

The
FIFTH DEVELOPMENT
plan
2008-2010



Nepal Red Cross Society

National Headquarters
Kathmandu
February, 2008

Message from the Chairman

NRCS has endorsed the Fifth Development Plan (2008-2010) as a continuous strategic effort to reduce or alleviate human suffering. In compliance with the RC fundamental principles and statutes of NRCS, the plan presents our due commitment and thereby shares responsibility of reducing vulnerability. Through the development plan efforts, continued from the early eighties, following the Manila International Conference (1983), NRCS asserts its solidarity in the responsibility of Red Cross Movement to respond to the global human suffering caused by natural, human or technological disaster.

We hope, the Fifth Development Plan will serve the institutional purpose of NRCS units at the central and local level. It will be instrumental for them in developing operational plan, programme and projects around disaster management, health, promoting humanitarian values and capacity building among others. Besides, the donors and partner in and outside the Red Cross Movement will find better space for cooperation with NRCS.

As in other activities, NRCS has applied participatory approach for formulating the Plan. Following an understanding of a common approach reached at the Central Executive Committee Meeting, Central Planning Committee, headed by the NRCS Chairman, supervised a task force comprising of an external facilitator as an expert that carried out several consultative meetings at different levels.

Equally important to mention was the involvement of the International Federation, International Committee of the Red Cross and Participating National Societies present in Nepal.

Overall, the Plan has been made compatible with the Federation of Future, its regional strategies, Global Agenda goals and the Interim Plan of Nepal Government and linkages built with the Millennium Development Goals coupled with other humanitarian principles.

I acknowledge the contribution made by our movement components being practically involved in the planning process. We sincerely thank to Danish RC and Belgian RC for their financial and consultative support in facilitating the total planning process. My special thanks are due to all the members of the Central Planning Committee who guided the planning process and made substantial contribution in formulating strategic directions and in developing program components of the total plan.

I sincerely appreciate all hard works and contributions of all Directors, Program Managers as well as other staff members in making this plan a practical tool for development. Mr. Umesh Dhakal, Executive Director and Mr. Indra Adhikari, Director, Communication & HV Department, deserve special thanks for their consistent hard work, coordination and communication with relevant team members as well as the facilitator during entire episodes of consultation and development of the document.

Finally, I acknowledge appreciable and painstaking facilitation and all the contributions of Dr. Parthibeshwar Timilsina and his associate Mr. Dipendra Pant in bringing about this plan to this current form.

Sanjeev Thapa
Chairman, NRCS

The Plan and the Perspectives of Nepal Red Cross

Within its life span of more than four and half decades, Nepal Red Cross Society (NRCS) has passed through series of landmarks and challenges in its efforts to expand and grow into present structure and has become the largest humanitarian organization of Nepal. Through its network covering all 75 districts and more than 1300 sub-chapters below district level, Nepal Red cross Society has been tackling with multifarious humanitarian needs and challenges including various forms of disaster, epidemics, socio-political conflicts, poverty, health problems and various forms of sufferings and NRCS issues related to social exclusion with the development of series of strategic Development Plans, NRCS has played vital roles in streamlining, expanding and strengthening its organization and its service activities throughout these years. NRCS has left no stones unturned in implementing its programs and activities guided by its Plans and strategies to reduce vulnerability of individuals and communities through service delivery and promotion of humanitarian values. Furthermore, NRCS is deeply involved in Community Development and resilience so that they may cope with all sorts of disasters and human sufferings locally.

The Development Plan 2008-2010 of NRCS is the Fifth Development Plan which has been designed to prove itself as a road map for the next three years. Based on five core areas and further focused on identifiable priority action themes aimed at the development of targeted communities, this Plan will effectively guide all levels and units of NRCS in the implementation of all activities so as to ensure fulfillment of NRCS missions as well as continuity of planned development culture.

The Plan is the outcome of series of review meetings, inter-actions and workshops organized at various levels for knowledge sharing, learning lesson from mutual experiences and to make the process participatory and democratic. Sense of ownership by organizational layers, the management and governance of NRCS was assured through series of exercises conducted throughout the year and more intensively from November, 2007 to February, 2008. The workshops and interactions among the key management staff of NRCS headquarters, representatives of Federation and ICRC, the track shaping interactions with the Central Executive Committee Members together with Department Directors and Program Managers have greatly shaped strategies and approaches of the Fifth Development Plan. The detailed review of the final draft of the Plan document in a week long residential workshop and follow-up assignments and group works have helped in consolidating and assuring more integrated approach in the Plan formulation.

NRCS, being one of the components of the International Red Cross and Red Crescent Movement, due attention has been accorded to make this Plan consistent with the strategies of the International Red Cross and Red Crescent movement. Accordingly, NRCS has emphasized on humanitarian values as focused on the people, integrity, diversity, leadership, innovation and social integration. In order to address these values, the strategic direction of the NRCS Plan has pinpointed its action Plans towards the effective delivery of services with the following considerations:

- a) Integration and standardization of Programmes
- b) Focus on quality of services
- c) Building capacity of stakeholders in order to be focused and responsive

The adoption of Red Cross principles in providing services, the spirit of volunteerism and sacrifices of Nepal Red Cross personnel of all levels and their impartial role has enhanced the image of NRCS. Nepal Red Cross Society has accordingly demonstrated its image as an impartial organization that had resulted into accessibility and acceptability of NRCS volunteers by all parties involved in the conflict in the past. NRCS, services during the times of conflict had been appreciated very much at all quarters. It also helped in mobilizing a large number of volunteers as well as considerable amount of resources for its programs internally and externally. As the strategic directions of the Society and its clear cut vision and strategy are the strong factors for all those success stories, the continuity and improvement in those areas have been further assured and concretized in the Fifth Plan as well.

NRCS has continued to adopt multi-dimensional approaches in the formulation and implementation of its programs in the current Plan as well. The programs are diversified partly because of the terrain and geographical diversities of Nepal, its mosaic of the society which is very diverse partly because of diversity in approaches and needs of partners and stakeholders. On top of multi model community based development programs, Nepal Red Cross is the lead Organization in the following broad-based nationwide activities and programs: disaster management, blood services and ambulance service, the first aid, promotion of IHL and humanitarian values, community Resilience, Eye Care service, water and sanitation programs, HIV and AIDS projects, and other Health promotions and care projects.

It is worth mentioning at this point that the regular supports and participations of our partner National Societies have contributed a lot in managing resources, in updating and upgrading knowledge, management and other skills. Partnership development and emergency preparedness as well as the coordination within the movement or beyond the movement have enhanced our potentials through the approaches like Operational Alliance, global alliance for HIV, fast tracking in emergency time, cooperation among humanitarian actors and Federation of the Future concepts and so on.

Nepal Red Cross is also aware of the new emerging challenges emanating from new changing contexts. To cope with this situation, Nepal Red Cross Society has many existing and emerging challenges to face and to cope with high expectation of the people. More sensitive and proactive programmes and more careful strategies for maintaining its image as an independent, impartial and neutral organization are a must so that the Society will be able to reach every nook and corner of the country and serve all those who need without any flaws and discrimination of any kind.

New areas of human sufferings, such as, HIV, fighting against stigma and discrimination, integration and rehabilitation programmes, climate change and new emerging and reemerging diseases like malaria, measles, population movement and migration, and violence in the urban areas are considered as the serious problems even today. This Plan has attempted to incorporate potential programmes and strategies to cope with those issues in coordination with appropriate sectors of the Society. In view of the bigger challenges to be tackled and increased number of activities to be handled, the Plan has envisaged new management mechanism and strategies by proposing a strong management support mechanism, human resource management system along with volunteer management, resource mobilization and diversification and improved communication system.

All those who have contributed in bringing out this Plan in the present shape, and whose name is legion, deserve sincere thanks and gratitude.

Kathmandu
February, 2008

Dev Ratna Dhakhwa
Secretary General
Nepal Red Cross Society

LIST OF ABBREVIATIONS

AIDS	Acquired Immuno Deficiency Syndrome
ANC	Ante -Natal Care
ARI	Acute Respiratory Infection
BCC	Behaviour Change Communication
BPI	Better Programming Initiatives
BTC	Blood Transfusion Centres
BTS	Blood Transfusion Service
CAS	Cooperation Agreement Strategy
CBDP	Community Based Disaster Preparedness
CBFA	Community Based First Aid
CBTS	Central Blood Transfusion Service
CCRR	Climate Change Risk Reduction
CDP	Community Development Programme
CEC	Central Executive Committee
CEHP	Community Eye Care and Health Promotion Programme
CHL	Community Health Leader
CHW	Community Health Worker
CPR	Contraceptive Prevalence Rate
CWV	Community Women Volunteer
DC	District Chapter
DDC	District Development Committee
DDRT	District Disaster Response Team
DM	Disaster Management
DMIS	Disaster Management Information System
DP	Disaster Preparedness
DPP	Disaster Preparedness Programme
DRR	Disaster Risk Reduction

DWQIP	Drinking Water Quality Improvement Programme
DWSP	Drinking Water and Sanitation Programme
EFA	Emergency First Aid
EOC	Emergency Obstetric Care
ERFPEP	Eastern Region Family Planning Extension Project
FA	First Aid
FATS	First Aid Training Standardization
FPHV	Fundamental Principles and Humanitarian Values
GDP	Gross Domestic Product
GIS	Geographical Information System
GPS	Geographical Positioning System
HRD	Human Resource Development
HRDI	Human Resource Development Institute
HW	Health Worker
ICRC	International Committee of the Red Cross
ID	Institutional Development
IDP	Internally Displaced People
IEC	Information, Education and Communication
IFRC	International Federation of Red Cross and Red Crescent Societies
IHL	International Humanitarian Law
IMR	Infant Mortality Rate
JRC	Junior Red Cross
MDGs	Millennium Development Goals
MIS	Management Information System
NDRT	National Disaster Response Team
NFRI	Non-Food Relief Items
NGO	Non Governmental Organization
NRCS	Nepal Red Cross Society
OD	Organizational Development
OPD	Out Patient Department
ORT	Oral Rehydration Therapy
PBL/CHIP	Prevention of Blindness /Community Health Intervention Project
PHC	Primary Health Care
PLHIV	People Living with HIV/AIDS
PMER	Planning, Monitoring, Evaluation and Reporting
PNC	Post natal care

PNS	Participating National Society
PPP	Project Planning Process
RC	Red Cross
RCAT	Red Cross Action Team
RCC	Regional Coordination Committee
RCM	Red Cross Message
RCRC	Red Cross and Red Crescent
RCY	Red Cross Youth
RDCD	Remote/Developing District Chapter Development
RFL	Restoring Family Link
SC	Sub Chapter
SOP	Standard Operatng Procedure
STD	Sexually Transmitted Diseases
TBA	Traditional Birth Attendant
TH	Traditional Healers
ToT	Training of Tainers
UXO	Unexploded Objects
VCA	Vulnerability and Capacity Assessment
VCCT	Voluntary Confidential Counseling and Testing
VCT	Voluntary Counselling and Testing
VDC	Village Development Committee
VHF	Very High Frequency
VM	Volunteer management
VNRBD	Voluntary non-remunerated blood donation
WAT-SAN	Water and Sanitation Programme
WD	Women Development
WFP	World Food Programme
WHO	World Health Organization

TABLE OF CONTENT

CHAPTER 1:

COUNTRY CONTEXT OF NEPAL	1
1.1. Background	1
1.2. Human Sufferings in Nepal	2
1.2.1. Natural Disasters	3
1.2.2 Health and Sanitation	4
1.2.3 Political Turmoil, Conflicts and Socio-economic Indicators	5
1.2.4 Poverty and Exclusion	6
1.2.5 Urbanization and Road Accidents	6
1.2.6 Challenges to Humanitarians Works,	7
1.3. The Government's Response to the Situation	7

CHAPTER 2:

NEPAL RED CROSS SOCIETY AND ITS HUMANITARIAN EFFORTS IN NEPAL.....	9
2.1 Background	9
2.2 Vision, Mission, Objectives and Values	9
2.3 An Overview of Program Development	10
2.4 Review of NRCS in General Context	13
2.5 The Organizational Context	14

CHAPTER 3:

PLANNED DEVELOPMENT EFFORTS IN NEPAL RED CROSS SOCIETY.....	16
3.1 Genesis of Planned Development: Overview of Previous Planned Development Efforts (1984-2003)	16
3.2. Review of the Fourth Development Plan (2003-2007)	18
3.2.1 General Objectives and Achievements	18
3.2.2 Lessons Learnt from the Fourth Development Plan :(2003-2007)	21

CHAPTER 4:**FRAMEWORK ADOPTED FOR THE FORMULATION OF THE FIFTH DEVELOPMENT PLAN OF NRCS 2008-2010 23**

4.1.	Approach to Development Plan 2008-2010 of NRCS	23
4.1.1.	Need for Development Plan Framework in NRCS	23
4.1.2	Overall Strategic Goal	24
4.1.3	General Objectives	24
4.1.4	Key Concerns and Priorities	24
4.1.5	Policies and Guiding Principles	25
4.1.6.	Implementation Strategies	26
4.2.	Components of Development Plan Framework	27
4.3	Context of the Development Plan 2008-10.....	29

CHAPTER 5:**CORE AREAS 30**

5.1	Promotion of Fundamental Principles and Humanitarian Values	30
5.2	Disaster Management	34
5.3	Health and Care	40
5.4	Organizational Development (OD)	50

CHAPTER 6:**MANAGEMENT SUPPORT SERVICES AND TOTAL OUTLAY OF THE PLAN 56**

6.1	Management Support Services	56
6.1.1	Background	56
6.1.2	Functional Areas of Management Support Service Department	58
6.1.3	Budget Proposed for Management Support Services	59
6.2	Financial Outlay of the Development Plan	59

REFERENCES 61**ANNEXES 63**

Annex-1	Nepal Red Cross Society Central Executive Committee.....	63
Annex-1	Nepal Red Cross Society Planning Committee.....	63
Annex-2	Participants In Planning Process.....	64
Annex-3	Glossary.....	66

COUNTRY CONTEXT OF NEPAL

1.1. Background

Nepal is a mountainous country located on the lap of Himalaya covering the area of 147,181 square Kilometers. The country is located in South Asia bordering with India and China, the two most populous countries in the world. It stretches 145-241 kilometers from the north to south and 885 Kilometers from the west to east. The country is divided broadly into plain, hill and mountainous parts. The mountain belt lies at an altitude ranging from 4,877 metres above the sea level to 8,848 meters to the top of Mt. Everest. The mountainous part occupies 35% of the total land area and about 7.3% of the country's population live here. The hills, with the altitude ranging from 610 metres to 4876 metres, take up 42% of the area. 44.3% of the total population lives in this region. The Terai belt (plain flat land of south Nepal) with the altitude between 61 metres and 305 metres above sea level and 48.4% of the country's population live in this region, which comprises only 23% of the total area. The climate of Nepal ranges from very hot to severe cold due to altitudinal variations.

Agriculture shares about 33% of the Gross Domestic Product (GDP) in Nepal. Industrial base of Nepal is very narrow with 10% contribution to GDP. The remaining 57% of her GDP is contributed by the service sector like trading, construction, tourism. The country is administratively divided into 5 development regions and 75 districts. There are 3,913 Village Development Committees (VDCs) and 58 Municipalities. Despite its relatively smaller geographical area, Nepal has a wide diversity in terms of ethnicity, languages and traditions. The last population census of 2001 shows that Nepal has a population of 23.1 millions with an annual population growth rate of 2.27 %. Population under the age of 14 accounted for 39.36%, above 60 years of age 6.50% and between 15 to 59 age is 54.14%. Altogether 14.2 per cent of the total population live in urban areas. The total projected population of the country for the year 2006 is 25.88 million (CBS 2006). The following indicators present the overall status of Nepal.

S.No.	Particulars	Status up to FY 2063/64
1	Newly Born Infant Mortality Rate (Per Thousands In Live Birth)	34
2.	Infants Mortality Rate (Per Thousand)	48
3.	Maternal Mortality Rate (Per hundred thousand)	281
4.	Females Taking Maternity Services from Trained Manpower (%)	23.4
5.	Safe Drinking Water (Benefited Population (%))	77
6.	% of Population with Sanitation Facilities	46
7.	Literacy Rate (%)-Above 6 Years	63
8.	Literacy Rate (%)-Above 15 Years	52
9.	Net Enrollment In Primary Education (%)	87.4
10.	Human Development Index	0.527
11	Position In the world in terms of HDR	138 th
12.	Economic Growth (%)	2.5 ⁺
13	Agricultural Sectors Growth (%)	0.7 ⁺
14	Non- Agricultural Sectors Growth (%)	3.6 ⁺
15.	Population Below Poverty (%)	31
16.	Employment Growth Rate (%)	3.0
17.	Family Planning Contraceptive Users (%)	48
18.	Total Fertility Rate (15- 49 Years Female) (%)	3.1
19.	District Headquarters Linked With Road Facilities (No.)	63
20.	Telephone and Mobile Services (Per 100 Population)	6.5
21.	Electricity Generation (Megawatt)	560

⁺ Status upto FY 2006/07

Source: Three Year Interim Plan (2006/07)-2009/10), National Planning Commission 2007

The rugged geographical terrain and the poor economic status have led to put the people of Nepal at higher degree of vulnerability. It is reflected as increased human poverty, unemployment, backwardness, public health problems and social conflicts. Consequently, the life of the people is very difficult and large numbers of people are migrating internally and externally to various countries of the world for better jobs. All these factors have demanded humanitarian needs calling for urgent actions.

1.2. Human Sufferings in Nepal

Human sufferings due to the natural, social, political and health related reasons are endemic in Nepalese society. Sufferings from disaster and diseases have greater impacts on vulnerable people because of their frequency occurrence. In keeping with the International Federation of RC/RC, the Global Agenda goals for 2007-2010 NRCS have been monitoring the following increasing trends in vulnerability profiles across the country, which has demanded for a strategic response from NRCS over the forthcoming three year period when the Fifth Development will be implemented. The major sources of human sufferings that have caused for the vulnerability of the people are discussed in the following sub-sections.

