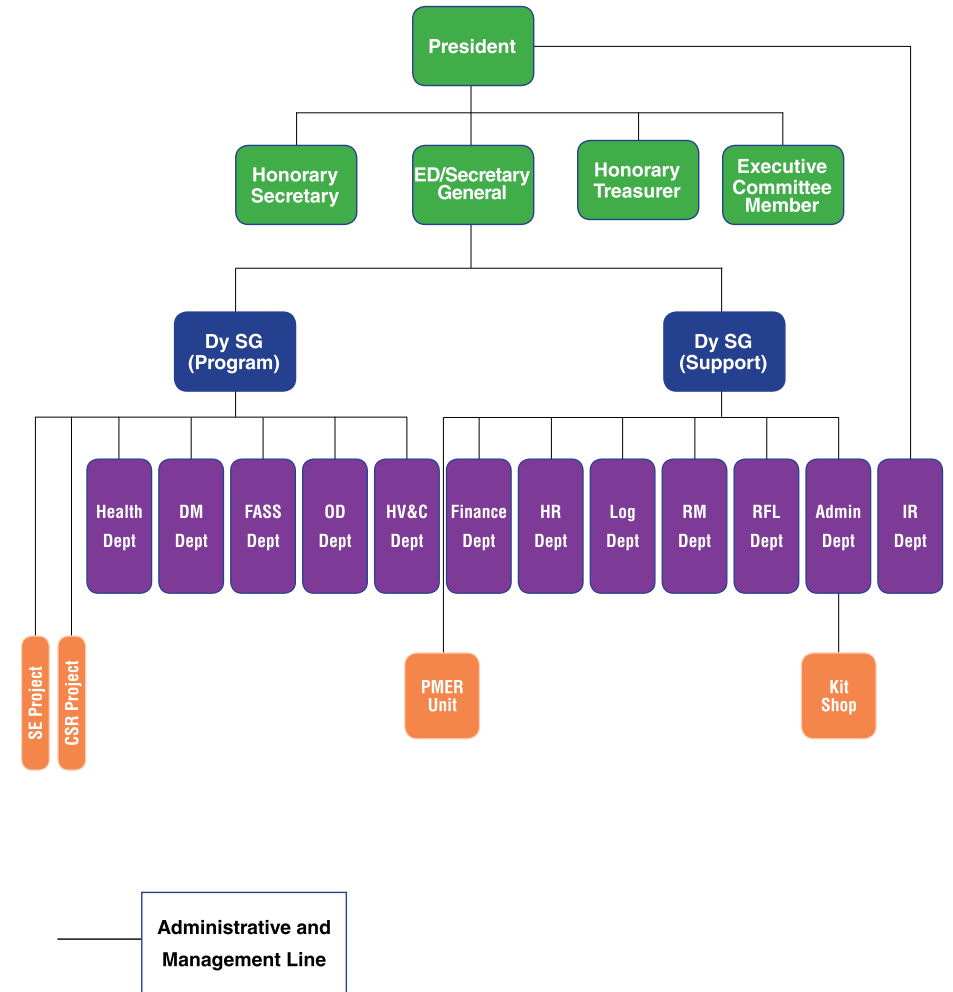
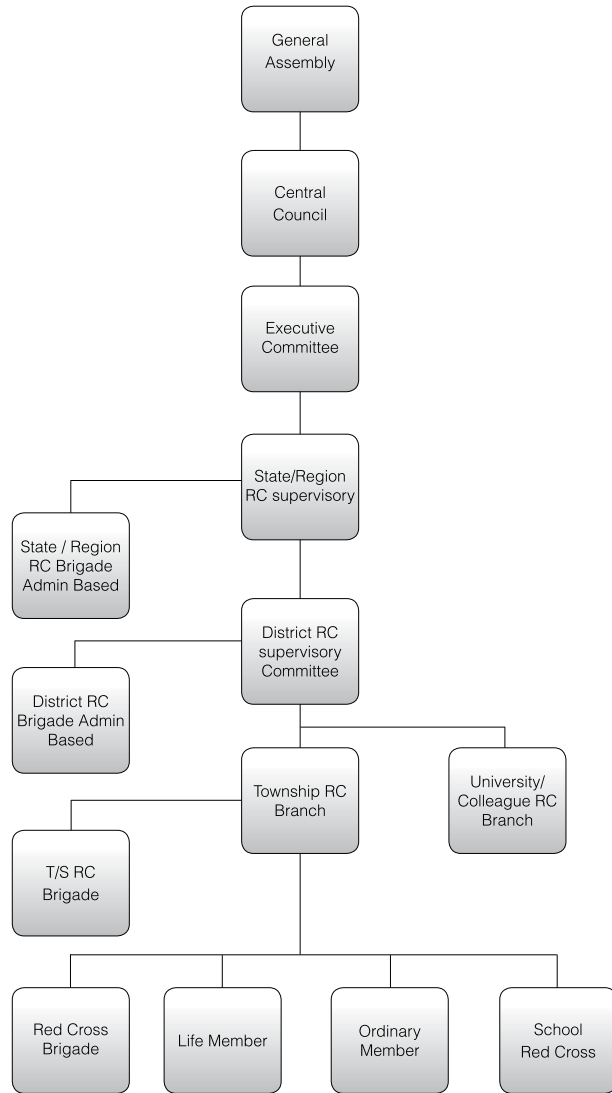
To help respond to the escalating number of vulnerable people in need of assistance, work is underway to strengthen the Myanmar Red Cross Society by building the capacity of our staff, volunteers and 14 countrywide States and Regions and Nay Pyi Taw.

However we continue to face challenges, increasing humanitarian needs as a result of violence between communities, means the work of the Red Cross in Myanmar as a provider of neutral, impartial, humanitarian aid is more critical than ever.

Nowadays, Red Cross Supervisory Committees from all levels have become key drivers in promotion of humanitarian services on the ground. Most importantly, the MRCS implemented these projects through IFRC with the bilateral support from 15 Partner National Society, UN organizations, NGO, INGOs and other cooperative partners. We sincerely appreciate our Red Cross volunteers, staff and partners for fulfilling our noble inspiration. By working together, we create a safer, stronger more resilient Myanmar.

Prof. Dr. Daw Mya Thu
President, Myanmar Red Cross Society

1. MYANMAR RED CROSS SOCIETY STRUCTURE





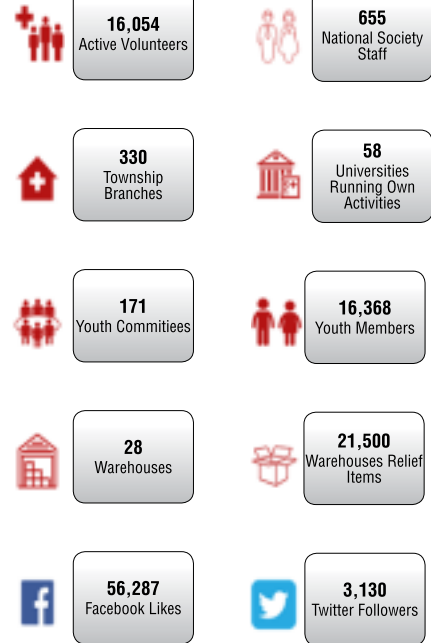
Myanmar Red Cross Society

Our Vision

“To be a well-functioning National Society with the capacity of providing humanitarian services to vulnerable people in Myanmar and beyond”

Our Mission

Develop safe and resilient communities through integrated community based initiatives, promoting humanitarian values by resourceful branches and the network of volunteers and members. Play an auxiliary role to the State in humanitarian field through strong legal base.



