

RCRC

Red Cross Red Crescent

ISSUE 3 · 2013

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Principles behind bars

An Irish Red Cross project empowers inmates through first aid

National Society timeline

150 years of grass-roots and global action

Digital relief

New, accessible technology puts power in humanitarian hands

150 years of hope



THE MAGAZINE OF THE INTERNATIONAL
RED CROSS AND RED CRESCENT MOVEMENT

The International Red Cross and Red Crescent Movement is made up of the International Committee of the Red Cross (ICRC), the International Federation of Red Cross and Red Crescent Societies (IFRC) and the National Societies.



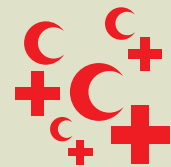
ICRC

The International Committee of the Red Cross is an impartial, neutral and independent organization whose exclusively humanitarian mission is to protect the lives and dignity of victims of armed conflict and other situations of violence and to provide them with assistance. The ICRC also endeavours to prevent suffering by promoting and strengthening humanitarian law and universal humanitarian principles. Established in 1863, the ICRC is at the origin of the Geneva Conventions and the International Red Cross and Red Crescent Movement. It directs and coordinates the international activities conducted by the Movement in armed conflicts and other situations of violence.



International Federation of
Red Cross and Red Crescent Societies

The International Federation of Red Cross and Red Crescent Societies (IFRC) is the world's largest volunteer-based humanitarian network, reaching 150 million people each year through its 187 member National Societies. Together, the IFRC acts before, during and after disasters and health emergencies to meet the needs and improve the lives of vulnerable people. It does so with impartiality as to nationality, race, gender, religious beliefs, class and political opinions. Guided by Strategy 2020 — a collective plan of action to tackle the major humanitarian and development challenges of this decade — the IFRC is committed to 'saving lives and changing minds'.



National Red Cross and Red Crescent Societies embody the work and principles of the International Red Cross and Red Crescent Movement in more than 188 countries. National Societies act as auxiliaries to the public authorities of their own countries in the humanitarian field and provide a range of services including disaster relief, health and social programmes. During wartime, National Societies assist the affected civilian population and support the army medical services where appropriate.

The International Red Cross and Red Crescent Movement

is guided by seven Fundamental Principles:

humanity, impartiality, neutrality, independence, voluntary service, unity and universality.

All Red Cross and Red Crescent activities have one central purpose:

to help without discrimination those who suffer and thus contribute to peace in the world.

A change of mindset

THE DROUGHTS AND CROP failures that sparked a hunger crisis in the Horn and Sahel regions of Africa in recent years have caused countless deaths. Elsewhere in the world, severe droughts, floods and other dramatic events regularly hit vulnerable populations.

However, we can see differences in the ability of different countries and communities to react and cope with unexpected stresses and shocks. In one word, the difference is resilience.

We have the means to build up resilience and prepare vulnerable communities for cyclical crises via data analysis, pattern recognition, risk assessment, smart investments and community-based disaster preparedness. In parts of the Horn of Africa and in the Sahel, for instance, this has helped ease the worst effects of drought, thus helping thousands of people to avoid hunger.

Fostering resilience also makes sense financially. Every euro invested in disaster preparedness saves between four and seven euros on disaster response. Building resilience is cheaper, more efficient and more sustainable than dealing with the consequences of yet another crisis.

We recognize the world has changed. There are more frequent and more severe shocks for communities to handle. So our approach has to change as well. We aim to manage crises better by helping address their root causes rather than struggling with their consequences.

The good news is that we are not starting from scratch. We already have encouraging results in Africa where we have launched the SHARE Initiative (Horn of Africa) and

"A century and a half since the first Red Cross National Societies were formed in Europe, it is time to act on what's been learned in order to prevent and prepare for future crises."

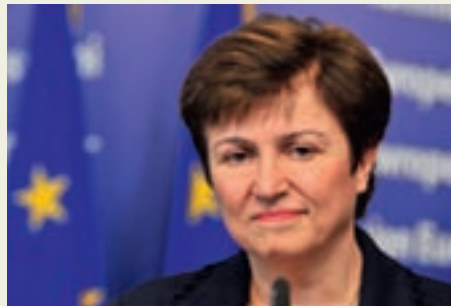


Photo: European Commission



Photo: REUTERS/François Lenoir

the AGIR partnership (Sahel), linking humanitarian and development resources to boost the capacity of the most vulnerable communities to survive and bounce back from drought.

This is a substantial shift in mentality and practice: from distributing aid to drought-affected people in order to survive until the next drought to investing in the long run — building irrigation systems, promoting more resistant crops, helping pastoralists manage their livestock.

These types of projects are not yet at a large-enough scale. But they are the basis of more to come. We are also promoting resilience in other regions and for other

vulnerabilities, such as floods, cyclones, earthquakes and tsunamis.