1.2.1. Natural Disasters

Natural disasters are the regular phenomena in Nepal. Multiple types of hazards and calamities result in disaster at various parts of the country almost every year. Empirical information on disaster has shown that the numbers of natural disasters are increasing every year with a consequent rise in the numbers of affected people.

Frequent occurrences of various forms of natural disasters have direct effects on the lives of the people in Nepal. It has caused : a) environmental degradation b) deforestation c) erosion of fertile land of hills d) floods in the Terai flatland and the valleys of the hills have degraded the fertile soil and destructed standing crops. As a consequence, agricultural production is affected every year leading to food shortages and food needs are met from imports. At first, this is pressurizing on the foreign exchange holding of Nepal and secondly, the marginal land is being cultivated to meet the needs of food. Such environmental problems have contributed greatly to the increase in the number of disasters, such as, floods, erosion and landslides, which affect the people of many parts of the country and put them in a vulnerable state. Nepal is ranked at the 11th vulnerable country in the world. The major disasters that have hit the country during the last ten years are earthquakes, floods, landslides, fires, epidemics, avalanches, storms and cold waves. Floods are quite common in the plain areas covering entire southern belt, where as landslides are frequent in the hilly and mountainous districts covering most parts of the middle belt of Nepal. Avalanches are the features of disaster in snow-capped high mountains in the northern belt. Natural disasters are frequent based on the fragility and topographical situations. Kathmandu valley is considered most vulnerable in terms of potential earthquakes, where as earthquakes of the small magnitudes are frequently experienced in parts of the country specially in the hills.

a) Earthquakes

Nepal is located in a seismic zone, where the hilly and the high mountainous districts regularly experience mild to violent seismic activities causing loss of life, livestock and property. They hamper infrastructure- road, communication system and power projects. Nepal experiences numerous earthquakes ranging from 2 to 5 on a Richter scale every year. Recurring earthquakes in the last century have claimed more than 23,000 lives. The devastating earthquake in 1934 measuring 8.4 on Richter scale claimed 16,875 lives and destroyed 318,139 houses. In 1988, an earthquake measuring 6.6 on the Richter scale hit eastern Nepal where more than 700 people were killed, 6,500 injured and 22,000 houses collapsed. (NRCS 4th Development Plan document)

b) Floods and Landslides

Floods and landslides are the regular types of disasters that Nepal faces almost on annual basis. The fragile topography of the country is degraded every year with the monsoon rainfall. Lands are washed and rivers are inundated with all sorts of mud and other solid materials, such as, trees and crops. The landslides that occur in the hills mostly affect the physical environment and sometimes such disasters are causing for the casualties of human life. Not a single year goes by without the occurrence of

landslides and floods though the magnitude varies from year to year. Terai areas are often hit by floods of various magnitudes during the monsoon and the arable land and the settlements are seriously damaged. The floods that occur in the terai generally affect a large number of people because of dense settlements here. In an average, 10,000 families are affected by floods and landslides every year.

c) Fires

Fire is the other devastating aspect frequently causing disaster in Nepal. When fire catches in one house it spreads to other houses very easily because the settlements are in clusters in the Terai. In addition, in many villages, most of the houses have thatched roofs that can catch fire very easily. In many cities, there are very narrow lanes and the fire brigades cannot reach there when fire occurs. Fire causes big losses every year in Nepal. It is estimated that every year about 12,000 people from approximately 2,000 families are affected by fire.

d) Avalanches and Drought

In the high mountainous region, the temperature goes very low forming big icebergs. When these icebergs move and fall from very high altitude causing the blockage of rivers forming natural lakes that may break when there will be even a small tectonic movement. This is bringing disaster to the land mass of Nepal. It further brings earthquakes in the mountainous parts of Nepal. Sometimes there is no rainfall for years in the Mid and Far Western Development regions and the people who live there won't have option for livelihood but to leave the land and go somewhere else in search of work. In addition to avalanches, drought, wind storms, cold waves, hailstorms and thunderbolts also kill people every year in Nepal. There have been observed changes in various sectors as a result of global warming/climate change.

1.2.2 Health and Sanitation

a) Epidemics

Nepal is epidemics prone country. Various forms of epidemics affect the country and a large number of people die from different types of epidemics every year. Sometimes, big disasters lead to inevitable outbreak of epidemics, whereas at other times, epidemics cause disasters. Epidemics very commonly experienced in Nepal are: Japanese encephalitis, measles, kalazar and gastro enteritis, water borne diseases. In addition, new forms of epidemics like reemerging of malaria, threat of possible bird flu and incidence of dengue fever are seen.

b) General Health

The health facilities in Nepal are not adequate, nor they are distributed proportionately in all the regions. Moreover, the existing services are lacking proper health services and facilities. Overall, in 2005/06, there were a total of 89 Government Hospitals, 180 Primary Health Care Centers and Health Centers, 699 Health Posts and 3131 Sub-health Posts, 6796 hospital beds. The people's behavior of visiting health service organizations on the recent years has relatively improved. The health service institutions are crowded, and the health personnel are highly demanded. A short

supply of health personnel and the other facilities remains a major problem in many rural parts of the country. On the other hand, a large chunk of population is still out of health and sanitation education. Most of the people are too poor to afford medicines and other health services.

c) Water and Sanitation

The health and sanitation indicators in Nepal are at very low level. It is reported that about 76.6% of the total population has access to safe drinking water. The system of water supply and sewerage system is poor in the urban areas. About 45.8% of the population has an access to sanitation facilities (Nepal Gov: Three Year Interim Plan 2008-10). Households with proper toilet facility in their dwellings are 39%. In the rural community, 39% of people have safer water facility (NLSS 2003/04). Open defecation practice is still a major practice in the rural areas. Despite the efforts to provide better facilities of water and sanitation, a majority of the people live in unhygienic conditions with poor sanitation facilities, which leads them to the paths of multiple air and water-borne diseases.

d) Demographic Changes

The indicators in the sector of reproductive health show that large part of population is vulnerable. There is a high proportion of unmet need for family planning (52%) and the Contraceptive Prevalence Rate (CPR) is 48% only. This has contributed a lot in reducing unwanted pregnancies and population growth. Life Expectancy at birth is 63.3 (male 62.9 and female 63.7) years. Infant mortality rate per 1,000 live births is 48, whereas under-five child mortality rate is 34. Low immunization coverage is one of the leading causes of infant and child mortality. Three delays (delay in seeking care, delay in reaching care and delay in receiving care) are the main contributing factors for high maternal mortality. Maternal mortality rate per 100,000 live births is 281 (one of the highest in the world).

e) HIV and AIDS

HIV/AIDS has become another big threat in Nepal as it is in many countries of the world. About 75,000 people (UNAIDS Global AIDS Report 2006) in the country are estimated to be HIV positive. The number of people living with HIV/AIDS is 0.29% of the country's adult (age 15-49) population. Young people between the ages of 14-29 have been found to be the most vulnerable to HIV/AIDS. The dominant causes of HIV spread are like unsafe sexual practices, intravenous drug use and needle sharing. This has resulted stigma and discrimination. Behavioral change among targeted groups has been a challenging task to curb down the HIV spread.

1.2.3. Political Turmoil, Conflicts and Socio-economic Indicators

The Maoist insurgency, which started in 1996, had a greater impact on the political, social and economic sectors of the country. The decade long internal armed conflict in the country caused great loss of lives of some 11,300 people and over 2080 are missing. Sustained psychological problems are observed among the family of missing as they do not know the fate of the missing. It is reported that there has been a physical loss amounting to Rs. 5 billion (Approach Paper of Three Year Plan 2007-

10 of Nepal). The indirect impacts of the conflicts were tremendous. The inhabitants of the conflict affected area have been considerably displaced. In addition, violence of different kinds has increased even if the peace process has progressed. They are having the status of internally displaced people (IDP), living very difficult life out of their place of origin. Started from a hill district in Western Nepal, conflict situation spread all over the country during last decade by which no sector remained unaffected. The conflict basically had the direct impact on the lives of the young people in the rural areas which forced them to migrate from their place of origin. In addition, the families of those whose next to kin were killed during the conflict were affected most and their situation even now has not been stabilized. Therefore, recovery efforts are still needed. Their family life is broken, children education is interrupted, and occupation is disrupted.

As economic migration was already very much prevalent, the conflict, on the other hand, forced many people and in particularly young to flee from their homes and to migrate to districts headquarters, cities and other countries. The internal political disturbance in various parts of Nepal and particularly in the Terai has made the life of people very unsecured and unstable. It has created pressure on opportunities and livelihood providing institutions. Public security situation looks to be degrading even in the capital.

1.2.4. Poverty and Exclusion

In Nepal, the incidence of national average poverty is 31%, it is seen that there is a limited access to public resources, and development opportunities. It demands improvements in social inclusion regarding the laws, policies, institutions and program implementation like women's empowerment, gender equality, and gender mainstreaming. Improved inclusion of poor people by geographical and social groups is needed by advocating encouragement and inclusion of marginalized groups.

1.2.5 Urbanization and Road Accidents

Urbanization in Nepal is growing. The Census of 2001 has shown that 14.2% Nepal's population live in 58 municipalities. Besides these designated municipalities, other 132 small urban centers are also developed along the highways and in the district headquarters (3 year Interim Plan, 2007-10). This has increased the density of population in many urban areas. Water supply and sanitation system is not adequate. Solid waste management has not been effectively carried out. Roads are in bad shape. In the metropolitan cities like Kathmandu, many tall buildings are built with very small open areas. This has created the threat of mass deaths and injury incases if earthquakes take place.

The road construction in Nepal is increasing but the quality of road in many cases remains to be poor. More vehicles are plying in certain highways than their carrying capacities. Management of means of transportation system is weak. All these factors are responsible for high road accidents causing deaths and severe injuries. WHO report highlights that road accidents are killing more 15 -19 year olds than any disease in the world including AIDS and cancer. With the growth of road network, there has been rise in road accidents. Over 2/3rd are in the Bagmati Zone and more than 52% are in the Kathmandu valley (New Business Age, April/May2007).

1.2.6. Challenges to Humanitarians Works

There is an increased trend of natural and social disaster - conflict and violences and internal disturbances. It has created more demand of humanitarian services. Paradoxically, safer access of humanitarian services to the vulnerable people has been limited due to degrading humanitarian values, disturbances and violences of other kinds. Better access has already become a priority during the time of emergency or in the normal situation. Thus the importance of promoting humanitarian values and the Red Cross principles and dissemination of international humanitarian law have been very urgent. The importance of humanitarian workers who can exercise and work to ensure human dignity and respect for human life is there to implement the principles of neutrality and impartiality in all forms of decision making process.

1.3. The Government's Response to the Situation

Government has the first and foremost responsibility for socio- economic development of the people, including protecting them from disasters and other social ills. Despite persistent poverty and increased vulnerability, the government of Nepal has continuously been strengthening efforts to address situation of diverse human suffering including social and economic development of the people. In the efforts included are lobbying for development aid, formulating appropriate policies, developing and strengthening the required institutional frameworks and programs for effective social service delivery, disaster management and poverty reduction in general. Of particular significance, there have been the efforts to liberalize and decentralize service delivery and economic participation, in which the involvement of donors, the private sector, NGOs and voluntary organizations has been encouraged. This has broadened the resource base and allowed new initiatives to deal with the situation more effectively.

A separate Peace and Reconstruction Ministry has been established for the humanitarian care of the conflict affected, and making overall management for rehabilitation and reintegration. Commitments for priority assistance have also been received from friendly nations for rehabilitation, reconstruction and social integration programs.

Political agreements at different levels and types have tried to bring an inclusive approach in governance of the country, and it has provided some measures in furthering the peace process. There are still problems with regard to the participation of several other political, regional and ethnic fractions that need to be further addressed.

Inclusive political environment is being created but promoting respect for diversity, bridge communities, increase cooperation, self support mechanism in the communities and reduce discrimination are real challenges for the years to come.

The Government of Nepal (GON) has a vision to minimize the social and economic losses caused by disaster. In order to achieve this, the government has adopted strategies a) to use environmental friendly approach in development and construction works b) to provide appropriate information flow for minimizing for risks of natural disaster and emphasis on disaster preparation and c) strengthen collaborative efforts of government, non-government and private sectors for providing relief and secure services to the victims of disaster. (Government Interim Plan 2008-2010) order to

translate the strategies into action, an implementation plan has also been envisaged. It is accepted that the disaster management will be implemented adopting collaborative efforts among governmental agencies, local bodies and non-governmental organizations.

The long term vision of the health sector adopted in the Interim Plan of the GON is to develop an environment to create a situation for providing quality health services. More priority has been given to the emergency health services to the poor and low income earnings people, ultimately improving the health status of all the Nepalese by increasing access to qualitative health services.

The Interim Plan of the Government of Nepal has adopted a strategy to prepare policy on the involvement of governmental and non-governmental private and cooperative organization in health sector.

Nepal has committed to contribute to the Millennium Development Goals (MDGs). It has adopted policies, strategies and programs. MDGs has provided International Development Targets (IDTs) centering around eight major goals: a) Eradicate poverty and hunger; b) Achieve universal primary education; c) Promote gender equality and empower women; d) Reduce child mortality; e) Improve maternal health; f) Combat HIV/Aids, Malarial and other diseases; g) Ensure environmental sustainability; and h) Develop a global partnership for development.

Numerical targets have been set for each goal, which are to be achieved for most goals over a 25-year period between 1990 – 2015. A common list of 18 target and more than 40 indicators corresponding to these goals has been prepared collaboratively by UN, the World Bank, IMF and OECD to ensure a common assessment and understanding of the status of MDGs at global, regional and national levels. MDGs Progress Report (2003) has highlighted that Nepal should improve its economy for the achievement of other goals which are expected to be achieved by the year 2015, except two goals i.e., to achieve universal education and to combat HIV/aids (3 year Interim Plan of Nepal).

NRCS has been developing its Development Plan (2008-2010) considering the Global Agenda goals set by the International Federation of Red Cross and Red Crescent (IFRC and RCRC) for contributing to the MDGs globally. All MDGs goals are adopted by NRCS with a focus on goals 3, 5, 6 and 8 together with the support of its partner's communities. Development Plan of NRCS thus complements national interim plan complying with regional strategy of Federation of RCRC and Federation of the Future (Global Agenda Goals) based on its organisational and managerial capacity.

NEPAL RED CROSS SOCIETY AND ITS HUMANITARIAN EFFORTS IN NEPAL

2.1 Background

Nepal Red Cross Society (NRCS) was established in September 1963 to reduce human suffering without discrimination on any ground. Nepal Red Cross Society was recognized by the International Committee of Red Cross (ICRC) on October 1, 1964 and it was affiliated to the International Federation of Red Cross and Red Crescent Societies on October 1, 1964 and became a member national society.

Within its life span of more than four decades, NRCS has grown to be a large humanitarian organization covering all the districts of Nepal. It has an organizational network capable to provide humanitarian assistance to the needy. NRCS has been implementing its programs to reduce vulnerability through service delivery and by promoting humanitarian laws and values. Furthermore, NRCS is endeavoring to develop the capacity of the people who constantly live in the situation where their social and economic securities are threatened.

2.2 Vision, Mission, Objectives and Values

a) Vision

Nepal Red Society is an efficient, self-sustainable, and independent humanitarian organization committed to provide immediate relief to human suffering and reducing vulnerability, under the Fundamental Principles of the Red Cross, through its network of Red Cross workers throughout the country working closely with communities and governmental and non-governmental organization in a democratic, transparent and participatory way.

b) Mission

The mission of the Nepal Red Cross is to relieve human suffering and to reduce vulnerability through community participation and mobilization of an increased number of volunteers, by mobilizing the power of humanity through expansion and strengthening of the organizational structure of the society and by building links with governmental and non-governmental organization.

c) Objectives

As stated in the Constitution of NRCS, the overall general objective of NRCS is to alleviate human suffering and to reduce vulnerability through a strong base of the institutional network and mobilization of the power of humanity.

d) Values

Values of NRCS are guided by Red Cross Fundamental Principles

- a. **People:** NRCS aims to build the capacities of vulnerable people and communities to work in solidarity to reduce threats to human lives and dignity,
- b. **Integrity:** NRCS acts in accordance with humanitarian principles and values, and works in open, transparent and accountable ways, without compromising RC emblems and the independence, impartiality and neutrality they represent,
- c. **Diversity:** NRCS celebrates the diversity of the communities, volunteers, staff, and partners with the policy of non-discrimination and principle of universality,
- d. **Leadership:** NRCS aims to show its leadership and excellence in the core areas of work,
- e. **Innovation:** NRCS values the history and tradition of RC Movement with a view to find out the innovative, lasting solutions to new problems that threaten human dignity in a changing society.
- f. **Social Inclusion:** NRCS aims to include all social ethnic groups of people to provide the service of NRCS and to reduce their sufferings.

In order to address the above with focus on needs, the strategic direction of the NRCS will be focused on:

- a) Integration of Programmes
- b) Quality of service
- c) Building capacity in order to be more responsive and focused

2.3 An Overview of Program Development

a) Promotion of Humanitarian Values

In order to assist vulnerable people affected by various forms of disasters, NRCS has been carrying various support activities. The major activity that Nepal Red Cross handled with great success in its early years was to promote humanitarian values by managing Tibetan refugees, and sheltering them in camps located in the various parts of Nepal, collaborating with ICRC, UNHCR and Swiss Red Cross. Later on the challenging work for NRCS was to educate the people of Nepal about the Red Cross knowledge, international humanitarian law and humanitarian values by providing immediate service to the people who were suffering from all sorts of problems.

The adoption of Red Cross principle in providing services to the vulnerable people following the spirit of volunteerism and sacrifice by Nepali Red Cross members of all types has established the image of NRCS as an impartial and neutral social organization with safer access for the service of human being in Nepal. The working of NRCS in Nepal has demonstrated that the image of NRCS depends on the positive perspectives of the people. These perspectives of the people need to be strengthened further by translating the Red Cross principles and humanitarian values into action by NRCS and its volunteers through their services to vulnerable people

b) Disaster Management

Disaster relief is one of the major activities which Nepal Red Cross has been doing from its early days. It has experimented with its problems and successes and made more organized and strategic developmental efforts. To provide timely service to the victims of disaster, Nepal Red Cross has started the construction of regional warehouses at strategic points and this work has further been carried to construct one central level and four regional level warehouses at the strategic sites of the five development regions of Nepal. Furthermore, NRCS has developed its volunteers capable to provide immediate relief services, through its organizational network established all over the country. These have enhanced the capacity of NRCS and have developed it as one of the prominent organizations to manage disaster in Nepal.