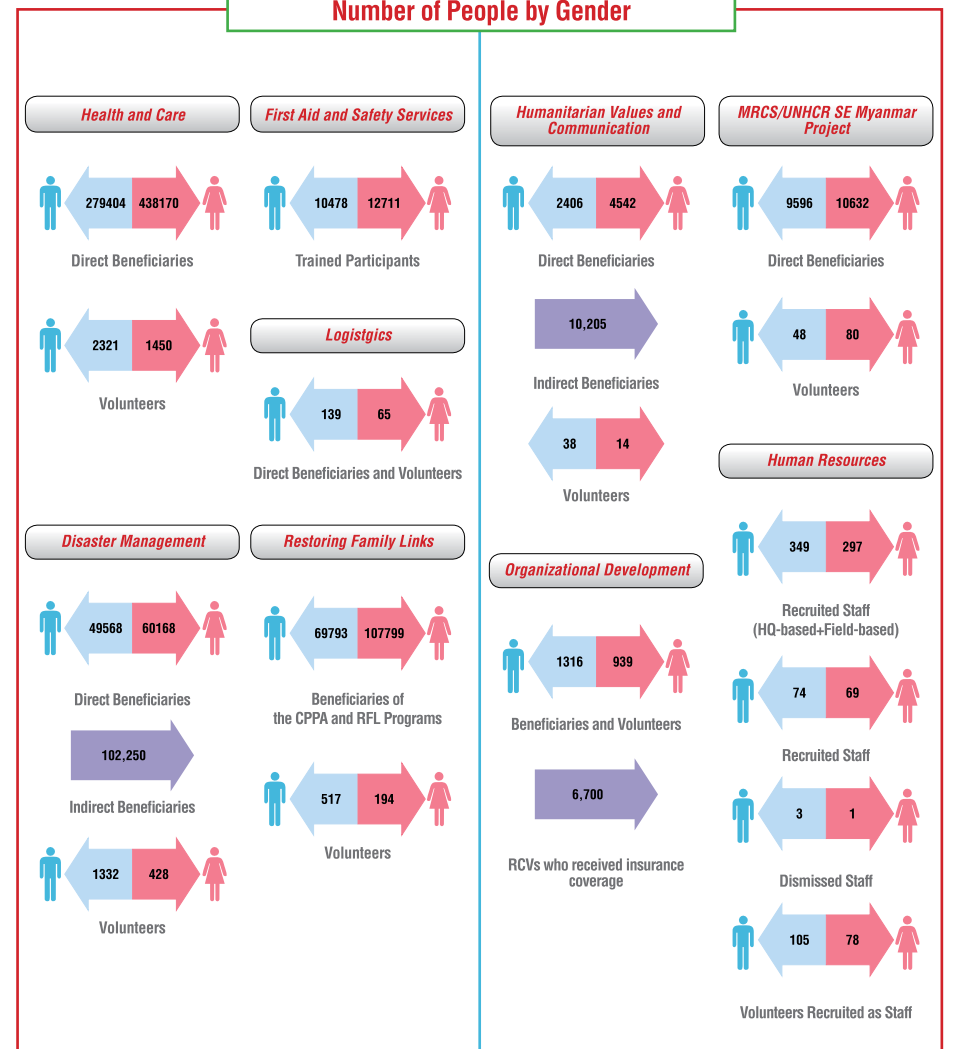
Total Beneficiaries



Volunteers involved



Number of People by Gender



The Myanmar Red Cross Society (MRCS) is the largest volunteer-based humanitarian organization in Myanmar. A total number of 1,178,652 beneficiaries were reached in 2016.

Strategic Goal 1

Build healthier and safer communities, reduce vulnerabilities, and strengthen resilience

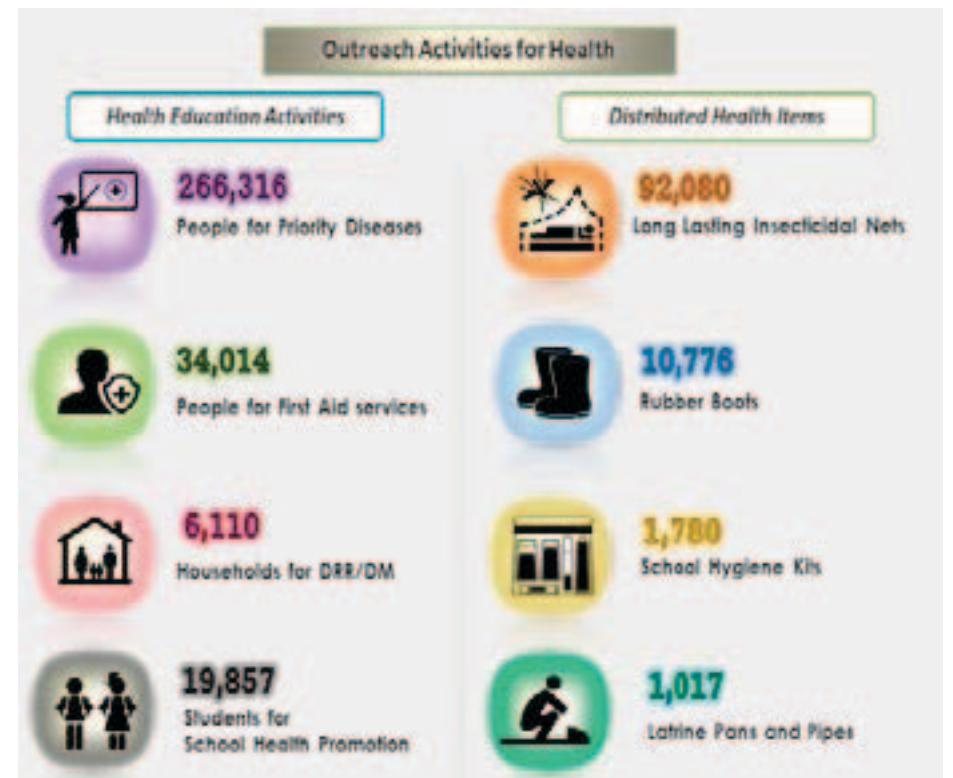
1. HEALTH ACTIVITIES

Health Activities of the MRCS followed its strategic goal 1 of the Strategic Plan 2016– 2020. Safe and resilient communities are developed through integrated community based initiatives while promoting humanitarian values through the network of Red Cross Volunteers (RCV) and members.

In 2016, health activities were implemented in key sectors of community-based health care such as First Aid Action, Tuberculosis and Malaria Prevention, Sexual and Reproductive Health, Water Sanitation and Hygiene Promotion, Epidemic Preparedness, Orthopedic Rehabilitation, and Maternal and Child Health Development through 15 integrated community-based health programs and projects.

Health activities reached during 2016	M	F	Total
No. of villages			1,655
People	181,947	256,645	638,767
Volunteers involved	668	1,040	2,687

Activities	Frequency/ Number
Construction of Open Wells	5
Renovation of Open Wells	11
2" Tube Well and Installation of Hand Pump with Roofing and Flooring	1
2" Deep Tube Well with Ground Tank and Water Pump	2
Number of Patients Referred by RCVs	178
Elevated Water Tank and Water Distribution	5
School Latrine/ Sample Latrine	35
School Hand Washing Facilities	5
Number of Emergency Obstetric Care (EmOC) Referrals	720
HE Session on the Importance of Vaccination	1,042
Number of Advanced First Aid Kits Distributed	2
Number of Small First Aid Kits Distributed	180
Number of Life Straws Distributed	10
Number of PPE(Personal Protection Equipment) Distributed	20



Project Period
From 2013 to 2016

Project Areas
Paukhaung (Bago Region)
Ywangan (Shan State)
Twantay (Yangon Region)
Dala (Yangon Region)
Loikaw (Kayah State)
Deemawsoe (Kayah State)

Partner National Society
Swedish Red Cross &
Finnish Red Cross

Technical support
IFRC

(A) COMMUNITY BASED HEALTH AND FIRST AID IN ACTION (CBHFA)

Community Based Health and First Aid in Action Program (CBHFA) has been implemented in six townships since 2013. In 2016, this program contributed to the goal of building community safety and resilience to reduce mortality and morbidity from priority communicable diseases in target communities by focusing on the impact of public health emergencies and disasters. As a result, capacity of communities and the Red Cross branches was strengthened, enabling it to support the implementation of these activities.