Red Cross and Red Crescent National Societies are playing an important role. In the Sahel, European and African National Societies are working together, with European Union (EU) support, to stem acute malnutrition and enhance systems for long-term health, food security, clean water and sanitation. In response to floods that affected 1.2 million Cambodians in 2011, ECHO supported the French and Cambodian Red Cross Societies in providing access to food and water, while promoting hygiene and enhancing long-term resilience. A century and a half since the first Red Cross National Societies were formed in Europe, it is time

to act on what's been learned in order to prevent and prepare for future crises.

Resilience can only grow and deliver on its promise if it becomes a priority for all — not just for donors such as the EU, which needs to make aid more flexible and better targeted, but also for governments in disaster-prone countries, for the private sector, which can contribute important know-how on insurance and risk assessment.

We in the European Commission are giving a clear signal that we are willing to re-examine our priorities as a donor. We will work within the humanitarian and development communities, with policy-makers and all other partners, to find adequate and lasting solutions to hunger and disaster exposure, which today threaten more people than ever.

By **Kristalina Georgieva**, European Union Commissioner for International Cooperation, Humanitarian Aid and Crisis Response, and **Andris Piebalgs**, European Union Commissioner for Development.

In brief...

Protests impede urgent health care in Colombia

As protests erupted in numerous Colombian cities this year, routes to various regions in the country were blocked, disrupting access to health care. In February and March, at least three people died after the ambulances transporting them were prevented from passing, and a number of hospitals ran short of supplies. In all, the ICRC recorded 27 incidents in which health-care provision was obstructed, 15 more than in the previous quarter. The problems continued in the following months, particularly in the Catatumbo area of Norte de Santander state. "Obstacles to the work of health-care personnel are endangering the lives of a great many people," says ICRC head of delegation Jordi Raich.

When the 'world seemed to end'

One month after a 6.2-magnitude earthquake struck Indonesia's Aceh province, the Indonesian Red Cross Society continued to provide support. More than 52,000 people were forced to flee their homes after the earthquake struck Aceh Tengah and Bener Meriah districts, killing 42 people and injuring more than 2,500 others. "The world seemed to end," says 43-year-old Mahyudin of the moment the earthquake struck.

The Indonesian Red Cross initially deployed 32 volunteers to reach both locations to assist with search and rescue operations, assess needs and distribute relief supplies. A rapid response team of ten staff also assisted with assessments, and health and medical services.

Voices

"We love this work of ours because what we are doing is not for one particular person, but for all the people in Aweil, in South Sudan, and even Africa."

Mary Achol Athian Athian, South Sudan Red Cross volunteer (see page 12).

Movement mourns more volunteers killed on duty

The Movement deplored the death of two more Syrian Arab Red Crescent volunteers in August. Wassim Mouselli and Yousef Al Kens were both working at the National Society's branch in Homs on 27 August when a mortar shell landed in front of the branch office, killing a number of civilians. A total of 22 Syrian Arab Red Crescent volunteers have been killed while on duty since the beginning of the conflict.

Meanwhile, the Movement also mourned the death of Johann Dorfwith, a paramedic with the Austrian Red Cross, who was fatally wounded while assisting a policeman who had been shot by a fleeing gunman near the town of Annaberg, Austria in September.

'Stone rivers found here'

The ironic signs posted along the dry creek beds say it all: 'Stone rivers found here', a hint at the meagre water supply that now trickles down the once-plentiful rivers.

After four rainless months in the south of Ecuador, the agricultural communities in Loja province are being dramatically affected by the 72 per cent drop in rainfall. Located on a mountain range on the Ecuador-Peru border, the province has almost 450,000 inhabitants and its territory covers approximately 11,000 square kilometres.

The Ecuadorian Red Cross — as part of a multi-agency response — identified a total of 1,025 families who have been affected directly.

The needs include food, installation of safe water storage tanks and home water filters, restoration of local irrigation systems, and training for families in preparing animal feed, among other things. The IFRC is supporting the intervention through its Disaster Relief Emergency Fund, in coordination with the Ecuadorian Red Cross.



Photo: Patrick Fuller/IFRC

Egyptian Red Crescent helps wounded in protests

As political tension and violence escalated in July and August, the Egyptian Red Crescent Society responded to humanitarian needs during and after mass demonstrations and political violence, immediately deploying emergency teams to help those injured and wounded on the streets of Cairo and other provinces.

Volunteers in at least 35 sites across 11 governorates were deployed to offer medical assistance, evacuate critical cases and provide urgent medical supplies to field hospitals. In some branches, volunteers offered psychosocial support in hospitals and helped to organize and promote blood-donation campaigns.

Violence takes lives in Guinea

When intercommunal violence hit the Guinean city of N'zérékoré, volunteers from the Red Cross Society of Guinea and ICRC staff took wounded people to N'zérékoré regional hospital and transported a number of dead bodies to the city morgue. "Casualties were flooding in and we ran out of supplies," says a hospital director. "That's when we turned to the ICRC in N'zérékoré

and asked them for intravenous fluids, syringes, needles and dressings to treat the wounded."