NRCS has been implementing disaster preparedness initiative at community level with disaster preparedness initiative. NRCS has relief manual, warehouse management guidelines, CBDP policy in place in order to ensure the quality of its all initiative. Considering the conflict situation, NRCS has started tracing the service with the support of ICRC. This service is one of the important humanitarian services NRCS has been carrying and it is continuously expanding. NRCS has been providing the relief and recovery assistance to the people affected by conflict. In order to ensure the quality of refugees and IDP operation, NRCS has developed population movement policy in 2004. Considering the changing need of the Nepalese society and prompt services to be provided to the victims of disaster, NRCS has been improving its disaster management policy strategies and action plan. These factors have made NRCS as a dynamic institution to addresses major forms of disaster affecting the Nepalese people.

c) Health and Care

NRCS had first initiated its service to the people who were suffering from bad health and poor hygienic condition. NRCS has been providing blood transfusion service for more than four decades in Nepal since 1966. It has been able to motivate myriads of blood donors and to operate the blood program as the only mandated organization in the country.

In the field of health and care, NRCS had initiated its activities to provide service to the refugees and disaster affected. Later on, it was realized to have multimodal approach to provide health and care services to the vulnerable. It extends its manifold health and care services and they are: a) handling and implementing in a large scale and in the form of national programmes, such, as HIV/AIDS awareness programmes, b) operating eye hospital and community based eye-care programs c) management of

massive camps for Bhutanese refugees d) Community Based Development Projects e) Community Based First Aid Projects, f) Community Based Disaster Preparedness Projects, g) Drinking Water and Sanitation Program h) Women Empowerment Programmes i) Junior and Youth Sponsored Development projects and so on.

NRCS delivered emergency health services to the conflict affected people during the time of conflict and others in emergencies During the time of emergency first aid, ambulance services and blood transfusion services are provided.

The community based approach is adopted by NRCS for providing health and care services and to enhance the capacity of the most vulnerable groups of people in the rural areas of Nepal. This approach has established NRCS as one of the dynamic organizations in the field of community development and health service providing institutions in the country. All these have established NRCS as a developmental organization, and its strengths in this field can be replicated in other developmental works in Nepal and even made available for other national societies of developing countries.

d) Organizational Development

NRCS has been providing humanitarian services by strengthening its organizational capacity at all levels. The important work that NRCS initiated was to expand its organizational structure, and to strengthen the established structure. In this process, NRCS had experimented with its organizational structure, constitutional issues and management systems by undergoing several changes and amendments from time to time in order to make it more pragmatic and effective. At the same time, the rapid expansion of NRCS continued and as a result, it has become the biggest organization in Nepal by now with its nationwide network. Some district chapters have better infrastructure, managerial efficiency and resource mobilization schemes, while others have to develop their capacities. Inter-district chapter cooperation programme has been effective to support weak district chapters by resourceful district chapters. NRCS has expanded its organizational network throughout the country. Nepal Red Cross Society has developed its organizational capacity through its development of human resource capabilities and strengthening of management systems. This has also resulted into its capacity development enabling it to carry out various activities at all levels.

Regional Coordination Committees at the regional level and District Chapters at the district level have coordinated service delivery to vulnerable people. Similarly, Sub-Chapters, Cooperation Committees and Youth/Junior Circles have delivered different humanitarian services and campaigns against stigma and discrimination at community level. Intergratedly, these units also have disseminated Red Cross principles and promoted humanitarian values in the communities. The national headquarters have been supporting district chapters for their capacity development. The programmes of NRCS have organizational development component to develop the capacity of district chapters and sub-chapter.

2.5 Review of NRCS in General Context

Nepal Red Cross Society has been developed as an established organization with roots in the community. It has its own constitution, explicitly defined vision, missions and objectives. It entertains independent status as it is based on the Fundamental principles. Moreover, the strategic plan, policies, and guidelines regarding priority programs are in practice since decades. General meetings are organized regularly and the office bearers are elected through a democratic process on a regular basis for every period of four years. The Central Executive Committee is functional. Leadership is transferred smoothly and the experienced members with the knowledge of the values of movement are governing the society. It also applies the leadership practice at the district level.

As a humanitarian organization, NRCS has been helping to cope with disasters, epidemics, and other calamities that occur every year and humanitarian assistance to the affected at the times of conflicts prevailing in many parts of the country. Similarly, diverse and difficult geographical areas along with the high mountains and difficult-to-manage topography, socioeconomic problems, deep-rooted superstitions and taboos, political instability and several other adverse circumstances are the big challenges to it. Despite these challenges, NRCS has been dedicated to provide quality services to the community in Nepal through its wide range of programs and services, covering most of the rural and urban areas of Nepal.

NRCS has adopted multi dimensional approaches in the formulation and implementation of its programs. The programs are diversified because the terrain of Nepal is isolated and mosaic of the society is diversified. So various approaches are adopted to provide services to the suffering people. Services like disaster relief, blood and ambulance, the first aid, promotion of IHL and humanitarian values, community development and water and sanitation together with other diversified projects are implemented by NRCS.

Nepal Red Cross Society has been working effectively as a national society to provide humanitarian services within Nepal and participating effectively in the Red Cross movement for supporting the principle of Red Cross at the national, regional and global levels. The regular support of the partner societies to NRCS has helped to provide resources updated knowledge and skill in information technology and provided opportunities to NRCS Management to share experiences with partner societies. Partnership development and emergency preparedness are equal priority areas – coordination within the movement and outside the movement, like OA, global alliance for HIV, delegation policy, fast tracking in emergency time, cooperation among humanitarian actors and outside this frame.

The working of different organizations delivering similar services has, in some cases, led to create confusions among the beneficiaries and duplication in the services. It is, therefore, imperative to strengthen coordination systems, to share resources and to work together and reduce duplications of activities and resources for the greater benefit of the targeted beneficiaries. Long-term strategies are required for continued and qualitative humanitarian services in a more strategic manner for the purpose of bringing coordination among such organization so that assistance and ensuring community is provided adequately and on time.

Areas of suffering, such as, HIV, stigma and discrimination, integration, rehabilitation, climate change and emerging /remerging diseases like malaria, measles, population movement- IDPs, migration, and violence in the urban areas are emerging. NRCS needs to address them. To address these challenges, maintaining standard quality and demonstrating a distinct identity, the capacity building has become more urgent at all levels of NRCS. In addition, the support service management, human resource management coupled with volunteers management, resource mobilization and its diversification and communication are to be improved and developed to address the issues of core areas.

2.6 The Organizational Context

Nepal Red Cross Society has grown its organization as one of the biggest ones in the country. It has been accomplishing its activities in all 75 districts. The country has been facing with new emerging challenges growing from a new changing context. In this situation, Nepal Red Cross Society has many existing and emerging challenges to solve the high expectation of the people. Nepal Red Cross had to enter into different types of activities. Nepal Red Cross has to be more sensitive and proactive and, more than that it has to be more careful about its image as an independent, impartial and neutral organization so that the Society will be able to reach every nook and corner of the country and serve all who need service without any obstacle and discrimination of any kind.

NRCS has been able to mobilize a large number of volunteers as well as considerable resources for its programs internally and externally. It has enjoyed the trust and confidence of the general masses and has maintained a good image in every corner of the country.

NRCS has demonstrated its identity as an impartial organization that has boosted far and wide our image which has made our presence acceptable to all, including our partners and parties to the armed conflicts. That is why, NRCS had had safer access to all parts of the country during the times of arm conflict in delivering services.

The Central Executive Committee (CEC), the peak governance body and the following major central level function-based committees constituted by CEC are listed below along with their mandated jurisdiction and scope of activities. Most of the programs and projects of Nepal Red Cross are streamlined and coordinated under the areas of activities stipulated below:

S.N	Committees	Areas
1.	Disaster Management Committee	<ul style="list-style-type: none"> Disaster risk reduction and response and recovery Assistance to refugees and IDPs
2.	Community Development Committee	<ul style="list-style-type: none"> Community development Drinking water and sanitation First Aid
3.	Health Service Committee	<ul style="list-style-type: none"> Ambulance Eye care Health services including RH Public Health in Emergencies
4.	Organization Development Committee	<ul style="list-style-type: none"> Statutory functions Support to organizational units for capacity building Volunteer management Organizational networking
5	Human Resources Development	<ul style="list-style-type: none"> Human resource development Development of Human resource development institute
6.	Junior/Youth Red Cross Committee	<ul style="list-style-type: none"> JRC/Y Organizational activities School focused drinking water and sanitation HIV/AIDS and RH
7.	Finance and Resource Mobilization Committee	<ul style="list-style-type: none"> Financial management Resources management including mobilization Property management Auditing Procurement Marketing
8	Communication and HV Promotion Committee	<ul style="list-style-type: none"> Networking./ Information Technology Publication of newsletters and standardization of publications, like IEC Dissemination of RC and IHL General Information Management Promotion of Red Cross Principles and Humanitarian Values Advocacy and organizational marketing
9	Women Development Committee	<ul style="list-style-type: none"> Women development Capacity building of the organizational units Gender focused programmes
10	Blood Transfusion Management Committee	<ul style="list-style-type: none"> Blood donors motivation and mobilization Networking with concerned stakeholders Blood collection , testing and supply Quality Management

PLANNED DEVELOPMENT EFFORTS IN NEPAL RED CROSS SOCIETY

3.1 Genesis of Planned Development: Overview of Previous Planned Development Efforts (1984-2003)

Nepal Red Cross has developed three medium-term development plans and successfully implemented them by 2003. The planned development history has clearly shown that NRCS has built up a strong capacity in planning. The following matrix has shown the partnership principles, experiences and achievements from the implementation of the NRCS Plans.

Plan Period	Objectives	Principles adopted in planning and implementation	Achievements	Remarks
First Development Plan 1984/85-89/90 Total Outlay Rs. 105.0 Million	Overall development of the society in context to the national development activities e.g. Primary Health Care, Disaster Relief operations, Family Planning, Afforestation, Drinking water, economic rehabilitation.	Principles NRCS developed its' first plan in centralized way. Limited role of the district chapters. Activities were more inline with govt. activities. Experiences Focused on the development activities. Donors' wishes were respected to select the areas of work. Activities that were not included in the plan were also implemented so some deviations from plan. Too much diversification of activities covering large areas of the country. Decentralization was encouraged but not properly practiced.	Remarkable development to start the process of planned development. Recognized the importance of capacity building of a national society. Plan clearly defined the role of NRCS in development program. Princep Disaster Relief Fund was created at regional and zonal levels.	Plan was ambitious but it made significant contributions to the overall development of NRCS.

Plan Period	Objectives	Principles adopted in planning and implementation	Achievements	Remarks
Plan Holiday (2 yrs) 1990/1991-1991/1992	Due to political transition in the country, it was marked by two-year plan holiday in the NRCS.		Introduced the concept of sub-chapter at community level.	
Second Development Plan 1992/1993-1996/1997 Total Outlay Rs. 952.6 Million	To strengthen and expand organizational network of national level disaster preparedness and relief programs. To expand Health Service activities. To implement the Community Development projects for the vulnerable groups and section of the community. To mobilize NRC Chapters, Youth/Junior RC and all other units of NRCS.	Principles More emphasis was given on the sustainability and people's participation in the programs of NRCS. Organizational development programmes integrated with all programmes. Partnership coordinated approach in mobilizing external resources. Experiences It was realized that too much diversification of the program would not have substantial effect on the life of the people. Therefore an approach to have limited coverage of the area was adopted to have more effective implementation of the program.	Priority areas spelt out, Programs clearly identified and resources properly allocated.	Priority areas were: Disaster Preparedness and Relief Services, Health Services, Community Services, Institutional and Organizational Development.
Third Development Plan 1997/1998-2001/2002 Total Outlay Rs. 1962.2 Million	Strengthening and expanding of Organizational network at all levels of human resource development, strengthening disaster preparedness and relief service programmes. Expanding health and community service programmes. Mobilizing the district chapters, Junior/Youth wings and other units. Strengthening the organization and management capabilities of the Society at all levels with the view to institutionalizing service activities. Mobilizing even greater resources to sustain and expand its activities.	Principles Promotion of community development program. Capacity building of NRCS. Experiences OD continued to be one of the components. Country assistance strategy developed and implemented. Women's participation encouraged. Responding to newly emerging diseases i.e. HIV/AIDS.	Planning has proved to be an effective tool for development. Plan need to be based on clear vision, mission and, ground realities. Flexibility and responsiveness to the changes and conflict situations. Focus on vulnerability reduction. Diversity in modus operandi.	Priority areas were: Disaster Preparedness and Relief Services, Health Services, Community Development, Institutional Development and Organizational Development, HRD, Resources Mobilization.

3.2. Review of the Fourth Development Plan (2003-2007)

3.2.1 General Objectives and Achievements

The Fourth Development Plan acted as a guiding document of the Society for the last five years. It has defined the needs and strategies of the society. While formulating the 4th Development Plan, NRCS had taken into consideration the Tenth Plan of the government. The total outlay of the plan was Rs. 2138.4 million.

NRCS explored all options to maximize the possible resources in implementing the fourth Development Plan. The fourth plan has played significant roles in contributing towards achieving the goals of the RC/RC Movement. Major highlights on the objectives, partnership principles, strategies of the Plan and the achievements are presented in the following matrix for a quick observation to the Plan that provided basis for enhancing the humanitarian assistance to the vulnerable:

General Objectives and Major Achievements of the Fourth Plan

General Objectives	Key Achievements
To provide effective disaster response in order to save lives and assist the victims of disaster and conflict;	<ul style="list-style-type: none"> Humanitarian assistance provided to about 1.5 millions individuals affected by natural disaster and another half a million individuals affected by armed conflict and internal disturbances. NRCS deployed more than 15 volunteers and staffs for international disaster response.
To strengthen disaster preparedness programmes of NRCS and empower organizational units and the communities to cope with disaster situations on their own;	<ul style="list-style-type: none"> New DM policy , strategy and action plan drafted in line with new developments in the DM field Contributed internationally and nationally in the academic exercises of DM related policies, strategies and acts formulation New contingency plan focusing on earthquake in Kathmandu valley developed NRCS identified five most potential hazards of all 75 districts. CBDP policy reviewed and revised NRCS reached to additional 300 communities in different parts of the country with community based disaster risk reduction initiatives. DM centre established with enhanced communication system Response preparedness strengthened at all levels including strengthening of capacity of warehouses Enhanced IT network capacity. Thousands of DM practioners have been produced at community level In CBDP communities, system to stock some NFRI with their own resources as emergency preparedness measure has been set up. NRCS developed, produced and distributed number teaching materials to generate public awareness. NRCS have developed Katmandu valley map locating emergency evacuation sites, resources, service delivery institutions.

<p>To improve the health status of the targeted communities and reduce their vulnerability</p>	<ul style="list-style-type: none"> • Blood policy revised and endorsed • Revised health policy and formulated strategic plan • Developed blood safety manual and standard operating procedure • Developed a five year HIV/AIDS Strategy and Operational Plan • Revised CDP Policy with strategic focus on capacity building and community empowerment • Operational alliance initiated for CDP. • Endorsed policies for arsenic test and mitigation, • Developed arsenic test and mitigation guideline. • Formulated NRCS policy on drinking water • NRCS has positioned a pioneer of arsenic test and mitigation and school led sanitation in the country • NRCS represented in National Arsenic Steering Committee, Sanitation Steering Committee, Rainwater Harvesting Network • Arsenic centers established and operated including establishment of WatSan information center in Chitwan • Added 2 new blood transfusion centers • Increased blood donors by 15% every year • Increased no. of ambulance vehicles with mobilization of local resources from DCs and sub-chapters. • Extended 7 community eye care centers in different areas • Expanded infrastructure capacity for Janaki Eye Hospital and community eye care centres • CBFA, FATS and EFA expanded to 48 districts, developed 409 first aid trainers and 3,338 volunteers and provided First aid service to 38,013 people including mobilization of first aid teams during emergency situations • Increased resource mobilization by 15% in blood transfusion service with enhanced technical and human resources capacities and acted upon quality assurance as per WHO standard. • ‘Basic First Aid Training’ curriculum approved by the Nepal government, institutionalized First Aid Section at Headquarters • Trainers manual, volunteer manual, IEC materials developed and standardized. • Family planning project started in 6 districts in the eastern region, • A maternity centre in Dhanusha established • Condom day event continued nationwide in coordination of. • HIV/AIDS programme with focus on care and support started with the expansion and continuation of prevention activities. • Established VCT/STI clinics in 8 districts. • Almost half a million beneficiaries reached every year through youth/community peer education, community outreach and advocacy interventions • Community Development Programme further expanded to 15 districts covering a total of 35 districts • A monitoring fund for CDP programmes Established • Arsenic test and mitigation program expanded in 17 terai districts
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<p>To promote an understanding of the Fundamental Principles and humanitarian values as a basis for all NRCS actions and behavior so as to ensure integrity and impartial image of NRCS.</p>	<ul style="list-style-type: none"> • Central Committee and Department as secretariat for communication and Humanitarian Values formed, role and responsibility defined and capacity strengthened. • Code of conduct, Security guidelines and emblem guidelines development • Internal regulation for proper use of emblem endorsed • Visibility of NRCS services including ambulance vehicles standardized • Nepal declared as emblem misuse free country • Over three lakhs population benefited by RC knowledge and International humanitarian law all over the country • Dissemination materials on emblem use, fundamental principles, RC movement, manual published and distributed • Wider sharing of success / best practices on humanitarian values done using NRCS radio programme • Integration of HV in NRCS major community based programme done • Youth involvement from diverse background ensured in HV programme • IHL dissemination intensified among civil society across the country
<p>To further develop and strengthen the overall capacity of Nepal Red Cross Society as a well functioning National Society.</p>	<ul style="list-style-type: none"> • Constitutional amendment incorporating vision and mission done • Provision of compulsory organizational expansion at local level made mandatory in the amended constitution • Development Plan developed • NRCS Communication policy endorsed • NRCS Communication Strategy 2008-2010 formulated • Resource Mobilization Policy developed • Junior/Youth Volunteer Management policy and guideline developed • Financial Management System Guidelines developed • Organizational structure at Central level reviewed and reengineered • Central Committee and Department for communication and Humanitarian Values formed; role, scope and responsibilities defined • RC image promoted with active involvement of NRCS in providing humanitarian assistance in emergencies • NRCS documentary and NRCS song developed and shared in national and international fora • Media relations extended with network of journalists • Partnership established with Federation of journalists to enhance their FA skills in reporting in emergency situation • NRCS website: www.nrcs.org established and regularly updated • Readership of NRCS Newsletters and website increased, • Enhanced capacity of communication focal persons in all departments regarding news writing, photography, feature writing and radio programme production • Established radio programme production system in NRCS premise and broadcast of over 100 episodes made • Strengthened of Regional Coordination Offices and warehouses • Accounting software upgraded • Data base of donors supporting NRCS regularly set up • Assets (Land and buildings) added, evaluated, updated and utilization maximized • Training Manual on Women Development developed • Manual on Volunteer Management developed • Volunteer Involvement and Value Audit carried out • Infrastructural capacity of National Training Centre Building upgraded • CAS developed and implemented • Adult and Junior/youth membership and participation increased • Communication network expanded • Women participation increased at all levels (approx. 12 to 20 %)