Additionally, household health education sessions, group health education sessions, monthly village committee meetings, quarterly township committee meetings and other Community Initiative Activities (CIA) were provided. Furthermore, community volunteers applied their first aid knowledge and skills based on the prioritized issues identified by the needs assessment.

CBHR Phase II Project Areas
Seven Villages in Taung Twin Gyi (Magway Region)

Number of Beneficiaries
8104 people

Building Resilience Community Project Areas
28 villages in Kyar Inn Seik Kye (Kayin State) and Hlaing Bwe (Kayin State)

Number of Beneficiaries
15646 people

Partner National Society
Australian Red Cross

COMMUNITY BASED HEALTH AND RESILIENCE (CBHR) - PHASE II aimed to strengthen communities' capacity to rebound, and adapt to shocks and stresses through identifying and addressing their key priorities for change with enhanced community connectedness.

School WASH facilities distribution, construction and renovation for the water resources, health education first aid services and patient referrals to the health care facilities were also provided.

MATERNAL AND CHILD HEALTH ACTIVITIES

The MRCS implemented maternal and child health activities especially in community based prevention and promotion aspects by performing two main health care projects: Community Based Maternal and Child Health Development Project – MNCH (Consortium) and Maternal, Newborn and Child Health Program – (MNCH/3MDG).

COMMUNITY BASED MATERNAL AND CHILD HEALTH DEVELOPMENT PROJECT – CBMNCH

Community Based Maternal and Child Health Development Project (CBMNCH) was implemented under the Community Based Health Development (CBHD) program with the aim of “improving access to maternal, newborn and child health care, water, hygiene and sanitation solutions for population”. The long-term outcome was to improve the health status of the overall population in Myanmar.

Interventions were based on a concept of “continuum of care” and they included:

- a. Improving practices and access to reproductive health, antenatal, delivery, postnatal and newborn care.
- b. Enhancing community resilience to most common communicable diseases.
- c. Enhancing communities' access to improved water solutions and hygiene and sanitation practices and
- d. Strengthening capacities of the Myanmar Red Cross Society in community-based health development.

MATERNAL, NEWBORN AND CHILD HEALTH PROGRAM (MNCH/3MDG)

Maternal, newborn and child health services for the poorest and the most vulnerable were launched with the support of the 3MDG fund. The program provided financial support to train Assistant Midwives (AMWs) and Community Health Workers (CHWs), support targeted communities in developing emergency referral plans for Newborn and Emergency Obstetric Care, and build the capacity of both MRCS staff and volunteers on community-based health programme management and support MRCS branches and income generation activities.

Community Based Maternal and Child Health Development Project – MNCH

Project Areas
78 remote rural communities in

Falam and Matupi Townships (Chin State)
Mogok (Mandalay Region)
Sagaing (Sagaing Region)

Number of Beneficiaries
65380 people
(Male - 30660, Female - 34720)

Maternal, Newborn and Child Health Program – (MNCH/3MDG)

Project Duration
Since 2014 to 2018

Project Areas
Mindat and Matupi (Chin State)

Number of Beneficiaries
110070
Emergency Obstetric Referrals
476
Under 5-year old Referrals
794
ORS Treatment Support
3113

Funded by
UNOPS- 3MDG

Areas of Health Education

Malaria, TB, HIV/AIDS, Leprosy, Filariasis & Dengue

PREVENTION OF COMMUNICABLE DISEASES

The MRCS provided prevention activities of communicable diseases especially for tuberculosis, malaria and HIV/AIDS. Health Education was one of the prevention activities of those diseases.

TUBERCULOSIS PROJECT (TB)

Community Based Tuberculosis Project was implemented by two funding sources: the World Health Organization (WHO) and the MRCS. Main objectives were

- (a) To get the community volunteers involved in TB control activities,
- (b) To improve case findings and case holdings, and
- (c) To increase the community awareness on TB through health education. The MRCS supported National Tuberculosis Program, and targeted at least 70% case detection and 85% treatment success rate at township level.

Community Based Tuberculosis Project –TB (WHO)

Project Duration
2013-2016

Project Areas
(19) Townships in Magway, Mandalay, Yangon and Sagaing Regions, Northern Shan State and Nay Pyi Taw Council

Community Based Tuberculosis Project- TB (MRCS)

Project Areas
(3) Villages in Patheingyi Township within the Ayeyarwaddy Region

COMMUNITY BASED TUBERCULOSIS PROJECT –TB (WHO)

The Phase II was continued from 2013 to 2016. Red Cross volunteers participated in prevention and control of TB by enhancing their capacities to care and support the TB patients through the community based approach. 19 townships within the Magway, Mandalay, Yangon, Sagaing Regions, and Northern Shan State and Nay Pyi Taw Council were covered in this project. In addition, Community Based Tuberculosis Project- TB (MRCS) was ongoing in 3 villages in Patheingyi Township within the Ayeyarwaddy Region.

COMMUNITY BASED PROGRAM FOR MALARIA PREVENTION

Community Based Program for Malaria Prevention made a contribution towards achieving the specific objectives of the Revised National Strategic Plan, which is to reduce malaria morbidity and mortality by at least 60% by 2016 (baseline: 2007 data), and contributed towards the socio-economic development and the Sustainable Development Goals (SDGs). Main activities included Case Management for Malaria, LLINs Distribution, Health Educations, Central ToT and Township RCVs Trainings on both malaria case management and prevention, Central ToT on Integrated Community Malaria Volunteers (ICMV) trainings, Advocacy and Quarterly Coordination Meetings at township level and an Annual Evaluation Meeting.

SEXUAL AND REPRODUCTIVE HEALTH (SRH) SERVICES

Sexual and Reproductive Health (SRH) services in crisis are essential as they help save lives, particularly women and girls. In 2016, SRH services in crisis focused on ensuring the provision of reproductive health services in emergencies with the Minimum Initial Service Package (MISP). The objectives were “to strengthen the health system in order to improve the availability of high quality and equitable sexual and reproductive health information and services among target groups including the emergency setting”.

Additionally, the MRCS collaborated with the Ministry of Health and Sports in integration with the Minimum Initial Service Package for RH contingency plan. The MRCS also participated in SRH technical working groups within the Health Cluster (TWG) by acting as a focal coordinator. Emergency Reproductive Health (ERH) kits with Clean Delivery Kits (CDK) were stockpiled in (6) States and Regional Red Cross Warehouses.