With the help of Red Cross volunteers, ICRC staff used two vehicles to criss-cross the city and collect the dead and wounded. Like five other hospitals in Guinea, the regional hospital has been receiving ICRC training, including mass-casualty management, for its personnel since 2007.

Humanitarian index

3: Percentage of fights in Ireland's Wheatfield Prison in which only fists were used prior to the launch of an Irish Red Cross programme by prisoner-volunteers (see page 16).

97: Percentage of fights that involved a blade, and usually a slashing injury, at Wheatfield Prison prior to the prisoner-run Irish Red Cross programme.

5,000: Number of mountain rescuers engaged by the German Red Cross, the oldest National Society, which this year celebrates its 150th anniversary.

22,000: Number of Red Cross nurses employed by the German Red Cross.

130,000: Number of trained German Red Cross water rescuers.

395,690: Number of prostheses provided by the ICRC worldwide between 1979 and 2012, according to the 2012 Annual Report of ICRC's physical rehabilitation programme (see page 29).

400,000: Total number of German Red Cross volunteers.

6,800,000,000: The number of mobile phone subscribers in the world today, a figure that is up by 2.5 billion since 2008 and that humanitarian groups say is radically changing disaster preparedness and response (see page 24).

Sources: Irish Red Cross; German Red Cross; ICRC; IFRC World Disasters Report

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A movement is born

A century and a half ago, the first National Society was formed in the Kingdom of Württemberg, which would later merge with other nearby states to form the modern state of Germany. In many ways, the changes, growth and conflicts that have faced this original National Society mirror the Movement's evolution over 150 years.

Making history

In the world's newest country, the South Sudan Red Cross has moved quickly to establish itself within a context of international conflict, internal strife, mass displacement, deep-rooted poverty and a lack of basic infrastructure.

■ Focus

Principles behind bars

In two prisons in Ireland, teams of volunteers use the seven Fundamental Principles of the Red Cross Red Crescent Movement to change themselves and the lives of other troubled men. Their work is transforming prison culture, reducing violence and improving the physical and psychological health of inmates.

■ Passing the baton

Keeping it clean

When humanitarian organizations mobilize during emergencies, or as part of development work, how do they make sure the changes they've made will continue once they've packed up and gone? In some of Côte d'Ivoire's poorest communities, water and sanitation offer potential answers.

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■ Future of humanitarian action

The digital humanitarian

Widely available technology such as mobile phones, the internet and satellite communication offer powerful life-saving potential. Are humanitarians keeping up?

■ Fundamental Principles

Safety through principles

Rooted in strict adherence to the Fundamental Principles, ICRC's Safer Access Framework draws on the knowledge of National Societies to improve acceptance, security and access during times of turbulence and conflict.

Our principles, ourselves

Can adherence to the seven Fundamental Principles be enhanced through self-improvement? Some say strengthening personal skills such as listening, empathy and compassion can help us become more impartial, neutral and humane.

Independence: one size does not fit all

When judging independence, it's essential to understand the political, economic and social context facing each National Society.

■ Resources

The *World Disasters Report* 2013, a new Health care in danger video, and more Movement publications and films.

We gratefully acknowledge the assistance of researchers and support staff of the ICRC, the IFRC and National Societies.

The magazine is published three times a year in Arabic, Chinese, English, French, Russian and Spanish and is available in 188 countries, with a circulation of more than 70,000.

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On the cover: A volunteer with the South Sudan Red Cross takes time out from an emergency first-aid simulation to pose for a photo with a flag he created for the exercise.

Photo: Marco Di Lauro/Getty Images/ICRC

(Photos this page, from top) German Red Cross; Juozas Cernius/IFRC; Jarkko Mikkonen/IFRC; Claire Doole/IFRC; American Red Cross.



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A movement



National Society timeline 150 years of humanitarian action

The Battle of Solferino

In June 1859, Swiss businessman Henry Dunant witnesses the aftermath of the Battle of Solferino and is inspired to create a movement of national volunteer societies

to assist the sick and wounded in battle.

ICRC is founded

17 February 1863.
Dunant's tireless work on behalf of the sick and wounded leads to the founding of the ICRC.

First National Society formed in Germany

12 November 1863.
The first National Society is formed in the Kingdom of Württemberg, now a state in Germany. The following year,

National Societies are formed in the states of Baden, Bavaria, Hamburg, Hesse-Darmstadt, Mecklenburg-Schwerin, Oldenburg, Prussia and Saxony — all states in current-day Germany.

Note: Placement on the timeline is

is born

Exploring the lessons of history as the first Red Cross National Society celebrates 150 years of humanitarian action.

DRESSED IN HEAVY TROUSERS with fluorescent stripes and safety shoes, 18-year-old Annegret Graf is dressed well for today's role: a first-aid competition set in the picturesque town of Heidenheim, in Baden-Württemberg.

As she prepares, Graf recalls how she played another theatrical role just a couple of months ago, when she stood on the stage in her home town of Maulbronn as part of a historical re-enactment. In the play, set just before the First World War, village residents debated whether they should found their own Red Cross section.