3.2.2 Lessons Learnt from the Fourth Development Plan :(2003-2007)

The planning and implementation processes of development programs envisaged in the Fourth Development Plan has provided the following lessons that have helped in shaping the strategies of the forth coming Fifth Plan of NRCS:

a. Planning has acted as an effective tool for development:

Nepal Red Cross Society is one of the few National Societies to have started the planning process in the early eighties, which has helped streamlining the diverse programs and keep diverse activities in proper track. The planning exercises also have provided a long-term perspective and strategic directions to the society and its chapters and sub- chapters for its future courses of actions.

b. Planning has to be based on clear vision and mission:

Our past experiences have taught us that the Plan must be based on a clear vision and mission of the society, in the absence of which it was too difficult for the society in the past to identify the appropriate fields of activities and priorities.

c. Plan need to be based on ground realities:

Since only those programs, which were based on the ground realities, were successful in the past, the inevitable lesson learnt from it is that all plans and programs need to be designed on the basis of ground realities, such as, relevance and need of the program, commitment of the stakeholders, availability of resources and management capability.

d. Flexibility and responsiveness to the changes and conflict situations:

In the course of planning process, it has been realized that the Society has to be responsive to the changes that take place in the national and international environment. NRCS should also be able to cope with the conflict situations of all types and cater to the people's needs with better conflict management approaches. There has to be enough rooms for the accommodation of new programs as well as appropriate changes in the existing programs to adapt to the changed context.

e. Focus on vulnerability reduction:

The programs implemented in the past were of humanitarian nature but they did not necessarily focus on specific objectives. Our own experience and the development of vulnerability concept at international level have led all NRCS activities to focus on vulnerability reduction, which has facilitated in streamlining all the activities towards clear-cut objectives.

f. Diversity in modus operandi:

To achieve the objectives envisaged in the Plan, diverse operational modalities are advisable to suit strategic needs and appropriateness of the modality. For coping with the relevant context, the availability of resource and negotiation with partners as well as determining appropriateness of the modality of the concerned programme, implementation strategy and modality should be flexible enough so as to ensure that all programmes are practical, effective and accommodative. However, the strategic

objectives, general norms and consistency of the policy guidelines shall in no case be undermined.

g. Ownership and sustainability:

The sustainability component regarding all programmes need to be clearly spelled out right at the time of planning so that proper steps can be taken during the implementation period so as to ensure its sustainability. Active participation of the beneficiaries, their capacity building and appropriate resource mobilization mechanism are the key factors for sustainability. The vital lesson learnt in this regard is that eventual transfer of ownership of all activities to the appropriate agency/unit/body or the community for sustainable management in the days and years to come is a must.

h. Integration of organizational and institutional development components:

The Importance of integrating organizational and institutional development components with development programmes has become a well-considered, tested and demonstrated concept and a vital lesson learnt for wider application. Hence, learning from the effectiveness and long-term impact of those components, all future programmes of NRCS shall invariably include ID and OD components.

i. Monitoring and evaluation systems:

With the beginning of planning process, NRCS has also started the process of regular monitoring and evaluation of the major programmes, which follows a review of all the programmes annually. This has greatly contributed to the improvement of the programmes and has made them more relevant and effective. It has also been realized that more emphasis and further improvement in monitoring, and evaluation system will ensure better quality of all the programmes.

FRAMEWORK ADOPTED FOR THE FORMULATION OF THE FIFTH DEVELOPMENT PLAN OF NRCS 2008-2010

4.1. Approach to Development Plan 2008-2010 of NRCS

4.1.1. Need for Development Plan in NRCS

A Strategy to Scale up Quality Humanitarian Service: Development Plan is a part of the organizational function to provide a road map for the continuity of planned development culture. But more importantly, it is a complementary approach to contribute to the national goals, and ultimately to millennium development goals. The humanitarian needs in the world including Nepal are increasing. In this context, NRCS has planned to use its limited resources more effectively and systematically to enhance its response to overcome the sufferings of the vulnerable people in target community. So the Development Plan helps making its all programs more community oriented through streamlining of functions and eliminating duplication for the achievements of possible better results. Furthermore, it will help attune with the Red Cross and Red Crescent Global Strategy 2010, Global Agenda Goals and to scale up NRCS contribution to the national and global humanitarian efforts.

A Road Maps for NRCS: The Nepal Red Cross Society's Development Plan 2008-2010 is its road map for the next three years. NRCS has identified its focused areas of operation, defined priority activities that support in achieving its mission of reducing or alleviating human suffering

An Integrated Approach to the Humanitarian Service: The experiences of NRCS in providing services to the vulnerable groups for the last four decades have indicated that integration of the programs maximizes benefits and increases programme effectiveness. Disaster Management is taken as one of the important tasks of Red Cross Movement. Integration is basically to reduce the duplication of resources and reach to the most vulnerable with holistic approach of addressing their needs. They can be taken as the approach to provide service to the vulnerable. The Integrated approach will help to achieve a) One set of need assessment b) One plan c) Cost-effective approach to the programs and management d) Better volunteer management and human resources and e) Improved communication and advocacy.

4.1.2 Overall Strategic Goal

In order to achieve the objective as outlined in NRCS constitution, the overall strategic goal of this Development Plan (2008-2010) is to alleviate human suffering and to reduce vulnerability through a strong base of the institutional network and mobilization of the power of humanity.

4.1.3 General Objectives

The general objectives set for all activities and programs are as follows:

1. Promote respect for diversity and human dignity, and reduced intolerance, discrimination and social exclusion
2. Enhance DM capacities of NRCS and vulnerable communities in order to reduce the impacts of disasters.
3. Improve health status of the vulnerable people,
4. Further develop and strengthen organizational and management capacity of NRCS as a well functioning national society.

4.1.4 Key Concerns and Priorities

The analysis of the internal and external environment – the socio, economic and political context and the organizational capacity of the NRCS, the following issues and challenges are to be addressed by the NRCS strategy. The key issues addressed in the Development Plan of NRCS are identified according to the activities of the core areas adopted by NRCS and the management support activities carried by various departments. The Development Plan of NRCS for the year 2008-2010 is formulated to focus the following areas concerned :

a. Areas of Concerns

1. Applying more organizational approach than project approach,
2. Further defining and clarifying cross cutting issues in the NRCS context,
3. Institutionalization of sustainability strategy/approach and coordination mechanism
4. Streamlining and integration of program approach
5. Optimum utilization of NRCS assets
6. Strengthening planning, monitoring, evaluation and reporting system, and MIS
7. Ensuring adherence to the Red Cross principles and code of conduct,
8. Compliance with the constitutional obligations, existing policies and strategies at all levels
9. Development, retention and capacity enhancement of human resources at all levels

b. Priorities

1. Promotion and integration of the Movements Fundamental Principles and Humanitarian Values;
2. Ensuring prompt and effective disaster management and extension of CBDP programmes;
3. Providing health services, CBFA and Community Health Promotion Programs, blood transfusion and safe blood programs and other health related activities ;
4. Institutional Development and Human Resources Development;
5. Strengthening Management Support services and coordination and collaboration efforts with governmental and nongovernmental organizations and other internal and external partners.
6. Coping with the changing situation, conflict sensitivity, conflict management and other crosscutting issues like gender sensitivity, youth involvement, community participation, volunteer management, advocacy of selected issues to be incorporated as integral components of all Red Cross activities.

4.1.5 Policies and Guiding Principles

The following strategic policies shall act as guiding principles for the implementation of NRCS programs and activities at all levels:

- a) Adherence to, and careful consideration of, each of the implementation strategies;
- b) General consistency in the implementation mechanism and standardization of program components in the case of similar programs and/or specific program components;
- c) Adherence to Red Cross principles and humanitarian values of Red Cross;
- d) Monitoring, reviews and evaluation as integral components of all activities;
- e) Integration and utilization of appropriate tools such as Better Programming Initiatives (BPI), Vulnerability and Capacity Assessment (VCA), Project Planning Process (PPP) and other relevant tools developed by the movement;
- f) Modality of the programs shall be determined independently by the nature of the program. Whether the program should be run like an institution or a development program or a community based mechanism or just a kind of campaign can be further determined by the type of funding or partnership or the appropriateness of the modality for achieving desired objectives;

- g) Adherence to the Red Cross norms, codes, jurisdiction, coordination and linkage patterns, and the control mechanism based on RC policies, especially while entering into agreement with external and international partners;
- h) Central Executive Committee shall remain as the central controlling body for national level policies and guidelines. However, most of the programs shall be implemented through delegation of mandates and responsibilities to appropriate management bodies, boards, committees and administrative mechanism. Based on the policies of the CEC, district and sub-chapters of NRCS shall implement their programs in accordance with the abovementioned policies and constitutional provisions.

4.1.6. Implementation Strategies

1. **Vulnerability reduction:** Of all kinds, such as, geographical, ethnic, age specific, diseases and physical status related, chemical, biological, industrial and technological, environmental, economic, social, natural calamities/ disasters etc.
2. **Volunteer management:** Involvement and participation, leadership development and skill development components.
3. **Participatory approach:** Relevant stakeholders, effective participation mechanism and generating a sense of ownership among beneficiaries.
4. **Institutional and human resource development:** Integration of ID components in all NRCS programmes, competitive and effective performance, sustenance and continuity.
5. **Multiple implementation modalities:** Diversity in terms of type, scope, geographical level, mandates and jurisdiction as well as partnership modalities.
6. **Integration of cross cutting issues:** Gender sensitivity, Youth involvement, Advocacy, Volunteer involvement, Conflict sensitivity and Humanitarian values.
7. **Capacity building:** Built-in program components for self-reliance and sustenance, empowerment and capacity building of NRCS units, communities and civil societies
8. **Resource mobilization:** Assurance of dependable resource mobilization, Revenues, service charges and fundraising, participatory resource sharing by relevant agencies.
9. **Coordination and collaboration:** With relevant stakeholders for effective implementation of programs, collaboration in relevant cases for sustenance and continuity of programs.
10. **Knowledge sharing with the partners:** With relevant partners to strengthen partnership, documentation of lessons learnt, develop replicable

models and maximize resources. In addition, it is to promote the culture of working together for optimum results.

4.2. Components of Development Plan Framework

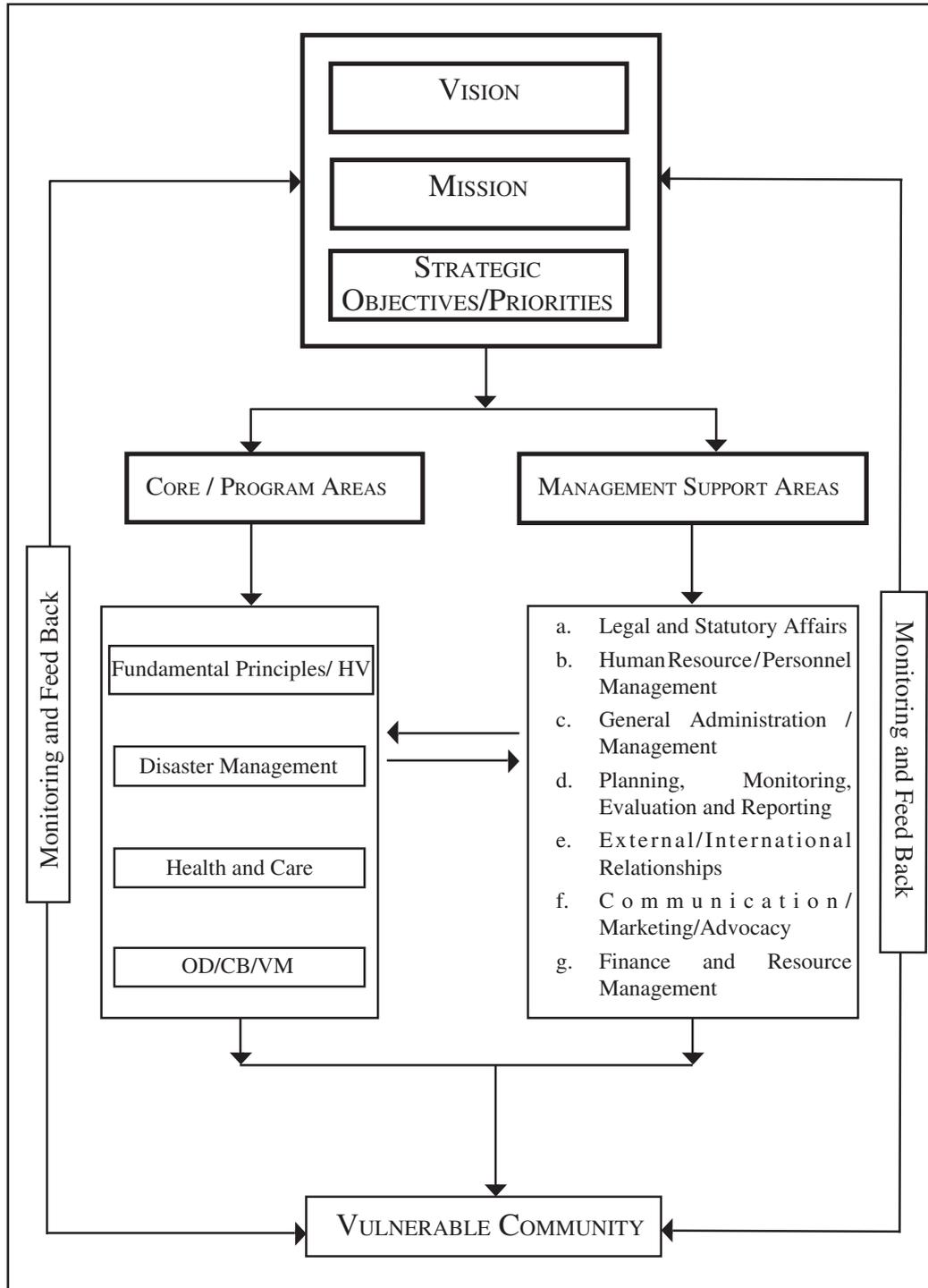
Development Plan framework of NRCS has been designed basing it on the national needs and the global agenda that have been accepted by RC/RC Movement. The national issues that have been influencing the Development Plan framework of NRCS are the environmental, the status of economic development, political stability, the socio cultural tradition and structure of the country. These factors have led to design the service strategies of NRCS for addressing the sufferings of the people of Nepal.

NRCS has been implementing its activities in four core areas as movement strategy. It has established its place in Nepal in the field of disaster management, blood transfusion, community development and addressing the vulnerable groups of people. It is realized from the planning experiences of the past that the activities of the core areas could be implemented successfully provided the capacity of management is developed and made efficient. It is realized that there is a need to assess the management capability of NRCS. Therefore six main areas of management have been included in the strategic planning framework to make them efficient and productive for providing timely and qualitative services. The areas of management support strategies comprise of a) Legal and Statutory Affairs, b) Human Resource/Personnel Management, c) General Administration /Management [Inventory Management, Central store, house-keeping, such as, cleaning, gardening security, canteen, building, water supply, electricity, equipment management, travel and ticketing , Governance and other statutory meetings, Library/Resource Centre Management, IT, Logistics (Fleet, warehouse, procurement), physical infrastructure management etc)]. d) Planning, Monitoring, Evaluation and Reporting, e) External / International Relationships, f) Communication/Marketing/Advocacy (Internal- publication, media relationships, communication management, press releases, advocacy, representation etc., and g) Finance and Resource Management

The following chart has provided the overall strategic functional and managerial framework of NRCS, and it has also mapped the areas where NRCS has to work in the coming three year Development Plan.

Development Plan Framework of NRCS

Interrelationship between the Core / Program Areas and Management Areas



4.3 Context of the Development Plan 2008-10

While formulating the Development Plan 2008-10, NRCS has taken into consideration the contextual situation of the country, national issues and policies, humanitarian challenges, subject-wise background information, lessons learnt from the experiences of earlier plans and particularly from the implementation of the Fourth Development Plan as well as overall capacity of the organization to cope with them. Consultation at various levels was done by organizing workshops and meetings with the NRCS management staff, district level officials, planning committee members and CEC members. The Plan document was presented in the workshop meeting organized on February 28, 2008 for the Planning Committee members and the Officials of NRCS and through discussion was made on the document and with some improvements the document was adopted by the CEC meeting held on 29th February 2008. The period of the Development Plan will cover three years from January, 2008 to December, 2010.

CORE AREAS

Introduction

NRCS has clustered its overall programmes into four core areas viz. disaster management, health and care in the community, promotion of fundamental principles and humanitarian values and organizational development. In addition, the management support section has been organized separately. This strategy has been formulated based on the core programme areas and the management support. All the NRCS programmes are geared to contribute to the Global Agenda Goals of International federation, Millennium Development Goals of UN and guided by its statutes, RC fundamental principles and values.