Community Based Program for Malaria Prevention

Project Duration
2011-2020

Project Areas
(11) Townships: Taunggyi, Hopong, Hsi Hseng, Kunhing, Mawkmay, Ywangan, Lai-Hka, Mong Kung, Nansang, Lawksawk, Pekon in the Southern Shan State

Beneficiaries
349462
(M- 139785, F- 209677)
Number of LLINs Distributed
75562
(63% of the targeted)

Funded by
UNOPS/GF

Sexual and Reproductive Health (SRH) Services Project Areas

Chin, Kachin and Shan States

Minimum Initial Service Package (MISP)

Multiplier Trainings –
3 (Hakha, Thandwe and Mruak)

Participants –
90 (RCVs, Staff MoHS, Staff DRR)

Services Provided by HORC

Beneficiaries	631
Prosthesis	484
Orthotics	484
Wheelchair	79
Crutches	1033
Rubber Feet	3169
Mobile Repair Services	1381
Repair Services	240

Project Areas

HORC - Kayin State, Mon State, Tanintharyi Region, Eastern Bago Region and Kayah State

OPP - Kachin State, Southern and Northern Shan States, Magwe and Sagaing

ORTHOPAEDIC REHABILITATION ACTIVITIES – HPA- AN ORTHOPAEDIC REHABILITATION CENTRE (HORC)

HORC, inaugurated in January 2003, is an orthopedic rehabilitation center with an objective of increasing accessibility to prosthetic treatments for service users living in remote and border areas, and strengthening the capacity of the country in providing proper prosthetic treatments that lead to the program goal of supplying orthopedic appliances for people with disability; mainly for those with lower limb amputees.

OUTREACH PROSTHETIC PROGRAM (OPP)

The Outreach Prosthetic Program (OPP) has taken the responsibility of providing referral services to the most vulnerable amputees by the Red Cross Volunteers to receive the prosthetic treatment in the National Rehabilitation Hospital (NRH) in Yangon and the Yenanthar Leprosy Hospital (YLH) in Mandalay. The MRCS was also responsible for providing transportation, accommodation, and meals etc.

Community-based Water, Sanitation and Hygiene (WASH) activities

Project Duration

2015 -2016

Project Areas

(11) Townships in Mandalay, Magwe and Sagaing Regions, and the Kachin and Kayin States

Beneficiaries

31753

Funded by

Samsung and Cartier through IFRC

COMMUNITY-BASED WATER, SANITATION AND HYGIENE (WASH) ACTIVITIES

The WASH program engaged in the prevention of water-borne, water-washed and water-related diseases by fulfilling personal hygiene promotion and water and environmental sanitation.

Hardware facilities such as tube and shallow wells, water tanks, hand washing facilities, household latrines and school latrines, disposal or refusal pits and renovation of ponds were provided according to the communities' water and sanitation needs.

Hygiene promotion and hygiene education sessions, Trainings of Trainers' (ToT) workshops to staff and the RCVs on Menstrual Hygiene Management were given as integrative activities with other health projects (CBHR and CBHFA). Community hygiene awareness sessions on Menstrual Hygiene Management and a Participatory Hy-

giene and Sanitation Transformation (PHAST) training for volunteers at township and village levels were completed in all communities and project areas.

COMMUNITY BASED HEALTH DEVELOPMENT AND EPIDEMIC PREPAREDNESS PROJECT (CBHD-EPP)

Health education, epidemic preparedness, and water sanitation and hygiene promotion activities were done by the CBHD-EPP project. Red Cross Volunteers (RCVs) and Community Volunteers (CVs) were trained as trainers in "Epidemic Control for Volunteer" module from the CBHFA in Action. Trained volunteers offered First Aid services for minor injuries and assisted in referral services for emergency cases. Monetary support for each village (MMK-1,000,000) was assisted as income generation activities.



Total participants
23251 people

Funded by
Japanese Red Cross

Technical support
ICRC & IFRC

2. FIRST AID AND SAFETY SERVICES

First Aid is a fundamental activity and an integral component of the MRCS. First Aid trainings are being conducted throughout the country as it is anticipated for the MRCS to have at least one first aider in one household.

FIRST AID TRAINING

In 2016, a total of 483 school teachers and the Red Cross Volunteers (RCVs) participated in the First Aid trainings. In order to give the best First Aid practices efficiently, 50 First Aid instructors were updated their knowledge and skills.

In 2016, the following trainings were conducted.

First Aid Instructor Trainings	8
Special First Aid Trainings	4
Community Based First Aid Instructor Trainings	4
First Aid Instructor Refresher Trainings	2

Basic First Aid Trainings were multiplied by the RCVs who were also trained First Aid instructors and a total of 8993 community members were certified. In addition, first aid policy book, first aid manual, IEC, first aid vinyl posters and first aid kits were supported. Besides, programs of Home Accident Prevention, Road Accident Prevention and Water Safety disseminated safety knowledge for 99 participants.

A review workshop on the First Aid Trainings and its modules was conducted to assess and evaluate strengths and weaknesses of the trainings, along with continuous monitoring and supervision.

Participants (Basic First Aid Training)	
Community Members	8993
Red Cross Volunteers	574
Government Staff	5169
INGOs, NGOs, Various Organizations, Factories, Hotels and Airlines	1867

FIRST AID POST AND AMBULANCE SERVICES

Ambulance Service is an important and essential activity of the Myanmar Red Cross Society. There are three main First Aid posts and ambulance services in Naypyitaw Council Region: the MRCS Headquarter, 115-mile and 285-mile on the Yangon-Mandalay highway. In 2016, these services managed to cover not only road traffic accidents but also provision of first aid services and referral of emergency cases to the hospitals.

Total Beneficiaries for Road Traffic Accidents, Child Delivery Cases, Snake Bites and Medical Emergency 2965



3. DISASTER MANAGEMENT

The mandate of the MRCS in disaster management is regulated through the Government Standing Order issued in 2009. The MRCS is a member of two national level committees in Disaster Management and Disaster Risk Reduction. As an auxiliary to the government in humanitarian services, the MRCS provides significant support in disaster response in order to ensure effective disaster preparedness and response capacity at all levels.

Disaster Management (Response Preparedness Action)

Volunteers Involved

1176
(Male- 777, Female - 399)

Direct Beneficiaries

252047
(Male-116401, Female-135646)

Indirect Beneficiaries

102250

Funded by

IFRC, ICRC, QRC, Finnish Red Cross, American Red Cross and Norwegian Red Cross, British Red Cross, Canadian Red Cross

Disaster Preposition Stock

Ready for 21500 families

Distributed Non- Food Items for families

43571

Funding

The Emergency management Fund (EMF) and the interest

RESPONSE PREPAREDNESS ACTION

In order to enhance the human resource capacity for emergency response, trainings were conducted to enhance the capacity of the Red Cross Volunteers and community volunteers, the following trainings were provided.

Type of Training	Frequency	RCVs
CBDRM Training	2	60
National Disaster Response Team (NDRT) Training	1	30
Emergency Response Team (ERT) Training	9	292
Early Warning and Early Action (EWEA) Training	2	58
Light Search and Rescue Training	1	30

The MRCS and the government committed to use the International Disaster Response Law Guidelines for strengthening their national laws and policies. The MRCS also finalized the Standard Operational Procedures for the scale of disaster (medium) based on the number of affected people (500 to 50,000 people) and the geographical scope (one or multiple states affected).

The MRCS Emergency Operation Center (EOC) was established in link and to closely work with the National Emergency Operation Centre (NEOC). The MRCS has

provided technical assistance such as disaster management, first aid & psychosocial support to the government's Disaster Management Training Center and other trainings in the states and regions. The MRCS is also a member of the Technical Committee of Disaster Management Training Center and a member of the National Search and Rescue Committee.

EMERGENCY RESPONSE

People affected by monsoon flood have been displaced from their homes in (6) Regions and (1) State. The MRCS Emergency Operations Centre had been activated at this stage and the response was being managed at the State/Regional level using existing resources. Emergency relief supplies including food, safe drinking water and oral rehydration salts (ORS) as well as assisting with evacuations, setting up temporary camps, providing first aid services and psychosocial support were provided over a three-month period.

COMMUNITY SAFETY AND RESILIENCE (CSR): URBAN/COMMUNITY BASED DISASTER RISK REDUCTION

In 2016, CSR was implemented in 13 high risk communities (10 villages and 3 wards) for major floods, cyclones and urban hazards in the Rakhine State (Manaung Township) and the Yangon Region (Hlaing Thar Yar Township). Both approaches CBDRR (Community Based Disaster Risk Reduction) and UDRR (Urban Based Disaster Risk Reduction) were focused.