The drama unfolded as the shaky peace in Europe looked like it would soon end; the mobilization for the First World War loomed on the horizon. Playing a young innkeeper, Graf was firmly convinced of the need to care for wounded soldiers, right here at home.

One of the many volunteers from the active Maulbronn branch, Graf is eager not only to work for the German Red Cross but also to tell its story. She herself had not yet come of age when she joined the Red Cross team in Maulbronn "in order to help, where it can make a difference".

As she speaks, she turns around and starts tending to a garishly made-up amateur actor, lying on the ground and moaning next to a barbecue grill: half of his T-shirt has gone up in flames and his chest is burnt. Next to him are three other semi-sober burn victims, who had poured generous amounts of flammable liquid on the grill to get the fire going.

"That's the lesson we've learned... to always do our utmost to ensure that the Fundamental Principles of the Red Cross are respected."

Christian Schad, 53, German Red Cross volunteer

Ⓔ Although this photo was taken during First World War, it depicts a perennial issue: humanitarian workers and their essential, life-saving equipment falling victim to the brutality and recklessness of war. Photo: German Red Cross

➔ 18-year-old German Red Cross volunteer Annegret Graf takes part in a first-aid competition Heidenheim, in Baden-Württemberg.

Photo: Markus Bechtler/ German Red Cross

Graf has travelled to Heidenheim with five colleagues from her local branch to compete in the first-aid contest in the *Bundesland* (German federal province) of Baden-Württemberg. Even here in the province where the Red Cross established its very first National Society 150 years ago, Graf's team has some distinction: for years, the 30 on-call members from their town of 6,000 inhabitants have been winning prizes in first-aid contests.

In their local areas, branch members are generally firmly embedded in the medical assistance network as first responders. Even before the rescue service arrives, they provide immediate care to the wounded. If someone falls off a ladder or if there is a traffic accident or fire, the volunteers' pagers beep in their pockets. This happens around 150 times per year, or about once every other day.

These on-call teams are the backbone of the organization. Nationwide, they mobilize some 170,000 volunteers in 8,000 groups and log around 8 million deployment hours a year (48 hours per team member). They also train all year to intervene in disasters and provide medical services at major events such as soccer matches and marathons.

Moved by history

It is perhaps no coincidence that Graf is inspired by the history of the Red Cross. Baden-Württemberg, or more precisely Stuttgart, the region's capital, is



Re-established in 1921 as the German Red Cross. East German Red Cross was established in 1952 after the country split into East and West Germany. The National Societies reunited in 1991.

First International Conference

26 to 29 October 1863.

The first International Conference was held in Geneva with the

intention of establishing ways to improve medical services on the battlefield and create national societies to aid the sick and wounded.

Belgian Red Cross

4 February 1864

Spanish Red Cross

2 March 1864

French Red Cross

25 May 1864

Italian Red Cross

15 June 1864

based on the date a National Society was formed. For more information on when the National Societies were recognized by the ICRC and admitted into the IFRC, go to www.redcross.int.



one of the most historic places of the Red Cross Red Crescent Movement. For it was in Stuttgart on 12 November 1863 that the very first National Society — initially called the Württemberg Medical Association for Tending to Wounded Soldiers — was set up just two weeks after the founding conference in Geneva.

With his contacts and his commitment, Christoph Ulrich Hahn, a pastor and teacher who lived in Stuttgart, became one of the pioneering advocates for Henry Dunant's vision within German royal houses and duchies.

And it was in the nearby Hasenbergsteige that an impoverished and homeless Dunant moved into the house of another pastor in 1876. The founder of the Red Cross Movement lived in Stuttgart for more than ten years before moving back to Heiden in Switzerland. Three years ago, a column was erected to commemorate Dunant's years there.

Other sections were founded soon after the establishment of the Württemberg Medical Association. Their members devotedly tended to wounded soldiers in several 19th century wars, including the Danish–German war, the Prussian–Austrian war and the German–French war.

The German Red Cross also assumed responsibility for responding to nationwide calamities, such as

Brothers and volunteers Christian and Johannes Schäd are passionate about their humanitarian work and their National Society's legacy. Here, they stand before the home where Henry Dunant lived when the first National Society was formed in Stuttgart, Germany.

Photo: Werner Bachmeier/IFRC

natural disasters, and traditional welfare activities at an earlier stage than National Societies in other countries.

Before the turn of the century, nurses' wards and children's homes were set up. Then came the First World War. As Stefan Schomann, an author from Berlin, writes, "The Red Cross slotted right into the war machine", becoming integral to army operations.

After the war, Germany was in ruins. People received aid, in the form of food and clothing, including from Japan, which sent aid shipments to the Red Cross in Berlin. The Treaty of Versailles prohibited Germany from taking any measures that could serve to prepare for war, so the German Red Cross had no alternative but to focus entirely on peace-time activities such as disaster preparedness and welfare. Male members of medical units became ambulance officers and drivers, as well as mountain and water rescuers; women became nurses, nursery-school teachers or social workers.