Contents have been developed with background, issues to be addressed, and current capacity for addressing the issues, core area wise general objective, specific objectives to achieve the general objectives, expected results, activities and implementation strategies.

5.1 Promotion of Fundamental Principles and Humanitarian Values

A. Background

Since last 45 years, Nepal Red Cross Society has been operating various programmes in humanitarian arena nationwide that have resulted in to magnificent impact in the awareness, attitude and behavioural changes in the community.

Promotion of fundamental principles and humanitarian values are taken as a priority programme which has been implemented in an integrated manner since the inception of NRCS. Integration has been made with the programme of disaster, health, junior and youth. However, it has been operated in a more concentrated model after fundamental principles and humanitarian values have been prioritized as one of the core programme areas in the Fourth Development Plan. The scope of humanitarian vales has been focused on reducing discrimination and respecting diversity.

B. Achievements

- Addressed the need of marginalized communities through disaster, health, community development programmes,
- Service by volunteers has become a major practice for humanitarian actions.
- Red Cross knowledge, fundamental principles, international humanitarian law and respect to human rights, safer access and respective code of conducts is widespread
- National and international image of NRCS and its volunteers promoted and safer access increased
- Successful campaign for freeing the country from misuse of RC emblem.
- Individuals, private and public institutions attracted to work with Red Cross due to positive attitude, neutral and impartial behaviour of the organization.
- NRCS programme have contributed a lot to develop positive attitude and non-discriminatory behaviour towards ethnicity, caste, gender, disabilities, elderly people and especially people living with HIV/AIDS.
- Efforts initiated to support the conflict affected people for reintegration of internally displaced people and refugees like Tibetan and Bhutanese refugees.

C. Capacity

NRCS has adequate human resources for dissemination programmes at all levels. It has standard manual, course and promotional materials. There are nationwide organization and programme network down to the community to carry out FP and HV programmes. Potential resources lie in the partnership with movement components and other bilateral community based programmes. Internal media of NRCS like radio programme, bulletins, other IECs and printing press have possibility of FP and HV programme more effective.

D) Objectives, Expected Results and Activities of the Fifth Development Plan

General Objective: Promote respect for diversity and human dignity, and reduced intolerance, discrimination and social exclusion.

Specific Objectives	Expected Results	Activities
1. To promote understanding of FP and HV as well as enhance influencing behaviour among Red Cross members, volunteers and staff	<p>1.1 HV policy and program developed and implemented.</p> <p>1.2 Understanding of HV policy, FP and basic principles of IHL increased among RC members, volunteers and staff</p> <p>1.3 HV activities incorporated in all programs as cross-cutting issues</p> <p>1.4 Neutral and impartial behaviour adopted by members, volunteers and staff in their actions.</p> <p>1.5 Organizational image and acceptance increased both in normal and emergency time</p>	<p>1.1.1 Design HV policy and program</p> <p>1.2.1 Development and distribution of Training and promotion material on IHL and HV</p> <p>1.3.1 Dissemination of RC knowledge, RC FP and IHL-5000 sessions</p> <p>1.4.1 Orientation to program managers on HV-3 times</p> <p>1.4.2 Trainings on “Better Programming Initiative” to programme managers-3 times</p> <p>1.5.1 Induction to members, volunteers and staff on, Standard of operating procedure (code of conduct, safer access, security guide line, proper use of RC emblem).</p> <p>1.5.2 Wider sharing of good practices of reducing discrimination, tolerance and respect to diversity.</p>
2. To reduce discrimination and intolerance in the community, public and private institutions	<p>2.1 Increased understanding of FP and humanitarian values</p> <p>2.2 Number of program with HV component operated in the community</p> <p>2.3 Increased cases of reducing discrimination and respecting diversity</p> <p>2.4 Increased practice of community participation and working together</p>	<p>2.1.1 Mass level orientation on HV in community level</p> <p>2.2.1 Integration on HV in community based program</p> <p>2.3.1 Youth camp on non-discrimination</p> <p>2.3.2 Campaign for non-discrimination</p> <p>2.4.1 Encouragement of diverse community involvement in RC organization and program management</p>

Specific Objectives	Expected Results	Activities
3.To advocate on respecting IHL, HV and human rights at the authority level	<p>3.1 Understanding of basic principles of IHL and HV enhanced, and increased safer access of RC volunteers and staff all the time</p> <p>3.2 Better response to vulnerable situations</p> <p>3.3 Ensured proper use of Red Cross emblem.</p>	<p>3.1.1 Advocacy on IHL and HV-15 times</p> <p>3.1.2 Round table meetings with different authorities and groups at different levels for promoting respect to IHL and human rights -15 times</p> <p>3.2.1 Advocacy on humanitarian actions for the needy people</p> <p>3.3.1 Media campaign on special event</p> <p>3.3.2 Public awareness activities through media campaigns, seminars and workshops for emblem use -15 times</p>
4.To reduce risk of mine and other explosive devices	4.1 General public are aware of mitigating risk of mine and IED (Improvised explosive devices) UXO (unexploded objects)	<p>4.1.1 Awareness on mine, IED and UXO risk education in the community-300 sessions</p> <p>4.1.2 Dialogue with the government for formulation of emblem law</p>

E. Specific Implementation Strategies

On top of the implementation strategies mentioned in sub-section 4.1.6, following will be the specific implementation strategies for this core area:

1. Methodologies, tools and best practices shall be shared internally & externally to promote the movement's Fundamental Principles, International Humanitarian Law and Humanitarian Values.
2. International Humanitarian Law, Red Cross principles and Humanitarian Values shall be integrated in all programs of NRCS.
3. All levels of organizational units and communities shall be prepared to act in accordance with RC principles and International Humanitarian Law and to ensure that those values are well respected in all of their activities.
4. Advocacy for ensuring proper use of emblem through different channel of communications.

5. Coordination and linkages with all concerned stakeholders shall be further strengthened.
6. Information, Education and Communication (IEC) and media campaign to promote RC Principles, Humanitarian Values and IHL shall be intensified through greater involvement of stakeholders.
7. National Headquarters shall develop policies, guidelines, codes, manuals, standards and also monitor adherence of all units of the organization to them.

F. Financial Outlay for Promotion of Fundamental Principles and Humanitarian Values

Programme	Beneficiaries/target audience	Budget (NRs)
Dissemination of FP and IHL (no of persons)	2,300,000	3,615
Promotion of HV (no of persons)	20, 000	2,265
Advocacy (no of organisations)	750	1500
Mine Risk Education (no of persons)	12,000	120
Grand total		7,500

5.2. Disaster Management

A. Background

Since its inception in 1963, Nepal Red Cross Society has been involved in disaster relief. Later, NRCS broadened its scope and getting itself involved in the disaster preparedness both at the organizational and the community level. Therefore, NRCS has been active in getting prepared for delivering assistance addressing the overall disaster management cycle. Because of the demonstrated capacity of NRCS in DM in the country, NRCS has been recognized as one of the key actors. NRCS has an established mechanism for implementing disaster risk reduction measures and also for the disaster response. Its networks at different levels, depending on the size of the disasters get immediately active after the disaster. They, in many cases, become the first responders to the local disasters. Organisational level Units at the higher level get activated if the local units' capacity is not enough to respond to the disaster. If the scale of disaster is big and NRCS capacity is not adequate to cope with the disaster, it launches an international emergency appeal through the International Federation of Red Cross and Red Crescent Societies (IFRC). NRCS mobilizes its organization and volunteers at appropriate levels to carrying out disaster response. Skilled human resources are mobilized for assessment and response planning. Information collected by NRCS during emergency is considered as the credible one by other organizations and rely on these. Emergency assessment forms developed and used by NRCS are adopted by many other organizations and partners.

In Nepal, floods, landslides and fires are the recurring disasters that affect thousands

of lives every year. Epidemics, droughts and avalanches occur frequently and the country is highly vulnerable to the earthquake. Earthquake has been occurring at different intervals of time. These also affect many lives. Rugged topography and weak transportation network pose a great challenge to the immediate and effective disaster response. The incidence of disaster is further aggravated by these. In order to make its disaster response further effective, NRCS is putting constant efforts to decentralize the disaster response activities and has been expanding its disaster risk reduction initiatives upto to the community level from the headquarters...

NRCS has been continuously engaged in providing humanitarian assistance to the people affected by disaster and other consequences that force the population to move from their place of origin. Therefore, the displaced population also remains as one of the beneficiary groups for NRCS. Considering all the facts and practices, NRCS has been involving in the following areas of disaster management.

- a. Disaster Response (Relief and Recovery)
- b. Disaster Risk Reduction (Preparedness and Mitigation)
- c. Displaced population (people displaced as a consequence of conflict/internal disturbances and refugees)

B. Achievements

- DM policy revision process initiated as well as DM strategy and DM action plan drafted.
- NRCS position has been specified in the Internally Displaced Population (IDP Policy) endorsed by the Government of Nepal in 2007. NRCS has been a pioneer National Society in South Asia to develop Population Movement Policy as per the commitments made in Asia Pacific Conference in Manila in 2002.
- Contributed to the development of global DM strategy, recovery policy, National DM policy, national DM Act and National DM strategy.
- Developed contingency plan focusing earthquake in Kathmandu valley. Recovery guidelines developed to recovery operation in response to floods/ landslides in 2007.
- Developed contingency plan focusing earthquake in Kathmandu valley. Recovery guidelines developed to recovery operation in response to floods/ landslides in 2007.
- Establishment and strengthening of DM center and operationalization of emergency operation centre during flood and landslide response in 2007/2008.
- NRCS has established its GIS/ data base and has also created an emergency disaster response fund. NRCS logistics capacity is being improved significantly.

- NRCS has established its GIS/ data base and has also created an emergency disaster response fund. NRCS logistics capacity is being improved significantly.
- Community based disaster risk reduction initiatives have been started focusing on multi hazards integrating Community Based disaster preparedness and community development programs. Community based disaster management initiative has been expanded.
- NRCS actively involved in complex emergency, mass casualty and internal disturbances as well as demonstrated its capacity as first responders at several levels. NRCS representation in international disaster response increased
- NRCS has developed its disaster response capacity with increased number of trained disaster responders at different levels.

C. Capacity

NRCS has developed its capacity in terms of man, material and money to be one of the lead actors in the country in disaster management. Relevant policy, procedure, guidelines and defined organizational structure and mechanism are in place. NRCS is an ex-officio member in the Central and district level Disaster Relief Committee works as per the Natural Calamity Relief Act (1982) of the Government. NRCS has more than 5,000 trained human resources in DM at different levels. NRCS has hundreds of specially trained persons in disaster response that can be mobilized in the national, regional and international level disaster response. Over the years, NRCS has also developed its capacity in logistics management and response preparedness. NRCS has established its GIS/ data base system. DM Center with VHF radio base, Geographical Positioning System (GPS), other communication means have been established at the headquarters. Capacity of the vehicles and warehouses that are located in different strategic location are in a position to provide assistance to 30,000 families with Non- Food Items Relief packages across the country. There is more than 20 million rupees in the Princep Disaster Relief Fund and nearly 2 million rupees in the Emergency Disaster Response Fund.

D. Objectives, Expected Results and Activities of the Fifth Development Plan

General Objective: Enhance DM capacities of NRCS and vulnerable communities in order to reduce the impacts of disasters.

Specific objectives	Expected results	Activities
1.To provide relief and recovery assistance to people affected by natural disaster	<p>1.1 Relief service is rendered to most affected families and their lives saved.</p> <p>1.2 Recovery policy and guidelines of NRCS are in place</p> <p>1.3 Life and livelihood of affected people and communities are restored</p>	<p>1.1.1. Rapid and recovery assessment</p> <p>1.1.2. Distribution of 30000 NFRI package</p> <p>1.1.3. Partnership to provide, health facilities, food and other essential basic items support</p> <p>1.1.4. Facilitation of evacuation process and wastage management</p> <p>1.1.5. Participation in Camp management</p> <p>1.2.1. Participation in advocacy for effective disaster response.</p> <p>1.2.2. Development of relevant policy and guidelines</p> <p>1.2.3. Designing of an appropriate interventions based on assessment on different sectors (Shelter, livelihood, reconstruction and rehabilitation, PSP support etc)</p> <p>1.3.1. Conduction of various types of training at different levels.</p> <p>1.3.2. Participation of in search and rescue and conduction of six basic search and rescue trainings</p> <p>1.3.3. Participation in the support for temporary shelters</p> <p>1.3.4 Participation in skills development training</p>
2. To provide relief and recovery assistance to displaced population (IDP and Refugees)	<p>2.1 Relief service is rendered to displaced families and their lives saved.</p> <p>2.2 Life and livelihood of affected people and communities are restored</p>	<p>2.1.1 Supporting 3000 conflict affected families for relief and recovery process</p> <p>2.2.1 Designing appropriate interventions based on assessment on different sectors (Shelter, livelihood, reconstruction and rehabilitation, PSP support etc)</p> <p>2.2.2 Conduction of Skill development training for 525 Bhutanese refugees</p> <p>2.2.3 Participation in advocacy for repatriation</p> <p>2.2.4 Camp management</p>

Specific objectives	Expected results	Activities
3. To expand disaster risk reduction initiatives including climate change risk reduction	3.1 Threats to potential risks are reduced in selected disaster prone communities	3.1.1 Participation in early warning and identification of evacuation route/ evacuation sites process Vulnerability capacity assessment of the 200 disaster prone communities 3.1.2 Preparation of 200 DP plan and its execution at a community level
	3.2 Capacity of communities is enhanced in order to reduce the impact of disasters.	3.2.1 Formation and mobilization of 200 additional DP Communities 3.2.2 Participation in livelihood and income generating initiatives 3.2.3 Participation in small scale structural and non-structural mitigation activities like rope bridge, plantation, river banking and dams, soil protection, retention walls etc as per needs in addition 60 communities 3.2.4 Participation in Awareness generating activities and 200 Simulation and drill exercises 3.2.5 Facilitation and participation in the establishment of emergency fund in 200 communities 3.2.6 Conduction of different trainings for communities people to develop the skills of the communities on DRR
	3.3 Adaptation to climate change is increased at a community level	3.3.1 Participation in the implementation CCRR interventions at a community.
	3.4 Climate change is integrated with on going relevant preparedness programs	3.4.1. Participation in climate change risk reduction initiative for adaptation and preparedness.

Specific objectives	Expected results	Activities
4. To further strengthen capacity of NRCS at different levels to deliver service effectively	<p>4.1 Response capacity of NRCS at different levels is improved</p> <p>4.2 The impact of disaster is reduced</p>	<p>4.1.1 Preparation of a pool of disaster management volunteers in all five regions and at least in 35 districts. Capacity building of 900 staff and volunteers</p> <p>4.2.1 Further strengthen DM center and Emergency Operation Centre (EOC) at NHQ</p> <p>4.2.2 Further strengthening VHF/ HF radio frequency network in NHQ</p> <p>4.2.3 Further strengthening warehouse management and stock piling</p> <p>4.2.4 Enhancing logistics facilities</p> <p>4.2.5 Reviewing the existing policy and guidelines, training curriculum and manual as well as development of the relevant ones as appropriate.</p> <p>4.2.6 10 lesson learned/review workshop</p> <p>4.2.7 Regularly updating and testing the contingency plan</p> <p>4.2.8 Facilitating the management of disaster fund at different level</p> <p>4.2.9 Developing three different types IEC Materials production and distribution</p> <p>4.2.10 Further strengthening the GIS/ Data base</p> <p>4.2.11 Gradually strengthening the communication set up to Regions and districts.</p>

E. Specific Implementation Strategies

On top of the implementation strategies mentioned in sub-section 4.1.6, following will be specific implementation strategies for this core area:

- Enhance existing Nepal Red Cross Society institutional capacity for better performance in disaster management.
- Expand communities' resilience activities.
- Promote coordination and collaboration to maximize Nepal Red Cross Societies input for risk management and prompt relief and recovery assistance to vulnerable and disaster affected communities

- Integration of community based DRR interventions to address multi-hazards
- Enhancement of knowledge sharing and advocacy at all levels for increased preparedness.
- Integration of HV, youth, gender and VM in the programmes
- Strengthening external and internal communication system
- Optimum mobilization of local resources.

F. Financial Outlay for Disaster management

Programme	Beneficiaries	Budget for three years (in NRs 000)
Disaster response Relief Program (number of persons)	180000	90,000
Recovery Program (number of persons)	36000	180,000
Disaster risk reduction CBDRR(number of persons in 200 communities)	84000	60,000
Institutional development (number of persons)	300900	5,000
Training(number of persons)	900	5,400
Population movement Life skills development program for Bhutanese refugees (number of persons)	525	9,400
Internally displaced people (number of persons)	18000	39,000
Total Budget		388,800

5.3 Health and Care

A. Background

Nepal Red Cross Society (NRCS) has been providing health services to the targeted people through promoting hygiene and sanitation, and generating awareness on immunization, nutrition, family planning, infectious diseases and First Aid skills etc. Emergency First Aid (EFA) programme in conflict-affected areas and health in emergency programme is also initiated. Similarly, NRCS has also been providing eye care service in outreach and hospital settings, ambulance service, HIV and AIDS prevention, care and support services, blood collection, screening and supply throughout the country. NRCS has been applying community based approach in implementing health and care activities like First Aid (FA), Water and Sanitation, Community Development Programme (CDP), Primary Health Care (PHC) etc. Following programmes have been implemented throughout the period:

Blood Transfusion is solely mandated to NRCS by the Government of Nepal. NRCS has been operating blood transfusion service throughout the country. Its major activities are motivation of blood donors, blood collection, screening and supply of safe blood to the needy. Total 58 centres in 41 districts, one central, 3 regional, 22 districts, 15 emergency and 17 hospital based blood transfusion centres are functional.

Ambulance Service is one of the vital services of NRCS. 58 District Chapters and 44 sub-chapters have been running the service with 140 vehicles from 127 stations.