In Manaung Township, capacity building trainings, school based DRR trainings and awareness-raising sessions for Participatory Hygiene and Sanitation Transformation (PHAST) were done. In addition, deforestation was prevented by training on concrete stove making, changing behavior and planting 8500 mangrove trees and 8000 shady trees.

Flood Affected Areas

Sagaing, Mandalay, Bago, Ayeyawaddy, Magway and Yangon Regions and partially in the Kachin State

People Affected

474,560

Affected Families

10,000

Hygiene Parcels Received

2,091 families

Unconditional Cash

100,000 MMK per household

DRR Awareness Sessions

Beneficiaries

405

Students from

- Mary Chapman School for the Hearing Impaired
- No (1) BEHS, Bahan Township
- No (3) BEHS, Bahan Township

Public

Dala Township & Bahan Township

Manaung Township

Beneficiaries	1200
Capacity Building Training	5 times
School Based DRR	4 Schools
Concrete Stove Making Training	732 stoves
Renovated and New Ponds	4 villages
Participatory Hygiene and Sanitation Transformation (PHAST)	9 villages

Funding agency – Norwegian Red Cross

Hlaing Thar Yar Township	
Beneficiaries of DRR Drill Exercises and Awareness Giving Sessions	4056

In Hlaing Thar Yar Township, drill exercises related to earthquakes, fire and floods were held in schools to improve the knowledge of students and teachers. Fire prevention, electric shock prevention, road accident and home accident prevention and environmental sanitation campaigns were also held.

Hinthada Township	
Beneficiaries	21956
Pond	1
Deep Well Tubes	25
4-room Latrines	3
2-room Latrine	1
Funded by	Finnish RC

URBAN DISASTER RISK AND RESILIENCE (URR)

In Hinthada Township, URR enhances to promote the capacity development of the Red Cross branches and communities for disaster response and preparedness. Trainings for the capacity development of RCVs and staffs, and the provision of CBDRR kits advance First Aid kits for schools and community mitigation activities were included.

DRR Awareness Sessions	
Beneficiaries	405
Students from	<ul style="list-style-type: none"> - Mary Chapman School for the Hearing Impaired - No (1) BEHS, Bahan Township - No (3) BEHS, Bahan Township
Public	Dala Township & Bahan Township

MYANMAR CONSORTIUM FOR CAPACITY DEVELOPMENT ON DISASTER MANAGEMENT (MCCDDM)

Myanmar Consortium for Capacity Development on Disaster Management (MCCDDM) reviewed and revised the Community Based Disaster Risk Management (CBDRM) National Curriculum which will be used to conduct duplicate (Multiplier) training courses. Public Awareness Sessions were implemented in schools, public places, trishaw gates and taxi car gates in (4) townships in Yangon.

MCCDDM awareness sessions and campaigns were conducted and reached 405 beneficiaries. Township RCV leaders, Township Medical Officers (TMOs), and Township Education Officers (TEOs) from (4) project areas, Dy Directors and project staffs from the MRCS were orientated about the project.

ENHANCING DISASTER SAFETY IN VULNERABLE COMMUNITIES AND SCHOOLS IN MYANMAR - PHASE 2

Enhancing Disaster Safety in Vulnerable Communities and Schools in Myanmar - Phase 2 implemented disaster preparedness activities in (5) wards and (2) schools in Bago and (6) schools and (2) townships in Yangon. A monitoring and evaluation workshop was held

for the capacity building of RCVs and staffs. Regional advocacy meeting and township level project orientation meeting were also held in Bago Township. Furthermore, project orientation meetings and basic First Aid trainings were conducted in schools and communities.

RESILIENCE IN MYANMAR PROJECT

This project was advocated particularly in Dedaye Township. Staff and volunteers were trained for the Integrated Community Assessment for Building Resilience (ICABR). ECs and RCVs of the Dedaye branch also organized project orientations in (5) communities and conducted basic First Aid trainings. Additionally, BOCA exercises were conducted, and VDMCs (Village Disaster Management Committees) and SDMCs (School Disaster Management Committees) were formed. Furthermore, advocacy to villages for implementing disaster preparedness and program orientation were planned and put into action. In addition, a survey for the possible ways of feedback of the villages was assessed.

SPECIAL OPERATION (RAKHINE SPECIAL PROGRAM)

The MRCS actively involved in a response operation since the start of communal violence and displacement in the Rakhine State in June 2012. Humanitarian needs in Rakhine still persist, and the context is likely to remain a protracted displacement situation for the foreseeable future. At the same time, the State Government and humanitarian communities continue to call for a transition from humanitarian aid to a more inclusive and sustainable community-led assistance that supports all affected groups. There is also space for the MRCS to meet more of the humanitarian needs of vulnerable people, and to do so in a way which is balanced between the Rakhine and Muslim communities, as well as between the displaced and non-displaced. Particular emphasis will be put on fostering greater trust and engagement between Rakhine and Muslim communities.

The MRCS has been responding to the displacement crisis in Rakhine since its onset in June 2012. The Rakh-



ine Special Program (RSP) managed by CBHFA, CBHR-Phase II, BRC, MNCH-(consortium) and MNCH-3MDG projects could coordinate well with other partners. There is a movement approach to support the MRCS in Rakhine, with contribution from different Partner National Societies (PNSs), and the IFRC providing coordination and management assistance to help the MRCS with the Rakhine operation. The ICRC also provides advice and support to the MRCS. At this stage, the partners who are supporting the MRCS engagement in Rakhine are the ICRC, the Qatar RC, and the IFRC (with British RC and Finnish RC funding).

1. LIVELIHOOD PROGRAM

Based on the Program Rapid Assessment, (8) villages were selected in Sittwe Township to implement the livelihood program. Local Village Committees were formed to identify pre-beneficiary's households from the selected villages. A total of 1202 pre-beneficiary households developed a business plan up to the maximum amount of 175,000 MMK for their livelihood. Household Economic Assessment was conducted to those pre-beneficiary households and finally 670 households were identified and supported as final beneficiaries. In addition, 18 water sources or clean water were provided. About 13 awareness sessions regarding clean water and water borne diseases were conducted.

2. PRIMARY HEALTH CARE & MOBILE CLINIC

Six Community Health Centers (two for Rakhine and four for Muslim people) were established to improve health infrastructure. Three mobile clinic teams gave medical care for 26,129 patients in which 52 patients were referred to higher medical facilities. Basic first aid trainings were conducted to promote first aid knowledge, skills and the entry point of program. 17 tons of medicines have been donated to the Rakhine State Health Department supported by the Kuwait Red Crescent Society.

KACHIN SPECIAL PROGRAM

The Myanmar Red Cross Society (MRCS) has been actively involved in a response and recovery operation in the Kachin State to help the internally displaced people with the financial support of multiple movement partners including the ICRC and the IFRC with their technical and management support. In accordance with the joint approach, the MRCS, the ICRC and the IFRC developed integrated livelihoods (or economic security) programming in Kachin and as a result, 574 IDP households received conditional cash grants to start livelihood activities. Moreover, Danish Red Cross funding was supported to (4) townships (Myintkyina, Bhamaw, Monyin and Momauk) for Livelihood Support Branch Capacity Building for 200 IDPs in the community preparedness and response project. 15 dissemination sessions at township level and 1 dissemination session at district level on humanitarian values and RC/RC principles were conducted for township and district administrators, representatives of cultural and religious groups, and community stakeholders. Activities in 2016 include Branch Organizational Capacity Assessments (BOCA) in 4 target branches, development of branch preparedness and response plans, 2 ERT trainings and procurement of NFIs.