Elimination of opposition

When Adolf Hitler came to power on 30 January 1933, the German Red Cross, which had officially taken this name in 1921, was one of the largest organizations in the country. And it was an entity that was in step with Nazi policy of *Gleichschaltung* (elimination of opposition, literally 'conformity'): as early as June 1933, Jews were barred from playing any role in the German Red Cross.

In 1937, *Gleichschaltung* became law and Hitler appointed *SS-Oberführer* Ernst-Robert Grawitz as vice-president of the German Red Cross.

Subsequently, the organization was linked closely to the ruling party, the NSDAP, before the Second World War broke out in 1939. Stefan Schomann was commissioned to write a book by the German Red Cross secretariat to mark its 150th anniversary. In this remarkably critical work, Schomann writes that the case of the German Red Cross is a "textbook example of the takeover of a National Society by a dictatorial regime". "They took over the organization like pirates take over a ship," he says.

In 2008, when the Red Cross presented the findings of a study of its history from 1933 to 1945, the president, Rudolf Seiters, who is still in office today,

The First Geneva Convention

Convention for the Amelioration of the Condition of the Wounded in Armies in the Field is signed by 12 states on 22 August 1864, in Geneva.

Portuguese Red Cross

11 February 1865

Swedish Red Cross

25 May 1865

Norwegian Red Cross

22 September 1865

Swiss Red Cross

17 July 1866

The Russian Red Cross Society

3 May 1867 as Russian Red Cross (Soviet) and 1 July 1992 as Russian Red Cross Society.

The Netherlands Red Cross

19 July 1867

Austrian Red Cross

17 May 1867

Turkish Red Crescent Society

11 June 1868

British Red Cross

4 August 1870 as the National Aid Society. Renamed the British Red Cross in 1905.

Danish Red Cross

27 April 1875

said that it was “tragic to see how large parts of the German Red Cross management adapted to the conditions of the Nazi regime and moved away from Red Cross principles, how it was reshaped and instrumentalized as a National Socialist organization and how Red Cross principles were abandoned.”

Lesson learned

So is Germany an inglorious place to take a look at the history of the Red Cross? Definitely not — not least because the German Red Cross, which was re-established in West Germany in 1950, is now the world's second largest National Society, with some 3.5 million members and 400,000 volunteers. In addition to the 170,000 on-call members, there are 130,000 water rescuers, 5,000 mountain rescuers, 110,000 active youth volunteers, 20,000 volunteers for welfare and social work, and 22,000 Red Cross nurses.

All this is strictly organized along federal lines — a lesson that not only Germany but also the

“When we are on mission, we always ask ourselves: are we working here according to our seven rules? Where do they clash with reality? Can or should we change something in the way we work?”

Johannes Schad, 41, German Red Cross volunteer

German Red Cross had learned from the disastrous concentration of power in the hands of the Nazi regime. At the top is the federal association, which is primarily responsible for tracing, national political representation and international aid within the International Red Cross and Red Crescent Movement. Next come 19 regional associations, followed by 480 district sections and more than 4,500 local sections.

At the international level, the German Red Cross is active in projects in 50 countries, which in 2012 were funded half by donations and half by allocations.

Donation income fluctuates widely in a country with a strong tradition for giving. The German Red Cross received donations totalling US\$ 168.3 million after the 2004 Indian Ocean tsunami, compared with US\$ 33.8 million in 2012, a year marked — fortunately — by few natural disasters. As a result, ensuring the independent nature of Red Cross activities remains a constant challenge.

This point was made by 41-year-old Johannes Schad, a surgeon and emergency doctor, whose brother Christian, aged 53, is a Geneva Convention representative in the Stuttgart regional association.

The brothers live in a large property, only a few kilometres from where the first Red Cross section was founded in 1863, with four out of ten siblings and their families all under one roof. The Red Cross goes far back in the family's history: their father was the leader of an on-call team and enjoyed taking his children along to the Red Cross Christmas dinner.

His sons, Christian and Johannes became, respectively, a teacher and a surgeon. They devoted a huge share of their time to the worldwide organization — 40 years in the case of Christian.

The contents of his bookshelves in the cellar of their house would stand out in any library. They contain virtually everything ever written about the history and dissemination of the Fundamental Principles of the Red Cross.

A rare gem

The real gem in this collection is the book *Entstehungsgeschichte des Roten Kreuzes und der Genfer Konvention* (History of the development of the Red Cross and the Geneva Convention), whereby



Swedish nurse Elsa Brändström was 27 years old in 1915 when she went to care for German and Austrian prisoners of war in Siberia, where detainees lived under horrendous conditions. She spent much of her life taking care of wounded soldiers and civilians in Germany during the First and Second World Wars and is an inspirational figure for many humanitarians in Germany today.

Photo: German Red Cross

Red Cross of Montenegro
29 November 1875 and again on 12 June 2006.

The Red Cross of Serbia
25 January 1876. Red Cross of the Kingdom of Serbs, Croats

and Slovenes from 29 July 1921 to 25 July 1933; Yugoslav Red Cross from 25 July 1933 to 2002; Serbia and Montenegro Red Cross Society from 2002 to 2006; The Red Cross of Serbia from 27 October 2006.