NRCS has also been providing preventive and curative eye care services mainly in Janakpur and Bheri zones. A 100 bedded eye hospital in Janakpur serves as referral hospital for the adjoining districts of the region. Over 100,000 eye patients are treated and over 12,000 surgeries are carried out annually in the hospital. 15 community eye care centres are operational in the country at the district level together with extensive community outreach in the mid-western region which provides eye services to the additional 150,000 patients. Other primary health care components are also integrated with eye-care programme in mid-western region.

Other primary health care components are also integrated with eye care programme in mid-western region.

NRCS has been continuing its intervention in reproductive health through empowerment of youth and adolescents, health based literacy and family planning services in six districts of eastern region.

Community Development Programme primarily aims at building capacity of the vulnerable people through enhancing socio-economic status to improve health and livelihood. With a focus on people's participation, the programme has been expanded to 35 districts by the year 2007, benefiting over 450,000 people. Additional 4 districts are also reached in the mid-western region with a focus on the health promotion benefiting over 80,000 people through similar programme.

First Aid activities are run by the NRCS since its inception. The Community Based First Aid (CBFA) programme has been implemented in 21 districts since 1997 with a view to build capacities of communities to manage common health problems and disasters.

Emergency First Aid (EFA) programme was also initiated to provide prompt and effective first aid services in 28 conflict-affected districts. First aid teams are established to provide first aid services, rescue and evacuation support in time of emergency, internal violence, natural disasters and other emergencies. Similarly, First Aid Training Standardization (FATS) programme is being implemented in 30 districts since 2003 with an objective of updating and standardizing the existing first aid course curriculum, trainings and IEC materials.

Drinking Water and Sanitation Programme has been implemented since 1983 with the aim of reducing mortality and morbidity caused by waterborne diseases. Community based WAT-SAN programme has been implemented in 18 districts, however, the school based water and sanitation programme in 43 districts. Likewise, the school led total sanitation programme has been implemented in 120 schools of 6 districts. In order to address the existing traces of arsenic problem in the country, NRCS has taken initiation to determine the magnitude of the problem and rectify it in time. NRCS has conducted arsenic test in 19 districts and carried out mitigation measures in 10 districts with health survey and medical assistance so far.

Considering the situation of HIV and AIDS and its spreading trend and dynamics in the country, NRCS had started the HIV and AIDS Prevention programme in 1994.

The programme was launched in 54 districts so far with a focus on migrants and their spouses, young people in schools and community, PLHIV and other people at risk. Starting with awareness generation, the focus in the recent years has been shifted to the behavioural change, life skills promotion, and advocacy reducing stigma and discrimination as well as care and support for those who are infected and affected. NRCS has also developed a five-year strategic Plan (2004-2008) in line with National HIV and AIDS Strategy.

B. Achievements

- Standardization and institutionalization of first aid programme of NRCS
- Development and implementation of Health Policy 2005, Strategic Health Plan 2006-2010, HIV and AIDS strategy 2004 – 2008, Voluntary Counselling and Testing (VCT), policy revision and guideline of Blood Transfusion Centres (BTC), Drinking Water Policy (2003), First Aid Policy (2005), Community Development Policy & Procedure (2004), Self-help Policy (2006)
- Introduction of global alliance on HIV and operational alliance on CDP
- Safe blood further ensured introducing Standard Operation Procedure (SOP)
- Internal quality control/assurance including HIV, Hepatitis C and B, and Shiphylis introduced at all level
- Increased coordination, collaboration and statutory roles in National Arsenic Steering Committee, National AIDS Coordination Council, National Sanitation Steering Committee, Country Coordination Mechanism on HIV, Rain water harvesting initiative network etc.
- New programme introduced in this period such as Community Eye Care and Health Promotion Programme (CEHP), Community based HIV and AIDS Care and Support Project, Comprehensive package of HIV & AIDS Project, Arsenic test and mitigation
- Organizational image and acceptance enhanced due to increased coverage of programmes and services such as ambulance, first aid, eye care, blood, water and sanitation, community development, etc.

C. Capacity

NRCS has its network in 75 districts reaching up to grassroots level that possess basic physical facilities and volunteer force. It has also extensive network with internal and external partners and collaborators. National headquarters, district chapters and sub chapters are capable in managing some institutional as well as tailor made health and care projects/programmes by their own initiatives. NRCS has standardized and institutionalized the First Aid service network in 48 districts. Its Blood Transfusion centres, ambulance services and eye hospitals/centres are self sustained. NRCS has also established and standardised programme models, approaches and cooperation modalities.

NRCS has established a pool of trained volunteers at district and community levels and has got trained human resources to develop project proposals, resource tapping

and to provide technical and management support at all levels.

The programmes under Health and care contribute to **Global Agenda Goal 2:** Reduce the number of death, illness and impact from diseases and public health emergencies, and **Global Agenda Goal 3:** Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability¹

D Objectives, Expected Results and Activities of the Fifth Development Plan

General Objective: Improve health status of the vulnerable people.

Specific Objectives	Expected Results	Activities	
1. To ensure adequate supply of safe blood to the needy population	1.1 Voluntary non-remunerated blood donation (VNRBD) increased by 10% annually	1.1.1 Organization of 300 motivational training and workshops to educate blood donors including CLUB-25	
	1.2. Management capacity of Blood Transfusion centres improved and services expanded	1.2.1. Establishing and operating at least 6 additional blood transfusion centres based on need assessment.	
	1.3. Quality of Blood Transfusion service improved	1.3.1. Conducting 30 training, workshop and seminars on technical, logistic, ToT for volunteers and staff members at different levels	
	1.4. Blood donors' care and follow up systematized and strengthened	1.4.1. Developing and implementing blood transfusion service guidelines including bio-safety measures	
	1.5. Supply of safe blood and blood components maintained as per need		1.5.1 Introduction of tracing of positive cases with pre and post counselling
			1.5.2. Initiation of action towards development of effective legislation
1.5.3. Developing forecast system for requirement of blood and blood components to maintain collection, screening and supply			
1.6. Infrastructure of Central Blood Transfusion Service (CBTS) developed.	1.6.1. Initiating the construction of CBTS new infrastructure.		

¹ Achieving the ambitious goals set out in the Global Agenda will constitute the Federation's major contribution to the realization of the Millennium Development Goals <http://www.ifrc.org/Docs/pubs/who/fof-en.pdf>

Specific Objectives	Expected Results	Activities
2. To upgrade and expand ambulance service	<p>2.1 Ambulance vehicles with basic life saving facilities increased by 20% annually</p> <p>2.2 Ambulance coverage increased by 10% annually</p> <p>2.3 Sick and wounded people's access to ambulance service increased</p>	<p>2.1.1 Upgrading 75 ambulances to C grade (infusion set, oxygen cylinder, drivers with first aid training)</p> <p>2.2.1 Acquiring and operating additional 40 ambulances</p> <p>2.3.1 Conducting 15 training/workshops on ambulance management and first aid</p>
3. To strengthen and expand First Aid service nationwide	<p>3.1 Access to first aid services increased</p> <p>3.2 Communities are empowered for managing first aid services locally</p> <p>3.3 First aid training courses and services further standardized and sustained</p> <p>3.4 Capacity of NRCS units and its staff and volunteers further enhanced in delivering first aid services</p>	<p>3.1.1 Expanding coverage of community based first aid programme in additional 10 districts and Emergency First Aid in 23 districts</p> <p>3.2.1 Carrying out 150 national and district level advocacy and awareness campaigns on First Aid activities and service</p> <p>3.2.2 Developing curriculum of advance and school first aid training, review and update policy, manuals, and IEC materials of first aid</p> <p>3.3.1 Implementing standardized basic first aid training curricula in 18 districts.</p> <p>3.3.2 Marketing first aid training packages, kits and other materials</p> <p>3.3.3 Operationalizing commercial first aid - advocacy for mandate and authorization</p> <p>3.4.1 Providing different first aid and related management trainings to additional 3600 trainers and volunteers using the standard training curriculum</p>

Specific Objectives	Expected Results	Activities
4. Human sufferings in times of emergency minimized through the provision of basic emergency health services	4.1 Basic capacity to respond public health emergencies developed	4.1.1 Formation of response team at HQs and at regional level 4.1.2 Providing trainings to all response team members in emergency WatSan, environmental sanitation, psychological support, and orient on emerging diseases such as SARS, Bird Flu, etc. 4.1.3 Production and distribution of IEC materials to create awareness on emerging and life threatening disease such as bird flu, SARS, etc.
	4.2 Immediate basic emergency health services to the affected people provided	4.2.1 Establishing prompt response mechanism with trained human resources to provide safe blood, ambulance and first aid services during emergencies 4.2.2 Developing policy and guideline and pilot psychosocial support in 3 districts
	4.3 Psychosocial support and road safety measures introduced	4.3.1 Developing concept paper, proposals and implementation guideline for pilot road safety programme in accident prone 2 highway areas

Specific Objectives	Expected Results	Activities
5. To reduce incidence and prevalence of avoidable blindness	5.1 Access to preventive, promotive and curative eye care services increased	5.1.1 Expanding an eye hospital and 3 centres to reach more people 5.1.2 Expanding surgical services in 2 Community Eye Care Centres (CECC) and 20 outreach camps
	5.2 Awareness on preventive measure for blinding disease increased	5.2.1 Training /educating 385,951 people on preventive eye care through trainings, workshops, seminars, campaigns, IEC activities, etc. 5.2.2 Conducting hospital, CECCs and outreach activities to identify, screen, treat and refer blinding eye diseases with emphasis to childhood blindness for 600,000 people
	5.3 Level of self-reliance of the eye hospital and centres increased	5.3.1 Maintaining income generation (optical and pharmacy) activities in hospital and all CECCs and introduce service diversification (speciality) to achieve self-reliance of hospital and CECCs.
6. To increase access to Reproductive information and services with focus on Family Planning	6.1 Practice on Reproductive Health (RH) improved	6.1.1 Providing information and education to use appropriate family planning methods to eligible married couples.
	6.2 Increased participation of women in decision-making on RH issues	6.2.1 Promoting use of clean home delivery kits for safe delivery and increase access to ANC/PNC and Emergency Obstetric Care (EOC) in appropriate facilities.
	6.3 Safer motherhood awareness and practice improved	6.3.1 Conducting and/or supporting campaigns on safe motherhood, maternal and child care, vitamin A capsule supplementation and others.
	6.4 Enabling environment created to promote RH	6.4.1 Mobilizing networks and groups to promote enabling environment to discuss and make informed decision on RH.
	6.5 Maternal and child morbidity reduced through the increased use of family planning services	6.5.1 Organizing /leading National Condom day and similar relevant events

Specific Objectives	Expected Results	Activities
7. To reduce vulnerability to HIV and its impact	7.1 HIV infection further prevented	7.1.1 Expanding HIV programme to additional 16 districts
		7.1.2 Reaching 420,000 people by peer education and IEC programme
		7.1.3 Referring 51000 people to VCT services
		7.1.4 Providing support to 600 PLHIV
		7.1.5 Providing NRCS services to 500 Orphan and Vulnerable Children (OVC) clients
	7.2 Treatment, care and support services expanded	7.2.1 Providing treatment referral services to 500 persons
		7.2.2 Providing support to 300 school age OVCs to attend school
		7.2.3 Providing livelihood support to 300 treatment clients and OVC
		7.2.4 Establishing provision for home and community based care for 600 persons
		7.2.5 Establishing 50 community support groups
	7.3 Stigma and discrimination on HIV and AIDS reduced	7.3.1 Organising stigma and discrimination campaign reaching 450,000 people

Specific Objectives	Expected Results	Activities
8. To reduce socio-economic vulnerability of the targeted communities and increase their self reliance	8.1 Level of awareness on health and hygiene increased and practiced.	8.1.1 Expanding community development programme in additional 10 districts 8.1.2 Creating awareness on health and hygiene through motivational activities and IEC interventions to 174,000 people
	8.2 Prevalence of water borne and other communicable diseases reduced	8.2.1 Providing education and assistance for the installation of basic sanitary units and potable drinking water to 113,500 people (19,050 households)
	8.3 Sustainable livelihood activities established focusing on women and marginalized groups	8.3.1 Conducting 120 non-formal education classes for women and children
	8.4 Participation of women and marginalized groups (especially in decision-making process) in community organizations and NRCS at all levels is increased	8.4.1 Motivating women and marginalized groups to enrol in self-help groups and start saving and credit through 90 additional self-help groups
	8.5 The capacity of community organizations / groups enhanced in mobilizing and utilizing diversified resources for sustenance and further development	8.5.1 Creating awareness the community on gender mainstreaming, social inclusion, women rights through advocacy campaign, motivational activities and IEC/audio visual interventions to 174,000 people
	8.6 The capacity of NRCS at all level is enhanced in participatory planning, management, sustenance and replication of programmes for delivering quality services to the beneficiaries	8.6.1 Conducting 720 training courses for community people and community organizations/groups on leadership development, gender, humanitarian value project management, participatory rural appraisal and in various skill development, as needed 8.6.2 Promoting institutional capacities of local Red Cross units and communities for resources generation, self-reliance, replication and continuity. 8.6.3 Establishing strong network among the organization for regular coordination, collaboration and partnering

Specific Objectives	Expected Results	Activities
9. To reduce the incident of water borne and communicable diseases	9.1 Access to potable water and sanitation increased	9.1.1 Installing and providing potable water and sanitation facilities to educational institutions and communities.
	9.2 The effects of bacterial and arsenic contamination reduced	9.2.1 Expanding school and community based water and sanitation programme to additional 12 districts 9.2.2 Providing sanitation and health education as well as promote positive health behaviour among students and communities through IEC intervention 9.2.3 Training concerned community people and school children together with NRCS volunteers and staff on water and sanitation, management and leadership and other life skill based trainings
	9.3 Technical and management capacity of Red Cross Units and communities enhanced	9.3.1 Carrying out water quality test and other Point of Use treatment (PoU) interventions and perform necessary mitigation measures

E. Implementation Strategies

On top of the implementation strategies mentioned in sub-section 4.1.6, following will be specific implementation strategies for this core area:

- Programmes of institutional nature will be carried on regular basis: Blood/FA/Ambulance/eye care and community based programmes
- Organizational/Institutional development will be integrated as a cross-cutting
- Establishment and mobilization of basket fund for monitoring, evaluation and follow up of the phased out health programmes.
- Programme modality of health and care may be different according to its nature, type and organizational levels
- Coordination, collaboration and networking with other relevant organizations and agencies shall be incorporated as integral component of health and care at all levels
- Multiple health activities under the core area of health and care shall be implemented in coordination with the concerned focal units.

- Community participation and resource generation for self reliance and sustainability shall be promoted at all levels
- Quality assurance shall be ensured in all health activities in general and technical health services in particular.
- Holistic/integrated approaches shall be adopted for the implementation of health and other community based developmental activities
- Local Red Cross units and communities will be encouraged to replicate the activities in other geographical areas.
- Integration of HV, youth, gender and VM in the programmes
- Strengthening communication system internally and externally
- Increased mobilization of local resources.

F. Financial Outlay for Health and Care

Programme	Beneficiaries	Budget (in NRs 000)
Blood Programme (number of persons)	500,000	250,000
Ambulance Service number of persons(number of persons)	109000	51,000
First Aid Programme(number of persons)	72500	44,000
Emergency Health Service(number of persons)	181000	22,300
Eye Care and Health promotion(number of persons)	825000	172,600
Reproductive Health Programme(number of persons)	110000	81,500
HIV Programme number of persons)	1,000000	337,600
Community Development Programme (number of persons)	124000	190,000
Water and Sanitation Programme	390500	179,500
Total		1,328,500

* Beneficiaries and budget figures represents the plan for next 3 years (2008-2010)

5.4 Organizational Development (OD)

A. Background

Nepal Red Cross Society has undertaken efforts to strengthen all levels of its organization, management systems and programs. The purpose of OD is to strengthen organizational and management capacity of NRCS as a well functioning National Society to better respond to vulnerability. OD is a built-in component of all NRCS programs.

The NRCS has strong commitment to follow national and international commitments and resolutions through the mobilization of its nationwide network and volunteers. The OD component covers legal base, institutional development, capacity building, and human resource management - youth, gender, volunteers and staff, communication, networking and financial resource management.

B. Achievements

- NRCS has gained an image of an organization of democratic practice for the formation of its governance.
- OD components have been integrated in all programmes of NRCS for institutional consideration.
- All districts have RC chapters and many communities have sub-chapters to deliver services.
- NRCS has more than a million members and thousands of volunteers including more than one third of women members
- NRCS has developed human resource management plan and establishment of human resource development institute is in process. A good number of skilled human resources have been developed for core programme areas.
- Volunteer management policy, and directives have been developed and VM programmes are introduced in some of the districts.
- Junior and Youth Red Cross have been developed as a strong wing of NRCS at educational institutions and communities to develop as a future leadership and to reach to the vulnerable people.
- Gender has been prioritized; policies and manual developed for building capacity and increasing women involvement in organization and programmes.
- Basic communication system has been developed at the headquarters and district chapters.
- NRCS has regular income for general activities and a system has been developed for mobilizing resources in emergencies. Special funds have been developed for specific purpose.

C. Capacity

NRCS has a standard constitution and it has endorsed periodic development plans, CAS, policies, manuals and guidelines for proper system and procedures. The headquarters and almost all the district chapters and some sub-chapters have their own office buildings to carry out basic organizational activities.

NRCS has 75 district chapters, 1344 sub-chapters including cooperation committee and 4343 junior and youth circles. It has 980,172 members including junior youth. The society has trained volunteers in disaster response, first aid, blood donation, mine risk, eye care, dissemination of FP, HV, IHL, community development.

Uniformed system and basic infrastructure for internal and external communication is in place at the headquarters and many district chapters. The headquarters and some district chapters have capacity to develop partnership and mobilize resources.

D. Objectives, Expected Results and Activities

10. General Objective: Further develop and strengthen organizational and management capacity of NRCS as a well functioning national society.