Kachin Special Program

Basic First Aid Multiplier Training

1830 Participants (IDP)
12 participants
(Government Control Area)

Basic First Aid Trainings

15

Funded By

ICRC, IFRC



Strategic Goal 2

Promote understanding and respect for the red cross principles, humanitarian values, international humanitarian law, and develop a culture of non-violence and peace.

Humanitarian values and diplomacy initiatives promote the principles of the International Red Cross and Red Crescent Movement and International Humanitarian Law (IHL) among volunteers, staff and the governance for promoting respect and adherence to the principles and working to uphold the positive perception of the Myanmar Red Cross Society among communities.

ADVOCACY AND DISSEMINATION ABOUT RED CROSS

The Red Cross and Red Crescent movements, International Humanitarian Law, the principles and fundamentals of the Red Cross were disseminated through workshops and advocacy talks. Dissemination workshops were targeted not only at the internal staff and the RCVs from every level but also at the local authorities and the decision makers of public and private organizations. Yangon and Mandalay Region Government and Parliamentarians such as Yangon Region, Mandalay Region, Kachin State and Rakhine State were advocated on the Red Cross movement, IHL, law and principles. Red Cross humanitarian activities were also disseminated at the Union Civil Service Board Training Centre and the Military Nursing University, etc. A total of 6,700 people participated in dissemination workshops and advocacy sessions. A total of 52 townships had extended awareness on the Red Cross Movement, IHL, the principles and fundamentals to over 10,000 people at the community level.

1. HUMANITARIAN VALUES AND COMMUNICATION ACTIVITIES

The MRCS maintains proactive communications with local and international media. MRCS news relating public health information, disaster information and MRCS related activities were broadcasted in news journals, radio, television channels and online social medias such as Facebook, Twitter and YouTube websites.

Important information such as disaster alertness, warning, weather announcement, emergency first aid care, education on safety response to earthquakes, flood and fire were publicized as follows:

Local TV and Radio Channels - MRCS News	600 times
MRCS Newsletter	2 times
Local Newspapers and Journals	953 times
Local TV – MRCS Health and Information	10 times/ month

A speedy and effective communication channel reaching staff, volunteers and the general public is the social media. There were 56,287 official Facebook followers and 3,130 official Twitter followers of the MRCS.

TRAINING AND SUPPORT ON COMMUNICATION

In addition to the above-mentioned activities, the MRCS ensured to strengthen communication and IT capacity at all levels to ensure effective communication, information and reporting in both emergency and normal times. Communication training and basic ICT training were given to the RCVs in different branches. Ten Red Cross branches were set up with the ADSL internet together with the supply of ICT facilities.

As the MRCS ensures and maintains secure and safe humanitarian access for the staff and volunteers, (6) Operational Safer Access workshops with a total number of 336 participants were conducted in emergency operation areas such as Shan (North) and Rakhine States. Furthermore, Safer Access Framework working group meeting was regularly done once a month.

Communication Training

RC branches – 88
Participated RCVs– 697
Support – 88 Digital Cameras

ADSL Internet

Myitkyina, Hpa-An, Mawlamyine, Sittwe, Kyaing Tone, Lashio, Taunggyi, Bago, Yangon, Patheingyi, Mandalay

ICT Facilities Supported

Desktop 1 Set,
Micro Lab Speaker,
Projector with a Tripod,
Canon 3-in-1 Printer

Restoring Family Links Services

RCVs involved
25

RCMs received (Total 85)
Safe & Well Message - 31
Anxious for News - 19
Cross Border RCMs - 257

2. RESTORING FAMILY LINKS SERVICES

Effective and efficient Restoring Family Links (RFL) services including appropriate psychological support are provided to people who are affected by disasters, conflicts, other situations of violence and consequences of migration or trafficking. Nationwide RFL network is accessible to all communities. RFL network was extended to 192 national societies, and through its network, 257 cross border Red Cross Messages (RCMs) were received and solved. Red Cross Messages were progressively received in 2016 as mobile phone utilization in Myanmar has increased.

In terms of the regionalization of RFL services, 25 Red Cross Volunteers (RCVs) were assigned as RFL ambassadors in their respective areas. Two basic RFL trainings and one TOT training were done with 26 RCVs and as a result, trained volunteers helped with the distribution of RCMs and the provision of emergency services in case of an accident or a disaster. Moreover, RFL ambassadors were able to provide trainings and support awareness-raising activities at the community level.

Children Associated with Armed Conflicts
61

Mine Victims
10 (Shan State)

Child Protection Awareness
177,008 participants

Funded by
UNICEF/ Australian Red Cross

3. CHILD PROTECTION AND MINE RISK EDUCATION SERVICES

Protection and rehabilitation of children from violence, abuse, neglect, exploitation, armed conflicts, trafficking and sexual abuse were performed under the Children Associated with Armed Conflicts Project (CAAC) and the Child Protection Project (CPP). Staff capacity building trainings, mine risk education and victim assistance trainings, child friendly space trainings and multiplier trainings for the field staff and the RCVs were conducted in 2016.

A majority of landmine victims were villagers who were working and travelling for the sake of their livelihood. Mine risk educations were conducted and trained participants facilitated multiplier courses across the branches.

On-going insecurity situation poses potential protection risks in communities to implement the communi-

ty-based projects in the Kayin and Mon States in terms of safer access and travelling to villages which was compulsory for staff.

Five Mine Risk Education trainings were conducted in the Bago Region, Shan (East) State, Rakhine State, Shan (South) State and the Thanintharyee Region. After the training, those trained participants would have to continue facilitating this subject in multiplier trainings across all branches. Village committee members including community volunteers also had to cooperate within the project activities and collect information regarding spontaneous returnees.

According to monthly project situation reports, communities in the project areas were really satisfied as they had benefitted from community based interventions. The most important aspect was building trust among communities and building their capacity for self-management. During monthly monitoring visits, the staff and the field staff also met returnee households to find out their problems and requirements and encouraged them through livelihood support.

MINE RISK EDUCATION PROGRAM

The ICRC and the MRCS started cooperating in Mine Risk Education (MRE) activities since 2015. The MRCS/DM also implements Mine Risk Education activities in Myanmar by focusing on two main activities in which one of them is the Mine Risk Education trainings for the Red Cross volunteers, basic education school teachers, health staff and the Mine Risk Education awareness sessions for community areas. MRE teams within the MRCS organized presentations and shared safety messages in the Kachin, Shan and Kayin States, and the Tanintharyi Region in areas affected by landmines/ERW problems. MRE trainings were conducted not only for township Red Cross volunteers but also for school teachers and health staff. The MRE team organized 9 basic MRE trainings for 250 MRCS volunteers from the Kachin, Shan, Kayin, Eastern Bago and Tanintharyi States. The team also

Beneficiaries
20228
9596 males and 10632 females

Volunteers Involved In This Program
128
48 males and 80 females

Technical support
ICRC

Mine Risk Education Program

Project Areas

Kachin, Shan, Kayin States & Tanintharyi Region

Number of Trainings and Participants

9 basic MRE trainings for 250 MRCS volunteers

Funding Agency

ICRC

organized an advanced MRE training for trained Red Cross Volunteers from Kachin. Trained RCVs from Shan (North) organized awareness sessions for communities especially for the IDPs and villagers from the battle areas and the military areas where fighting has taken place.

4. SOUTH EAST PROJECT

The Myanmar Red Cross Society has been UNHCR's implementing partner for a decade contributing to deliver its mandate for the protection of IDPs, refugees and returnees in South East Region Myanmar through the community-Based approach and long-term collaboration. The total direct beneficiaries of these activities carried out by the MRCS for the year 2016 January-December is 20,228 people (104.33%) including both men and women although the target was 19,388 people in total.