Romanian Red Cross
11 July 1876

Japanese Red Cross Society
1 May 1877

Finnish Red Cross
7 May 1877

Hellenic Red Cross (Greece)
22 June 1877

Croatian Red Cross
1878 within the Red Cross of the Austro-Hungarian monarchy. Independent since 10 October 1991.

Chilean Red Cross
1879, disbanded in 1891; re-established in 1903.

Slovenian Red Cross
1879 as a part of the Austrian Red Cross. Independent since 26 January 1993.

a man from Stuttgart, Rudolf Müller, rehabilitated the impoverished Henry Dunant in 1897, helping to ensure that Dunant was awarded the Nobel Peace Prize in 1901.

The younger of the two brothers, Johannes, has also collected an impressive series of foreign missions: from Kenya to Gaza, Iraq to Haiti. He has just returned from China, where he provided Chinese special forces with disaster preparedness training.

Both brothers are steeped in historical knowledge about the German Red Cross, and display an astonishing ability to link history with the present and the present with history.

When the conversation turns to the colonial era, and more specifically to Namibia during the Herero uprising (a rebellion in 1902 against brutal German colonial rule), the brothers point out that the German Red Cross rarely, if ever, tended to wounded Africans.

With its internalized racism and anti-Semitism, had the German Red Cross leadership already known what the Nazi regime wished to impose upon it? Both nod in agreement.

"That's how it was," says Christian. "That's the lesson that we've learned: never to let ourselves be subject to something like *Gleichschaltung* again. Rather, to always do our utmost to ensure that the Fundamental Principles of the Red Cross are respected."

Johannes Schad agrees. "When we are on mission as well, we always ask ourselves: are we working here according to our seven rules? Where do they clash with reality? Can or should we change something in the way we work? Moreover, if we put gender balance into practice, it means we have to consistently ensure that in a mobile hospital, women receive medical care just as fast as men.

"In addition to the limits which must be borne in mind in the field, such as our role and the role of the National Society," he continues, "some issues can be settled straight off. If the German Red Cross is asked whether it will take over the [military] field hospital in Kunduz once the German army withdraws from Afghanistan, the answer can only be 'no'. Our neutrality is a prerequisite for our survival."

"If you ask me what the major challenge of the future will be, I would say continuing to appeal to young people, with structures that are flexible and modern."

Frieder Frischling, district director of the German Red Cross in Stuttgart

Even in safe and quiet Stuttgart, Christian explains that the principle applies in exactly the same way: "Every time an ambulance goes out, the assumption is that everyone will be given medical care. Everyone is treated the same: the veiled woman, the man speaking broken German, the drunk and the professor."

Every person who starts working for the German Red Cross as a volunteer must attend an introductory seminar to learn the basics of the Fundamental Principles and international humanitarian law.

"I had to work hard before the 2006 Football World Cup to make sure that our staff were properly trained," says Christian. And they had to learn that absolutely everyone in the stadium, where things are not always all that peaceful, had to be helped without any distinction — including the English hooligans, who kept the police busy after the match with Ecuador and whom only Red Cross volunteers dared approach.

Plans to build a new train station triggered large demonstrations in Stuttgart in 2011. "There were 150 people injured," Christian Schad recalls. "Students, policemen, masked rowdies. So you have to get everyone to understand that everybody has the same right to care."

A German Red Cross ambulance circa 1867. Photo: A. Vennemann/German Red Cross



Peruvian Red Cross
17 April 1879

Argentine Red Cross
13 June 1880

Hungarian Red Cross
16 May 1881

American Red Cross
21 May 1881

Bulgarian Red Cross
13 January 1885

Salvadorean Red Cross Society
13 March 1885

Costa Rican Red Cross
4 April 1885

Association Congolaise et Africaine
31 December 1888. Recognized by the ICRC in 1889 but never

part of the IFRC; ceased to exist on 26 January 1909.

The Thai Red Cross Society
26 April 1893

Venezuelan Red Cross
30 January 1895

The South African Red Cross Society

22 July 1896 as the Transvaal Red Cross. Orange Free State Red Cross founded in 1899 and a British Red Cross branch founded in Cape Colony in

And that is probably exactly the approach that has brought both of them to the Red Cross. "There's something I know deep in my heart," says Christian. "I can't make the world a better place. But I can be there for those who have suffered harm."

Questions like this are consistently discussed at the highest level in Baden-Württemberg. Every year, the German Red Cross, together with the Federal Ministry of Defence and the Institute for the International Law of Peace and Armed Conflict, co-hosts a convention where participants can exchange views with experts on media and war, human rights in conflicts or new forms of war.

This year, the ever-increasing reliance on unmanned drones was on the agenda. In addition, to commemorate the 150th anniversary of its founding, the Baden-Württemberg section of the German Red Cross has published a series of papers about present-day challenges to international humanitarian law and the future of the German Red Cross and the ICRC.