Specific Objectives	Expected Results	Activities
1.To further develop and strengthen institutional capacity at all levels.	1.1 Existing policies reviewed, updated and revised as needed	1.1.1 District and subchapter manual development and central level policy revision including J/YRC policy- 1time
	1.2 Leadership capacity of governance enhanced at different levels	1.2.1 OD orientation and leadership training to leaders of HQ,DC,SC, JRC and YRC- 20 sessions
	1.3 Number of members, sub-chapters and circles including women, junior and youth increased by 10%	1.3.1 Membership campaign program- 225 events
		1.3.2 RC dissemination, development and distribution of IEC materials - 2,500,000 pcs
	1.4 Gender sensitised at all level	1.4.1 Gender sensitization workshops and trainings at different level - 10 times
		1.4.2 Formation of women development committees in 15 new chapters and 30 sub chapters
		1.4.3 Development of at least 2 gender resource persons in each districts and 1 advocate in each SC
	1.5 At least 10 district chapters development plan formulated and SDP is followed by all DCs	1.5.1 Dissemination of SDP in 5 regions and Plan development workshops in 10 DCs -15 times
		1.5.2 Implementation of development plan
	1.6 PMER system developed and strengthened at all levels	1.6.1 Mechanism developed for improving accountability and transparency
		1.6.2 Development of well functioning district chapter evaluation frame work and standard system for performance evaluation
		1.6.3 Reporting training and development of monitoring framework
		1.6.4 Meetings/review meetings of CEC and central committees-18 times
		1.6.5 Set up comprehensive MIS, infrastructure development and data base training to communication focal person
		1.6.6 Defining and inducting role and responsibility of DC level sub committee through dissemination workshop-3 times
		1.7 Documented NRCS History
	1.8 RC law development process facilitated	1.8.1 Interactions and advocacy at government level through meetings-5 times
	1.9 Communication system improved	1.9.1 Development of focal point for external communication at headquarters and district chapters
		1.9.2 Dissemination and implementation of communication strategy and training to focal persons/OP cell in the DCs-5 sessions

Specific Objectives	Expected Results	Activities	
2. To strengthen managerial capacity at all levels.	2.1 Existing policies reviewed, updated and revised as needed	2.1.1 Revision, printing and dissemination of staff and financial regulation and others as per need	
	2.2 Capacity of volunteers and executive members of district chapters and sub chapters enhanced	2.2.1 Organization of project and general management, resource, disaster response, communication, HV and FA trainings-84 sessions	
	2.3 Capacity of JRC/RCY volunteers and executive members enhanced	2.3.1 Organisation of trainings, workshops, conference, camps, competitions, exposure visits on first aid, DM and HV for Junior/ Youth -30 times	
	2.4 Cross cutting issues are integrated.	2.4.1 Integration of Gender, HV and VM in health, junior and youth development, disaster management and community development programmes	
	2.5 Volunteer management program expanded to 40 district chapters.		2.5.1 Organization of OD and VM training to programme managers and DC/ SC etc. 30 sessions
			2.5.2 Mobilization of volunteers like RCAT/ DDRT/NDRT/FA etc. into the programmes
			2.5.3 Volunteer management training to RCAT/ DDRT/ NDRT/First Aid / programme volunteers - 20
			2.5.4 VMIS set up, recruitment, classification, training , Insurance and mobilisation -6
2.6 HRDI secretariat established and strengthened and project developed for HR management and HRDI implemented.		2.6.1 Establishment of HRDM secretariat and develop ToR	
		2.6.2 Infrastructure development	
		2.6.3 Development of project document for HRDI	
		2.6.4 Implementation of HRDI	
2.7 Enhanced program management capacity of staff at different level.		2.7.1 Organisation of project management, reporting and communication training -15	
2.8 Communication and information system of NRCS improved		2.8.1 Development and practice of e-newsletter for internal communication-36 issues	
		2.8.2 Information and communication practices through print and electronic media-50	
		2.8.3 Launching a communication campaign through different Media- 61	
3.To collaborate with the government, local authority and other agencies for humanitarian works	3.1 Communication with external audience improved	3.1.1 Partnership meetings - 3 times 3.1.2 Development appeals - 3 times	
	3.2 Partnership increased and strengthened at local, national and international level.	3.2.1 Publications and distribution of Nepali and English newsletters-48 issues 3.2.2 Joint planning, monitoring and evaluation	
	3.3 network developed among likeminded organizations	3.3.1 Updating website 36 times, DMIS, situation reports	

Specific Objectives	Expected Results	Activities
4. To strengthen financial management system and diversify financial resources of NRCS.	4.1 Sound financial system, policies and guidelines in place and integrity, financial discipline and transparency maintained at all levels	4.1.1 Development of relevant policies and guidelines, review existing financial management systems and making necessary improvements-3 times
	4.2 Sufficient human resources are mobilized and financial resources increased	4.2.1 Development of human resources at different levels through training/workshops and mobilizing them for financial resource generation-5 sessions
	4.3 Resources are generated at all levels and implemented	4.3.1 Preparation of inventory of all NRCS properties, exploration of alternative mobilization of existing properties and implementation of RM programmes 4.3.2 Mobilisation of local and international financial resources and fixed assets

E. Implementation Strategies:

On the top of the implementation strategies mentioned in sub-section 4.1.6, following will be specific implementation strategies for this core area:

1. Organisational Development Component shall be integrated as one of the crosscutting issues in all programmes of NRCS.
2. All the organisational units shall be encouraged to adhere to the policies, guidelines, mandates and norms of the organisation and that all activities shall be carried out based on fundamental principles of Red Cross.
3. Organisational Development Programmes shall be implemented in accordance with the standard national policies and guidelines. However, organisational units may develop appropriate regulations, guidelines and working procedures without deviating from the national policies.
4. Networking with relevant organisational units, establishment of better systems of linkages, partnership and coordination with internal and external agencies shall be further strengthened as inevitable strategic components of the programme.
5. All efforts will be made to ensure that all organisational units and Red Cross volunteers at all levels shall abide by and promote fundamental principles, respect diversity in the community in their action and behaviour and, thus, hold the image of Red Cross in high esteem.
6. Decentralization of all types of activities with appropriate delegation of mandates, responsibilities and ownership for expansion, self-sustenance and replication of the activities.
7. All efforts will be made for resource diversification, mobilisation of resources, and improvement of financial management system as well as high level of financial discipline, integrity and transparency.
8. HRM secretariat will be established and its capacity will be enhanced for improving existing HR system and implementation of HRDI as a semi - autonomous body.

9. Communication strategy will be implemented through dissemination and training to office bearers and program managers at all level.

F. Financial Outlay for Organizational Development

Programme	Beneficiaries/target audience	Budget (in NRs 000)
Organisation development and Capacity building (number of persons)	117,000	11,615
Volunteer Management (number of persons)	14,000	11,900
Gender Development (number of persons)	19,000	8,600
HRM (number of persons)	19,000	135,000
JRC/RCY (number of persons)	116,000	10,200
Resource Mobilisation (number of persons)	31,000	25,000
Communication and networking (number of persons)	440,000	12,300
TOTAL in numbers	756,000	214,615

MANAGEMENT SUPPORT SERVICES AND TOTAL OUTLAY OF THE PLAN

6.1 Management Support Services

In order to achieve the objectives of the core areas or sectors, NRCS has planned a strategic management mechanism in the form of Management Support Service Department. This has been decided with the objective to ensure that core activities of the organization are conducted in efficient and effective manner to address felt needs of the vulnerable people. Management Support Service Department coordinates and provides policy level guidance and support for standardization, consistency and quality development of activities under all core areas. Several relevant sub-units/sections/mechanisms will be either established or integrated to ensure required efficiency and effectiveness of this mechanism. This is to ensure effective service delivery capacity of the secretariat at large.

Based on the felt needs for institutionalization of key support services for further strengthening capacities of NRCS as a well-functioning NS as well as for better functioning of the service departments and underpinning of the efforts to deliver quality services, this Department is to be established. Furthermore, it will ensure better coordination among all the Departments and Service Unit, consistency in approaches and well directed communication with external partners in line with the overall NRCS strategy.

Management Support Service Department will have direct link and continuous lateral relationship with them for policy level and technical consistency as well as to monitor, coordinate and quality development.

Following grouping of the support service functions are to be managed strategically to strengthen support in the achievement of the overall Plan of NRCS.

6.1.1 Functional Areas of Management Support Service Department

General Administration and Management

All related general administration and management functions are grouped together and relevant functions will be carried out through a coordinated mechanism. Appropriate administrative set up will be established for this purpose.

This component will include several functions along with the including management of infrastructure, especially offices and the office buildings within the premises at

the National Headquarters. This component will cover these functions: Inventory Management, Central store, house-keeping and utility services (Governance and other statutory meetings, IT, Logistics (Fleet, warehouse, procurement), physical infrastructure management etc), water supply, electricity, security, gardening, canteen management, travel and ticketing, Library/Resource Centre Management).

Personnel Administration

This unit will deal with the total management of personnel, such as recruitment, induction, recording and documentation, promotion, facilities and appraisal. It will guide, support and /or coordinate personnel management of all programs including those of the projects and programme units. While performing the above tasks, it will maintain close coordination with the HRM department for qualitative and procedural consistency.

Legal and Statutory Affairs

In view of continuous needs to be involved in clarifying, defining and advising on the internal constitutional matters as well as in dealing with legal issues and cases externally, Legal and Statutory Affairs unit will be established as one of the components of the Support Service Department. This unit will also deal with Red Cross movement principles, conventions, International Humanitarian Laws and movement statutes.

Planning, Monitoring, Evaluation and Reporting (PMER)

NRCS recognizes the importance of streamlining, coordinating and strengthening PMER functions for better image and accountability of the Society. Therefore this component will be responsible for developing overall Planning, Monitoring and Evaluation Framework for NRCS as a whole. Acting under Support Service Management Department PMER component will function as the coordinating and the focal mechanism of all NRCS programmes. A reporting focal mechanism will also be established that will ensure collection, coordination and quality of the report. It will also support different Departments in improving their reporting system. This component will be responsible for developing/supporting in the development and/or of Management Information System to increase organizational efficiency.

External/International Relationships

NRCS will develop appropriate mechanism to streamline external/international communications/relationships. This will ensure coordinated communication and strengthened strategic relationships. This includes communication/networking with the Movement partners, Non-Movement partners and other relevant stakeholders both in-country and abroad to maintain organizational relationship, strengthen partnership, ensure consistency and adequate coordination and one-door mechanism.

Communication, Marketing and Advocacy

Communication, marketing and advocacy will be administered by separate departments in close coordination with the Management Support mechanism and relevant

departments. NRCS already has a separate structure for these. Current Communication and Humanitarian Values Department will be responsible for coordination and streamlining of contents of publication through different Departments, publication of the NRCS literatures, media relationships/management, preparing press communiqués, NRCS' events management, and representation of NRCS in appropriate forums for increased marketing and advocacy of the organization.

Human Resource Management

With the objective of strengthening HRM, NRCS will analyze and duly tailor the study report already produced by study team namely, a report on Human Resource Development Strategy and Management Plan. NRCS is in the process of implementing the Plan having it tailored to suit the policy, procedures and strategy of NRCS. With a high priority to on the issues of HRM, NRCS has already formed a committee at a central level to be assisted by HRM Department. A mechanism will be in place that ensures coordination between this department and the personnel administration unit for effective HR planning and management. This department will be more responsible for HR policy development, appropriate guideline formulation and ensuring effective implementation and use of them. In addition, the department will be responsible for supporting the NRCS management in the gradual implementation of HRM study and Management Plan. Likewise, it will work for the establishment of human resource development institute

Finance and Resource Management

The Finance and Resource Management Department will be administered by separate department in close coordination with the Management Support mechanism and relevant Departments will be responsible not only for accounting but also for resource mobilization that includes resource generation, utilization and appropriate management. Therefore, these structures will be continued but functions will be continued in conformity with the adequate support to others by these structures. Some of the above management support functions are already in existence but are not in the integrated manner. NRCS will act to create a new set up and integrate such functions and bring some of the above management functions under one umbrella of the Management Support Service Department.

All of the above functions are separate functions and are the key tasks that will support to achieve the objectives of the core areas. Therefore, they are the integral part of the overall core areas. Efficient functions of these ensure the achievement of the objectives of the core areas and also the organizational efficiency and effectiveness.

6.1.2 Budget Proposed for Management Support Services

The budget estimated for carrying out the proposed management support services is

presented in the following table:

Financial Outlay for Management Support Services

Programme	Budget (in NRs 000)
Legal and Statutory Affairs	4,500
Human Resource Management and Personnel Administration	3,000
General Administration/Mgmt	21,000
PMER	3,000
External/International Relationship	2,100
Communication, Marketing, Advocacy	6,000
Total	39,600

6.1.3 Implementation Strategies of Management Support Services

Management Support Service Department is to be made functional under the following implementation strategies.

- Management Support Service Department will carry out coordinating functions and will provide overall support for the functioning of core areas.
- Management Support Services/functions will be made operational and will function on cost sharing basis.
- Management Support Functions will be brought physically together as far as possible.
- Adequate coordination, collaboration, sharing and support will be ensured between the core areas and the Support Service functions to promote efficiency and effectiveness.
- Independently working departments like 1. Communication/Marketing and Advocacy, 2. Finance and Resource Management and 3. Human Resource Management will work in close coordination with this department.

6.2 Financial Outlay of the Development Plan

The total outlay of the Plan is envisaged based on the activities that have been planned for the Plan period. The Financial Plan has been made with the possibilities of resources mobilization and the implementation capacity of NRCS at sub-chapters, districts and the headquarters. The summary of financial outlay for the Fifth Development Plan regarding core programme areas and management support services is presented in the

following table.

Financial Outlay for Core Areas and Management Support Areas 2008-2010

Programme	Beneficiaries/ target audience	Budget (in NRs 000)
Promotion of FP and HV	2,332,750	7,500
Disaster Management	6,20,325	388,800
Health and Care	3,312,000	1,328,500
Organizational Development	755,000	214,615
Sub Total	-	1,939,415
Management Support Areas		39,600
Total		1,975,015

The annual program budget will be prepared basing on the activities identified to achieve the expected results presented in the matrices developed for each core area. The annual budget will be reviewed at the end of the year. Based on the achievements of the current year and the perspectives taken in the three year Development Plan. The annual program and budget will be planned, implemented and revised duely.

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www.redcross.bg – Bulgarian Red Cross

www.redcross.org – American Red Cross

www.redcross.org.kh – Cambodian Red Cross

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Mr. Shashi Panthi	Vice Chairman
Mr. Binod Kumar Sharma	Vice Chairman
Mrs. Indira Jaisi	Vice Chairman
Mr. Ajit Kumar Sharma	Vice Chairman
Mr. Dev Ratna Dhakhwa	Secretary General
Mr. Bhakta Khawas	Treasurer
Mr. Sudarshan Prasad Nepal	Deputy Secretary General
Mr. Saput Bahadur Karki	Deputy Treasurer and Chairman, Community Development Committee
Mr. Hari Neupane	Chairman, Disaster Management Committee
Mr. Lalit Jung Shahi	Chairman, Health Service Committee
Dr. Bishwakeshar Maskey	Chairman, Communication and HV Promotion Committee
Mr. Hem Raj Ojha	Chairman, Human Resource Management Committee
Mr. Shyam Kumar Pokhrel	Chairman, Organization Development Committee
Mr. Devendra Bahadur Pradhan	Chairman, Junior-Youth Committee
Mr. Parshu Ram Giri	Chairman, Finance and Resource Management Committee
Mrs. Sarala Kayastha	Chairman, Women Development Committee
Dr. Gaurishanker Lal Das	Chairman, Blood Transfusion Management Committee

PARTICIPANTS IN PLANNING PROCESS

Participants List:

S.N.	Name	Designation
1.	Mr. Sanjeev Thapa	Chairman
2.	Mr. Hari Niraula	Vice Chairman
3.	Mr. Shashi Panthi	Vice Chairman
4.	Mr. Binod Kumar Sharma	Vice Chairman
5.	Mrs. Indira Jaisi	Vice Chairman
6.	Mr. Ajit Kumar Sharma	Vice Chairman
7.	Mr. Dev Ratna Dhakhwa	Secretary General
8.	Mr. Bhakta Khawas	Treasurer
9.	Mr. Sudarshan Prasad Nepal	Deputy Secretary General
10.	Mr. Saput Bahadur Karki	Deputy Treasurer
11.	Mr. Hari Neupane	President, Disaster Management Committee
12.	Mr. Lalit Jung Shahi	President, Health Service Committee
13.	Dr. Bishwakeshar Maskey	President, Dissemination and HV Promotion Committee
14.	Mr. Hem Raj Ojha	President, Human Resource Management Committee
15.	Mr. Shyam Kumar Pokhrel	President, Organization Development Committee
16.	Mr. Devendra Bahadur Pradhan	President, Junior-Youth Committee
17.	Mr. Parshu Ram Giri	President, Finance and Resource Management Committee
18.	Mrs. Sarala Kayastha	President, Women Development Committee
19.	Dr. Gaurishanker Lal Das	President, Blood Transfusion Management Committee
20.	Mr. Indra Phyuul	CEC Member
21.	Mr. Tom Prasad Acharya	CEC Member
22.	Mr. Bhim Dutta Pandey	CEC Member
23.	Mr. Udaya Kumar Regmi	CEC Member
24.	Mr. Ram Prasad Mainali	CEC Member
25.	Mr. Sanat Kumar Karki	CEC Member
26.	Ms. Narbada Sharma Khanal	CEC Member
27.	Mr. Mahamad Majurul Hak	CEC Member
28.	Mr. Shyam Kumar Shrestha	CEC Member
29.	Mr. Naul Singh Pun	CEC Member
30.	Mr. Shiva Kumar Basnet	CEC Member (Representative from Social Welfare Council)
31.	Mr. Ramesh Kumar Sharma	Immediate Past Chairman
32.	Mr. Kulmani Acharya,	President, NRCS Sindhuli
33.	Mr. Bishnu Raj Nepal	President, NRCS Nuwakot
34.	Mr. Hari Prasad Baral	President, NRCS Kaski
35.	Mr. Bishwanath Regmi	President, NRCS Baglung
36.	Mr. Subodha Kumar Shingh	Secretary, NRCS Morang
37.	Mr. Shiva Prasad Dhungana	Secretary, NRCS Terhathum