In addition, Village Project Supervisory Committees had been formed and completely established in targeted 64 villages with 454 members (259 males and 195 females). Life Skill Trainings (ToT) including 1035 participants (353 males and 682 females), Peer Education Trainings with 10273 participants (4680 males and 5593 females), Volunteer Leaders Refresher Trainings involving 128 participants (48 males and 80 females) were given during the reporting period. Community members were quite interested to learn new topics for life skill, and the report showed female participants more than male participants. The achievement exceeded the intended target, which shows the positive impact regarding community mobilization. A total number of 179 participants (94 males and 85 females) received the livelihood assistance. The assistance that was provided to landmine victims feeds into (4) cases in which the initial target was about (10) cases. As for the monitoring return report, the number had significantly increased during the reporting period.

In brief, activities have been achieved according to the plan of action and the direct beneficiaries can be seen when is stated in the following table.

Sr.	Activities	Planned Target	Achievement	Remark
1	Village Supervisory Committee	64 Committees	64 Committees	100%
		448 People	454 People	101.3%
2	Training Provided (Life Skill Training)	64 Sessions	64 Sessions	100%
		960 People	1035 People	107.8%
3	Peer Education	9600 People	10273 People	107.0%
4	Land Mine Victims Assistance Provided (Medical Cost)	10 People	4 People	40%
5	Returnee Data Collection	8208 People	8155 People	99.35%
6	Livelihood Assistance Provision to Returnee And Host Community	40 Households	36 Households	90%
		200 People	179 People	89.50%
7	Volunteer Leaders Refresher Training	128 People	128 People	100%
8	Village Supervisory Committee Review Workshop	66 People	66 People	100%

5. COMMUNITY ENGAGEMENT & ACCOUNTABILITY

During the reporting period, Community Engagement and Accountability (CEA) sessions were conducted not only for the project and program staff but also to the Red Cross Volunteers. In 2016, a total number of 202 participants were aware of what CEA was and understood the CEA component. In the Flood Recovery Operation, the CEA checklist and the feedback system were used to measure the satisfaction level of beneficiaries. The CEA Minimum Standards Development Workshop was conducted in March 2016 and 28 senior management staff actively participated. As a result of that workshop, the department drafted a CEA Minimum Standard booklet of which is expected to get printed and distributed in 2017. The CEA Officer also visited Nepal and North Korea to share how the MRCS is implementing and integrating the CEA minimum standards in existing projects and programs.

CEA (Community Engagement and Accountability)

Beneficiaries
6948
(2406 males and 4542 females)

Volunteers Involved In This Program
52
(38 males and 14 females)

Technical support
IFRC/ BRC

Strategic Goal 3

Function effectively as a national society, well-resourced and with robust capacity at all levels.

1. ORGANIZATIONAL DEVELOPMENT ACTIVITIES

All levels of the MRCS were strengthened through following six areas:

1. Legal Base Development And General Assembly
2. Branch Development And Community Resilience Program
3. Branch Development And Branch Support Activities
4. Volunteer Development
5. Youth Development and
6. PMER Development

Outcomes of Legal Development Funded by the MRCS

- 12th General Assembly was successfully conducted and new leadership had taken handing over the governance responsibility in August 2016.
- 50% of branches have been restructured and reorganized at all levels to deliver quality community-based services to the vulnerable people in the country.
- NS promoted and strengthened the understanding and respect for the Red Cross principles, and human dignity and its auxiliary role to the government through humanitarian diplomacy approach.

(1) Legal Base Development and General Assembly

A new MRCS law was approved in 2015 in which the MRCS conducted a series of new law dissemination to all branches, Partner National Societies (PNSs), movement partners, UN organizations, INGOs, media groups and the public.

12th General Assembly was conducted in August 2016 and a new government board was elected in line with the new law. Newly elected EC members had developed the development of statutes and the MRCS Strategic Plan 2016- 2020, and gave guidelines to implement the strategies.

(2) Branch Development and Community Resilience (funded by the AmRC)

Branch Development and Community Resilience program was implemented in five townships in the Tanintharyi Region and three townships in the Kayah State with the aim to strengthen the capacity

of branches including strengthening volunteers, increasing the skills of volunteers and enhancing the resource mobilization capacity of the branches.

The community need assessment was done by the local community, local RCVs and youth with the facilitation of Red Cross Executive Committee members. Core services were then identified and planned to get them actually implemented in their local community. Plan of actions was also developed by advocated community leaders, project staffs and the ECs of the local Red Cross supervisory committees. In addition, youth committee actively participated in organizing community resilience, supporting elderly and people with disabilities in their own community. Furthermore, Basic First Aid (BFA) and Volunteer Management System were revised. Community support activities and work for community and home care visit for the elderly were also implemented.

In addition, Branch Organization Capacity Assessment (BOCA) was conducted in 10 branches within the Tanintharyi Region. Moreover, a series of Red Cross dissemination sessions were conducted in the Kayah state and about 150 Community members participated.

(3) Branch Development and branch support Activities (funded by ICRC)

BOCA exercises were conducted in 25 townships in the Kachin, Rakhine and Shan States. A total number of 376 EC members and volunteers actively participated.

Red Cross volunteers from the Shan State and the Kachin State were deployed to Sittwe for collaborating in the Rakhine Special Program and supporting the mobile health team. Two Red Cross branches (Kyaukme and Myaybon) were assisted with 2,500,000 MMK per township to initiate income generation activities. In addition, eight Red Cross branches received IT equipment and office furniture for office management usage.

Branch Development and Branch Support Activities

Project Duration
2016

Project Areas
25 townships located in the Kachin, Rakhine and Shan States

Beneficiaries
376 Executive Committee Members and 687 Volunteers

Funded by
ICRC

Branch Development and Community Resilience Program

Project Duration
Jan 2016 - June 2016 (Tanintharye)
July 2016 - Dec 2016 (Kayah)

Project Areas

- Dawei, Thayetchaung, Long Lone, Tanintharyi and Bokepyi Townships in the Tanintharye Region
- Hpruso , Bawlakhe and Mese Townships in the Kayah Region

Beneficiaries
1369 staff and volunteers

Funded by
The AmRC

Palaung, Pa-Oh, Danu and Narga regions were advocated in organizing the Red Cross branches in self-administrative areas. Red Cross dissemination sessions were also done for more coordination and cooperation.

Volunteer Development Activities

Project Duration
2016

Project Areas
330 Townships

Beneficiaries
7358 staff and volunteer

Funded by
IFRC, SwRC

(4) Volunteer Development Program (funded by IFRC)

Volunteer management, desk review and the volunteer data analysis of the Nepal Red Cross were observed and learned by two Volunteer Development focal people. Knowledge sharing sessions were conducted and learned lessons were also contributed to the training modules and workshops related to volunteer management.

MRCS management review workshop was conducted with a total number of 30 volunteer leaders to identify main difficulties and to solve the existing problems at the branch level. Volunteer Management, organization, branch-based challenges, coordination in terms of the brigade volunteer system and youth development and dissemination issues were identified.

BOCA exercises were integrated with awareness sessions on volunteer management and they were facilitated in the Mon state as well as Naypyitaw, Magway and Ayeyarwaddy Regions. Workshops on volunteer need assessment were conducted in the Shan State, Kachin and Tanintharyi Regions. These assessment results were utilized to support volunteer management and volunteering in emergency. Joint - BOCA analysis workshop was also facilitated in cooperation with the Bangladesh RC.