Why is this kind of anniversary important to Red Cross members in a region so central to Movement history? "It provides inner motivation," says Udo Bangerter, press officer of the regional association of Baden-Württemberg. "People feel respected, taken seriously, more visible. This reinforces cooperation and self-confidence."

The next generation

And that also might help inspire the next generation of Red Cross volunteers, despite some major challenges. In Baden-Württemberg, commitment is good when viewed through a nationwide lens: some 50,000 of the overall 400,000 volunteers throughout the country are active in the region, a much higher percentage than the national average.

But what makes them volunteer? "Most have had some kind of crucial experience," says Bangerter, who recently portrayed volunteers all over the country in a publication to mark the 150th anniversary. "It may be the death of a close relative or the fact that they have witnessed a disaster and felt that they wanted to help."

But Bangerter takes pains to note that all is not perfect in Baden-Württemberg. Both here and in the rest of Germany, the Red Cross recruits more volun-



Today, the German Red Cross is an international relief organization in its own right with humanitarian operations around the world. This German Red Cross doctor attends to a child in a makeshift medical centre on the island of Sumatra after the 2004 Indian Ocean tsunami. Photo: Fredrik Barkenhammar/German Red Cross

teers from the countryside than the big cities. Where the next generation of management will come from is a major source of concern.

"A district director is in charge of 300 to 1,200 people — that is virtually impossible to do on a part-time basis. The demands in terms of personnel and process management are enormous."

Frieder Frischling, district director of the Red Cross section in Stuttgart, adds: "If you ask me what the major challenge of the future will be, I would say continuing to appeal to young people, with structures that are flexible and modern."

Other challenges include bridging the gap between tight funding for core activities, such as health insurance, communities and long-term care insurance. "The basic conditions are becoming increasingly difficult," says Frischling. "We have been rationalizing for years. And now we have reached the limit: after all, someone has to drive the ambulance." ■

Jeannette Goddar

Jeanette Goddar is a freelance journalist based in Berlin.

1900. Independent since 21 May 1913.

The Canadian Red Cross Society

10 October 1896 as part of the British Red Cross. Independent since 19 May 1909.

Belarus Red Cross

1896 as Grodno Province department of the Russian Red Cross. Part of the Soviet Alliance of Red Cross and Red Crescent Societies from 1926. Independent since 26 March 1992.

Uruguayan Red Cross

5 March 1897

Red Cross Society of China

10 March 1904

The Republic of Korea National Red Cross

27 October 1905. Became a chapter of Japanese Red Cross after annexation in 1910; the Republic of Korea National Red Cross (South) since 1947.

Mexican Red Cross

6 August 1907

Brazilian Red Cross

5 December 1908

Cuban Red Cross

10 March 1909

Making history

In the world's newest country, the Movement's newest National Society faces ongoing war, internal strife, displacement and deep-rooted poverty.

FROM A CLEARING JUST outside the camp, people hear the screams. Turning towards the commotion, they see wounded men and women lying in the grass, some wailing in pain as a dozen people wearing South Sudan Red Cross vests move quickly towards the scene.

As two volunteers try to calm a distraught man, two others attend to a young woman lying in the grass, a knife protruding from her stomach. A few metres away, two bodies lie face down, one motionless and the other with a long thin spear piercing her back.



People gather around wearing shocked, worried expressions. Only the occasional nervous smile among the onlookers betrays the fact that they know this is a simulation organized by the emergency action team of the South Sudan Red Cross branch in Wau, a city of roughly 150,000 in the country's Western Bahr-el-Ghazal state.

The demonstration is a graphic reminder of the violence that swept through Wau in December 2012, when two tribal factions clashed violently over a proposal to move the state's governmental seat to another town. Many of the volunteers have vivid memories of those clashes, which left 19 people dead. As with many of the emergencies that have hit the city in the last year — floods, fires, political violence, a plane crash — South Sudan Red Cross volunteers played a critical role in treating the wounded and transporting them to local hospitals.

Egyptian Red Crescent Society

24 October 1912. Known as United Arab Republic Red Crescent from 29 September 1959 until 2 September 1961.

The Red Cross Society of Bosnia and Herzegovina

1914 as part of the Hungarian Red Cross. Independent since 15 December 2000.

Luxembourg Red Cross

8 August 1914

Australian Red Cross

13 August 1914 as part of the British Red Cross. Independent since 17 November 1927.

Colombian Red Cross Society

30 January 1915

Malagasy Red Cross Society (Madagascar)

8 August 1915 as part of the French Red Cross. Independent since 19 May 1959.

New Zealand Red Cross

1915 as part of the British Red

Cross. Independent since 22 December 1931.

Red Cross Society of Panama

13 January 1917

Bolivian Red Cross

15 May 1917



🔗 The volunteer members of the emergency action team in Aweil, in northern South Sudan, don't have much in terms of equipment and support. But their energy and commitment is on display every day as volunteers regularly mobilize to care for thousands of people displaced by conflict.