S.N.	Name	Designation
38.	Mr. Brikesh Singh Bogati	President, NRCS Achham
39.	Mr. Shambhu Prasad Pokhrel	President, NRCS Arghakhanchi
40.	Mr. Krishna Prasad Neupane	President, NRCS Panchthar
41.	Mr. Raj Dev Yadav	President, NRCS Siraha
42.	Mr. Purna Maya Maharjan	President, NRCS Palpa
43.	Mr. Amrit Adhikari	President, NRCS Dhading
44.	Mr. Hari Kumar Shrestha	Vice President, NRCS Mayagdi
45.	Mr. Baburaja Maharjan	Secretary, NRCS Lalitpur
46.	Mr. Shyam Sundar Shrestha	Secretary, NRCS Kavre
47.	Mr. Lal Bahadur Thapa	Secretary, NRCS Makawanpur
48.	Mr. Umesh Prasad Dhakal	Executive Director
49.	Mr. Pushpa Raj Paudel	Director, Operation Cell
50.	Mr. Karuna Shrestha	Director, Health Department
51.	Mr. Indra Bahadur KC	Director, Finance Department
52.	Mr. Mukesh Singh	Director, Community Development Department
53.	Mr. Indra Adhikari	Director, Communication and HV Department
54.	Mr. Dr. Manita Rajkarnikar	Director, Blood Transfusion Center
55.	Mr. Sanjeev Kafle	Director, Disaster Management Department
56.	Mr. Padham Khadka	Director, Water and Sanitation Program
57.	Mr. Bishnu Hari Devkota	Director, Junior Youth Department
58.	Mr. Mukti Pokhrel	Deputy. Director, Junior Youth Department
59.	Mr. Shiva Acharya	Deputy. Director, PMER Unit
60.	Mr. Bijay Dahal	Dy. Director, Disaster Management Department
61.	Mr. Sudarshan Adhikari	Dy. Director, Organization Development
62.	Mr. Dibya Raj Paudel	Senior Officer, Communication and HV Department
63.	Mr. Nirmal Adhikari	Senior Officer, Communication and HV Department
64.	Mr. Ramesh Paudel	Officer, Organization Development, Department
65.	Mr. Narendra Shrestha	PR Officer, Communication and HV Department
66.	Mr. Yogendra Tuladhar	Account Officer, Finance Department
67.	Ms. Pushpa Khanal	Radio Coordinator, Communication and HV Department

Dr. Parthibeshwar Timilsina	Consultant
Mr. Dipendra Panta	Assistant

Mr. Jorgen Haraldsson	Danish Red Cross
Mr. Kris Binon	Belgian Red Cross – Flanders
Mr. Aziz Syed	Cooperation Delegate, ICRC
Ms. Andrea Reisenger	Federation Representative
Mr. Kamal Baral	Liaison Officer (Swiss RC)

GLOSSARY

Accountability: Obligation to demonstrate that work has been conducted in compliance with agreed rules and standards or to report fairly and accurately on performance results, vis a vis mandated roles and/or plans. This may require a careful, even legally defensible, demonstration that the work is consistent with the contract terms. **Note:** Accountability in development may refer to the obligations of partners to act according to clearly defined responsibilities, roles and performance expectations, often with respect to the prudent use of resources. For evaluators, it connotes the responsibility to provide accurate, fair and credible monitoring reports and performance assessments.

Action Plan: A detailed statement of specific steps to be taken in the implementation of a strategy.

Activity: Is the specific piece of work to be undertaken within a project in the short term in order to achieve the objectives set for the overall program of work.

Appraisal: An overall assessment of the relevance, feasibility and potential sustainability of an International Federation and National Societies operation prior to approval for implementation..

Assumption: Important events, conditions, or situation, which are necessary for, project success, but which are largely or completely beyond the control of the project management. Hypotheses about factors or risks which are largely outside the control of those responsible for the International Federation and National Societies operation, and which could affect its progress or success.

Audit: An objective and systematic review of the activities, systems, procedures, transactions and controls of an organisation, which is carried out in accordance with generally accepted common auditing standards. **Note:** An audit provides feedback and recommendations to the management of an organisation in respect of: the effective management of the organisation and the economic use (cost effectiveness) of resources; the soundness, adequacy and application of the financial and operational systems, procedures and internal controls; the compliance of financial transactions and other procedures with established rules, regulations and instructions; the regularity of the receipts, custody, expenditure, accounting and reporting of the resources of the organisation; and the conformity of expenditure with the purpose for which the funds were authorized.

Base-line study: The analysis and description of the situation prior to the start of an International Federation and National Societies' operations, against which change can be

assessed or comparisons made. **Note:** The data collected should be disaggregated by sex, age and other relevant variables. See "disaggregated data".

Benchmark: Reference point or standard against which performances or achievements can be assessed.

Beneficiary contact monitoring: A systematic investigation to monitor the beneficiaries' perceptions of an International Federation and National Societies operation. **Note:** A representative range of beneficiaries should be contacted (identified by sex, age or other relevant characteristics).

Capacity building: Is used to integrate two distinct but interrelated concepts: i) improving the ability and capacity of National Red Cross and Red Crescent Societies to develop and make the most efficient use of new or available resources to achieve the humanitarian aims of the Movement in a sustainable way; and ii) improving the ability and capacity of communities, families and individuals to become less vulnerable and enjoy fuller and more productive lives.

Case Study: An intensive and detailed analysis and description of an event, program, situation, condition or organization in the context of its environment.

Checklist: A specially-constructed list which allows a check to be made of the contents which are listed.

Community: A group of people living in the same locality and sharing some common characteristics

Community Participation: The active participation of the community in the developmental activities.

Conclusion: A conclusion draws on data collected and analyses undertaken, through a transparent chain of arguments. Conclusions point out the factors of success and failure of an operation, with special attention paid to the intended and unintended results, and more generally with regard to any other strength or weakness.

Development: Development is a process of positive change in certain condition.

Effect: It is the responses or improvements in certain system or condition by target population. Intended or unintended change directly or indirectly due to an International Federation and National Societies operation. These changes (results) can be at the output, outcome and/or impact levels.

Effectiveness: The extent to which the operation's objectives were achieved, or expected to be achieved, taking into account their relative importance.

Efficiency: A measure of how economical inputs are converted to outputs. The state or quality of being useful and productive in relation to certain objectives.

Evaluation, ex-post: The evaluation of an operation after it has been completed. **Note:** It may be undertaken directly after or long after completion. The intention is to understand the factors of success or failure, to assess the sustainability of results and impacts, and to draw conclusions that may inform other International Federation and National Societies operations.

Evaluation, external: The evaluation of an operation conducted by entities and/or individuals outside International Federation and National Societies and its implementing partners.

Evaluation, formative: The evaluation intended to improve performance, most often conducted during the implementation of an operation.

Evaluation, independent: An evaluation carried out by entities and persons free of control by those responsible for the design and implementation of the International Federation and National Societies operation.

Evaluation, internal: The evaluation of an operation conducted by a unit and/or individuals reporting to International Federation and National Societies management.

Evaluation, joint: An evaluation in which different partners and/or donor agencies participate. **Note:** There are various degrees of “jointness” depending on the extent to which individual partners cooperate in the evaluation process, merge their evaluation resources and combine their evaluation reporting. Joint evaluations can help overcome attribution problems in assessing the effectiveness of programs and strategies, the complementarity of efforts supported by different partners, the quality of aid co-ordination, etc.

Evaluation, meta-: An evaluation designed to aggregate findings from a series of evaluations. The term can also be used to denote the evaluation of an evaluation to judge its quality and/or assess the performance of the evaluators.

Evaluation, mid-term: An evaluation performed towards the middle of the period of implementation of an International Federation and National Societies operation.

Evaluation, participatory: An evaluation in which key stakeholders (including beneficiaries) work together in designing, carrying out and interpreting an evaluation.

Evaluation, portfolio: An evaluation of a set of related International Federation and National Societies operations. **Note:** In International Federation and National Societies, a portfolio includes all operations in a given country or region.

Evaluation, self-: An evaluation planned and managed by those who are entrusted with the design and delivery of an International Federation and National Societies operation. **Note:** In International Federation and National Societies, this is an internal, reflective learning exercise undertaken by country delegation staff and stakeholders, and possibly facilitated by a consultant.

Evaluation, summative: An evaluation conducted at the end of an International Federation and National Societies operation (or a phase thereof) to determine the extent to which the planned results were produced. A summative evaluation is intended to provide information about the value of the operation.

Evaluation: The systematic and objective assessment of an on-going or completed operation, programme or policy, its design, implementation and results. An independent and careful examination and analysis of an on going or completed project to determine its relevancy, efficiency, effectiveness, impact and sustainability, with a view to draw lessons that may be more widely applicable.

Feasibility Study: A detailed and technically oriented study following the identification or pre-feasibility stage in the project cycle.

Feedback: The transmission of findings generated through the monitoring and evaluation process to parties for whom it is relevant and useful so as to facilitate learning. This may involve the collection and dissemination of findings, conclusions, recommendations and lessons from experience.

Final Evaluation: This is an evaluation that occurs at or near the end of the project in order to examine the effects and impacts of the project.

Focus group: A small, homogeneous group formed to discuss open-ended questions about a certain topic. Focus group respondents are encouraged to talk among themselves so that a discussion unfolds among the participants rather than between the evaluator/researchers and the respondents.

Gender Analysis: The gender analysis explains different roles, needs and participation of men and women and impact of program on men and women and gender relation.

Goal: The highest-level result to which an International Federation and National Societies operation is intended to contribute. It is measured by impact indicators. The main overall objective that the project is meant to contribute to in the long run, and which explains the reasons why it is implemented.

Hierarchy of Objectives: A graphic representation of assumed relationships between objectives, often arranged in levels where lower objectives are means to higher level objectives (ends). Also named as ‘Project Structure’ in logical framework matrix.

Humanitarian values: The values which shape humanitarian action. Values based on the Fundamental Principles of the Red Cross/Red Crescent Movement, which include the protection of life, health and human dignity, respect for others and the acceptance of responsibility to help others without discrimination based on nationality, race, gender, religious beliefs, class or political opinions.

Hyogo Framework for Action-The Hyogo Framework is a global blueprint for disaster risk reduction efforts during the next decade. Its goal is to substantially reduce disaster losses by 2015 - in lives, and in the social, economic, and environmental assets of communities and countries. The Framework offers guiding principles, priorities for action, and practical means for achieving disaster resilience for vulnerable communities.

Immediate Objective: The immediate reason for a project. The effect which the project is expected to achieve if completed successfully and on time.

Impact Monitoring: Gathering information on progress towards achieving objectives and on the effect the program is having in relation to these objectives.

Impact: Positive and negative, intended or unintended long-term results produced by an International Federation and National Societies operation, either directly or indirectly. Relates to the goal level of the logframe hierarchy. **Note:** See definitions for goal, results and results-chain.

Indicator, proxy: An indicator which is substituted for one that is hard to measure directly.

Indicator: Quantitative or qualitative factor or variable that provides a simple and reliable means to measure achievement or to reflect the changes connected to an International Federation and National Societies operation. Indicators are evidence that something has happened. **Note:** Where possible and relevant, indicators should allow for the collection of disaggregated data (by sex, age and other relevant variables).

Lessons: Generally applicable conclusions based on evaluation or review experiences with International Federation and National Societies operations or policies that extrapolate from the specific circumstances to broader situations. Frequently, lessons highlight strengths or weaknesses in preparation, design, and implementation that affect performance, outcome, and impact.

Logframe (Logical Framework): A management tool used to design projects and programmes. It involves identifying inputs, outputs, purpose (outcomes), and goal (impact), and their causal relationships, related performance indicators, and the assumptions or risks that may influence success and failure. It thus facilitates planning, implementation, monitoring and evaluation of an International Federation and National Societies operation.

Mid-Term Evaluation: Mid-term evaluation are generally carried out about halfway through the life of a project, with the anticipation that implementation of project interventions is in full operation.

Mission: A statement of an organization or project synthesizing its reason for existence, often combining general purpose and fundamental value statements.

Monitoring: Monitoring is the systematic and continuous collecting and analyzing of information about the progress of a piece of work over time. It is a tool for identifying strengths and weaknesses in a piece of work and for providing the people responsible for the work with sufficient information to make the right decisions at the right time to improve its quality.

Objective: A vision or image of a future situation. It is specific, time bound and measurable goals for particular aspects of a piece of work, which contribute, to achieving the long-term aims. Goal, target, aim, purpose, end are other terms frequently used.

Outcome: The medium-term results of an operation's outputs. Relates to the purpose level of the logframe hierarchy.

Output: Tangible results of the activities of a project. The production of outputs are, under given assumptions about the context, under the control of the project management.

Participation: The active involvement of intended beneficiaries in the project needs assessment, design, implementation, monitoring, evaluation and decision making. The main purpose of participation is to encourage self-determination and sustainability of the development process.

Participatory Evaluation: A systematic evaluation process in which participation is sought in initial decision making, planning, implementation, summary and analysis, and in the use of results.

Partners: The individuals and organizations that collaborate to achieve mutually agreed upon objectives. **Note:** The concept of partnership connotes shared goals, common responsibility for outcomes, distinct accountabilities and reciprocal obligations. Partners may include governments, civil society, non-governmental organizations, universities, professional and business associations, multi-lateral organizations, private companies, etc.

Process Monitoring: Gathering information about the use of resources (or inputs) in a program, the progress of activities and the way these are carried out.

Program: A collection of projects within the same sector, theme or geographical area, to which a coordinated approach is adopted.

Project: A discrete bit of work in a particular location. Or, a planned undertaking designed to achieve certain specific objectives within a given budget and within a specified period of time.

Purpose: The improved situation that an International Federation and National Societies operation is expected to contribute significantly to if completed successfully and on time. It is measured by outcome indicators.

Qualitative data: Observations that are categorical rather than numerical, and often involve attitudes, perceptions and intentions. **Note:** Where relevant and possible, data should be disaggregated by sex, age and other relevant variables.

Stakeholders: Persons or organizations who have, or will have, a positive or negative interest or stake in the project. Agencies, organizations, groups or individuals who have a direct or indirect interest in the operation, or its evaluation.

Strategy: The means whereby a goal or objective is to be achieved. Strategies are broad general statements of an approach and do not include specific details of steps to be taken.

Sustainability: The ability of a project to deliver benefits to the target group for an extended period of time after the main assistance from a donor is at an end. The continuation of benefits from an International Federation and National Societies operation after major assistance has been completed.

Sustainable Development: A development strategy that manages all assets, natural resources and human resources as well as financial and physical assets for increasing long-term wealth and well being. Sustainable development as a goal rejects policies and practices that support current living standards by depleting the productive base, including natural resources, and that leaves future generations with poorer prospects and greater risks than our own.

Target group: Numeric expression of achievements anticipated by a project. **The** specific individuals or organizations for whose benefit the International Federation and National Societies operation is undertaken. **Note:** Targeted individuals should be identified by sex, age and other relevant characteristics.

The International Federation's Global Agenda:

Goal 1: Reduce the number of deaths, injuries and impact from disasters.

Goal 2: Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.

Goal 3: Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.

Goal 4: Promote respect for diversity and human dignity, and reduce intolerance, discrimination and social exclusion.

Triangulation: The use of three or more theories, sources or types of information, or types of analysis to explore, verify and substantiate an assessment. **Note:** By combining multiple data-sources, methods, analyses or theories, evaluators hope to overcome the bias that comes from single informants, single methods, single observer or single theory studies.

Vision: In the context of organization this refers to the organization concept of the ideal situation both within the organization and in the constituency it purports to serve. It is its “dream” of “what should be”.

Volunteer

An individual who freely contributes his/her services, not by a desire for material or financial gain or by external social, economic or political pressure, in the belief that his/her activities are beneficial to the community.

Vulnerability: Being at risk from dangers such as injury, disasters, accidents, malnutrition, epidemics. The presence of factors that place people at risk of becoming food insecure or malnourished, including those factors that affect their ability to cope. NRCS has categorized vulnerability into eight categories: 1. **Geographical vulnerability** : such as disaster prone areas, areas with particular disease patterns, areas with environmental insecurity, difficult topography with limited facilities, areas with shortage of primary needs like drinking water and so on 2. **Ethnic vulnerability**: In some cases ethnicity itself is a clear indicator of vulnerability in Nepal. Special development efforts are needed to help communities like Raute, Chepang, Musahar etc.3. **Age based vulnerability**: Pediatric health problems including infant mortality and morbidity patterns, adolescent issues, geriatric problems and issues comprise the age based vulnerability.4. **Chemical, biological, industrial and other technological vulnerabilities** are equally important issues to be considered in the present times.5. **Environmental vulnerability** covers multiple issues and constraints including deforestation, land erosion, global warming, ecological deterioration, exposure to nature’s wrath of many kinds and so on.6. **Economic vulnerability** is a commonly understood concept, which is more relevant to a developing country like Nepal where more than 40 percent people live under subsistence level.7. **Social vulnerabilities** are caused by multiple situations like gender related issues, girl trafficking, socio-cultural problems like caste system, racial discrimination and domestic violence to mention just a few.8. **Natural calamities/ disasters** do not need explanation as to how and how much of vulnerability is caused by such calamities. Often long term development programs become inevitable for the survival of disaster victims.

Humanity

The International Red Cross and Red Crescent Movement, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours, in its international and national capacity, to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life and health and to ensure respect for the human being. It promotes mutual understanding, friendship, cooperation and lasting peace amongst all peoples.

Impartiality

It makes no discrimination as to nationality, race, religious beliefs, class or political opinions. It endeavours to relieve the suffering of individuals, being guided solely by their needs, and to give priority to the most urgent cases of distress.

Neutrality

In order to continue to enjoy the confidence of all, the Movement may not take sides in hostilities or engage at any time in controversies of a political, racial, religious or ideological nature.

Independence

The Movement is independent. The National Societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with the principles of the Movement.

Voluntary Service

It is a voluntary relief movement not prompted in any manner by desire for gain.

Unity

There can be only one Red Cross or one Red Crescent Society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

Universality

The International Red Cross and Red Crescent Movement, in which all Societies have equal status and share equal responsibilities and duties in helping each other, is worldwide.

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