A workshop on Organization Capacity Assessment of Certification (OCAC) and Internal Assessment of the MRCS was done in the Kalaw Township. In the workshop, volunteer development, its policy and the Branch Development Model were reviewed and revised for the purpose of updates.

Volunteer coordination meetings were conducted to identify the needs of volunteers and introduce the volunteer management cycle in the Mon state, Mandalay, Bago and Naypyitaw. In addition, Lahe Township in Narga Autonomy Zone was advocated and was disseminated with new branch structure and volunteer management system. Volunteer recruitment campaigns were also conducted in the branches and capacity building trainings (Recruiter Trainings) were held in four target branches within the Kachin state. A total of 6700 volunteers have been issued with insurance protection due to their involvement in the MRCS activities in the field.

(5) Youth Development

Volunteer development coordinator and two Red Cross youth members participated in South-east Asia Youth Network (SEANYN) meeting and the curriculum development for “Youth in School Safety Training” in Malaysia. Ten Red Cross youth members participated in the international youth exchange programs, and shared their knowledge and did peer-to-peer learning between and among the National Societies.

Red Cross youth networks were also created in Yangon and Mandalay Regions as well as in the Naypyitaw council area. During the reporting period, these provided opportunities to activate and strengthen youth committees at the branch level.

Regarding the international exchange programs, they were implemented to better understand about the International RC/RC movements. Danish Red Cross youth exchange team visited the branch in Sagaing and participated in the local branch activities working together with local Red Cross youth members and volunteers. Youth representatives: Mg Nyan Lin Aung and Ma Pan Myat Mon participated in the International Youth Exchange program in Tokyo, Japan. Moreover, a Youth Leadership Training was organized in Myeik University and there were

Outcomes of the Youth Development Project

Project Duration
Jan 2016-Dec 2016

- 171 youth committees have been established at the branch level with 1137 youth members.
- Among 133 University RC teams, 44% are active.
- 58 Universities are running their own activities by themselves without any HQ support

Funded by
The MRCS

PMER Development Activities**Project Duration**

2016

Beneficiaries

132 Staff and Volunteers

Funded by

MRCS, IFRC, SwRC, AmRC

about 30 Red Cross youth members who attended the training.

(6) Planning, Monitoring, Evaluation and Reporting (PMER)

Planning, Monitoring, Evaluation and Reporting (PMER) activities of the MRCS have been supported by the Swedish Red Cross (SwRC), IFRC Country Office and IFRC Asia Pacific Regional Office (APRO) PMER since 2014. PMER aims to establish a strong PMER culture and practice within the MRCS in order to ensure a higher degree of accountability, efficiency and effectiveness for the implementation of programs and projects throughout the MRCS.

The MRCS reformed the PMER unit and a full-time Executive Committee member of the MRCS has been appointed as the focal person to manage PMER initiatives and ensure the participation of all departments for an active process including identifying gaps and needs for improvement of the process which are in place. The Deputy Secretary General for support services is the direct line manager for the unit who works closely and regularly discusses progress and challenges within the process of implementation with the leadership of the MRCS. In 2016, the unit was consisted of a PMER coordinator, an M&E officer, a report analysis officer and an information management officer who worked in close collaboration with different departments of the MRCS. However, the M & E officer and the report analysis officer left in the third quarter of the year and the MRCS could not recruit a replacement.

PMER development in the MRCS was initially assessed by using the IFRC PMER Capacity Self-Assessment tool that defined the strengths and weaknesses of the MRCS. The Swedish Red Cross PMER focal point technically supported running the process.

Organizational meetings, preparation of monthly reporting templates of the branches, collection of data and collaboration with other organization such as the United Nations Office for the Coordination of Human Affairs (UNOCHA) were carried out. Movement-wide PMER technical working group (PMER TWG), which is in charge of developing an overall PMER guideline, was formed to ensure compliance and to make relevant changes. The PMER guideline was finalized in November.

2. RESOURCE MOBILIZATION ACTIVITIES

The MRCS's mandates and duties within the government's policy and legal framework include generating additional incomes for the operations within the MRCS, and providing guidelines and instructions for the branches within the Society's system on various methods and types of fundraising for humanitarian activities organized by different levels of the Society.

As of positive aspects, the MRCS received the unrestricted income of 392 million MMK through donation boxes, room rentals, printing press, staff regular donation and individual donations. About 360 million MMK were received in 2016 as restricted funds for water and sanitation initiatives, recovery and rehabilitation efforts and relief supplies.

Additionally, the MRCS pays close attention to resource mobilization development and identifies this as one of the priorities in the strategic plan within 2016-2020, and the participation of the MRCS in the Asia-Pacific Fundraisers Network to revise the activities of resource mobilization.

3. HUMAN RESOURCE MANAGEMENT ACTIVITIES

The main objective of the human resource management activities is to strengthen the existing human resources management capacity through staff capacity building and development initiatives in line with the MRCS

Human Resource Management Activities

Supported by the MRCS, Danish Red Cross, Australian Red Cross

Strategic Plan 2016 -2020 and the Organization Capacity Assessment (OCAC). During the reporting period, the National Society contributed to the Admin-Human Resources Meeting of NGOs every two months, and regularly coordinates with the Myanmar Society Human Resources Network for human resources information, practice and updated national laws.

Code of conduct awareness sessions, awareness sections for staff and volunteers regarding child protection policy, emergency response team (ERT) and national disaster response team (NDRT) trainings, first aid trainings and safer access trainings were enhanced with other departments. The HR department also extends its coordination with the Humanitarian Values and Communication department to put one session for code of conduct awareness in safer access trainings. Insurances for the deployed staff in Rakhine were also covered.

The following policy, guidelines and procedures were approved by the ECs from the MRCS.

- Human Resources Record Retention Guidelines (Bi-Lingual)
- Revised HR Standard Operating Procedures including HR in Emergencies (Bi-Lingual)
- Grievance Procedure in Myanmar and English Versions
- Staff Recruitment and Selection Policy
- Safety and Security Guidelines
- Emergency Deployment Procedure and Surge Capacity Recruitment Procedure
- Training and Development Policy

A total of 91 staff and volunteers have been sent to attend international trainings, workshops, conferences and meetings which were organized by Partner Organizations and National Societies accordingly.

4. PARTNERSHIP FRAMEWORK

The MRCS Partnership Framework was developed in December 2015 to create an effective cooperation, coordination and partnership mechanism. After the declaration of the partnership framework, eight partners: American Red Cross, Australian Red Cross, Canadian Red Cross, Danish Red Cross, IFRC, ICRC, Singapore Red Cross and Swedish Red Cross signed for the Partnership Framework Meeting on the 5th and the 6th of May in 2016. Partnership Review Talk with the Australian Red Cross (ARC) was conducted in 2016 to overview the impact of projects, strengths and weaknesses on the partnership of societies. The MRCS and the ARC have also extended their Cooperation Agreement until 2020.

By the end of 2016, the MRCS has signed on the bilateral agreement with American Red Cross, Australian Red Cross, Canadian Red Cross, Red Cross Society of China, Danish Red Cross, IFRC, Singapore Red Cross, Swedish Red Cross, Qatar Red Crescent, Turkish Red Crescent, UNICEF, UNFPA, UNOPS, UNHCR, Save the Children, Panasonic, Bright Foundation, Medical Care Development, Mottama Gas Transportation Co.Ltd., Lotte Foundation, Ooredoo and Shell Myanmar. Austrian Red Cross, British Red Cross, Hong Kong Red Cross, Japanese Red Cross, Korea Red Cross (Samsung Co.), Norwegian Red Cross and Cartier Foundation have worked with the MRCS through IFRC. In summary, the MRCS has driven 39 projects with its partners in 2016.

International Trainings, Workshops, Conferences and Meetings

Participants
91 staff and volunteers