Photo: Juozas Cernius/IFRC

In this new country, which became independent from Sudan in July 2011, many people still do not fully understand what this new National Society is all about. This re-enactment, staged in a field just outside the settlement of Alel Chok, a massive camp for people who have recently returned to from Sudan to South Sudan, aims to raise awareness about the South Sudan Red Cross and its neutral, impartial mission.

"The people will see that if there is some kind of disaster, this is the kind of first aid we can bring," says volunteer Elia Mohammed. "It is also an opportunity to show how Red Cross volunteers follow the seven Fundamental Principles and help people regardless of their tribes or religions — just like what happened in Wau in December, when we offered first aid without any discrimination."

Many of the bystanders were visibly moved. "To me, this play shows that it is not human to be attack-

ing each other," says camp resident Dor Dong Dor. "These kinds of things have to be prevented."

The volunteers' activities at the camp on this day go beyond acting. Before the demonstration, they set up a first-aid post, dressing wounds and offering various types of first aid. During the past year, with support from ICRC and IFRC emergency appeals, they have also conducted several distributions of non-food items: tarpaulins, jerrycans, cooking utensils, sleeping mats and other basic household supplies.

Coming home

"Most people in Alel Chok had to leave all their belongings in the north," explains Santino Manjok Akot, the camp's chief. "So there are many needs for things inside the house. The majority are sleeping on the ground and they do not even have proper mats."

As the rainy season begins, they need shelter materials, particularly plastic sheets, he says. While many people, including the chief, express gratitude for the assistance they have received, there is a common refrain: "It's not enough."

A few water points, a weekly health clinic and a school have been set up by various agencies in Alel Chok. But the camp continues to grow as more returnees arrive and services are overloaded.

Official United Nations (UN) estimates suggest nearly 400,000 people displaced in Sudan returned to South Sudan between 2010 and 2012, while others put the current number at well over a half million, as people continue to return in the wake of independence. Most settle in camps such as Alel Chok where there are limited health services, no jobs and no land for cultivation.

Many of the camp's women, widowed during the war of independence, walk several kilometres into town seeking work as domestic labour, which they say gives them just enough to feed their children for a day. "If you don't go, you just won't eat," says one woman.

State of complex emergency

This camp outside Wau is just one example of the many demands the National Society is facing in a country dealing with multiple, overlapping emergencies: international and internal conflict; tribal

Ukrainian Red Cross Society

18 April 1918. Part of the Soviet Alliance of Red Cross and Red Crescent Societies from 1926. Independent since 28 October 1992.

Red Cross Society of Georgia

8 September 1918. Part of the

Soviet Alliance of Red Cross and Red Crescent Societies from 1926. Independent since 26 March 1992.

Latvian Red Cross

20 November 1918. Part of the Soviet Alliance of Red Cross and Red Crescent Societies

from 1940; later became independent.

Lithuanian Red Cross Society

12 January 1919. Part of the Soviet Alliance of Red Cross and Red Crescent Societies from 1940; later became independent.

Liberian Red Cross Society

22 January 1919

Czech-Slovak Red Cross

6 February 1919; ceased to exist in 1993.

Estonia Red Cross

24 February 1919. Part of the

Soviet Alliance of Red Cross and Red Crescent Societies from 1940; later became independent.

Slovak Red Cross

14 February 1919; reformed in 1939 and 1993.

‘We love this work’

To get a sense of the commitment, passion and potential of the South Sudan Red Cross’s volunteer network — as well as the challenges they face — visit the branch of Aweil, a city of roughly 150,000 in Northern Bahr-el-Ghazal state, roughly 100 kilometres from the border with Sudan.

“We love this work of ours because what we are doing is not for one particular person but for all the people in Aweil, in South Sudan and even Africa,” says Mary Achol Athian Athian, one of nearly a dozen volunteers who, on a recent day, walked for several hours to hand out desperately needed household supplies at a camp for people who recently returned to South Sudan.

The Aweil volunteers usually walk, or ride bikes, to their field activities because the branch has only one motorized vehicle. Another volunteer named James (left) often spends days in the bush, riding his bike along bumpy roads and narrow footpaths, in efforts to reconnect separated families or to assess the needs of displaced people. “They are very unlucky,” he says. “They are in need of hospital care, medicine and shelter. So I offer myself to serve them according to the seven Fundamental Principles.”

Often, after setting out early in the morning, volunteers return late, hungry and tired. Like several of the National Society’s newer branches, the Aweil branch has little infrastructure, equipment and support to offer volunteers. Its headquarters has no water point, electricity, computer, internet access or latrine.

“We ourselves are like the beneficiaries... we ourselves are in need,” says branch director Peter Kuot, who is seeking a National Society partner to help build up the branch. This is critical, Kuot says, to improve aid delivery, enhance volunteer capacity and report to donors and partners more efficiently.

Nonetheless, these volunteers (some shown below) have achieved much. North of Aweil, in an area known as Jaas, some 2,600 families have settled after fleeing from fighting in the disputed border zone. “The volunteers have played a tremendous role,” assessing which families are most in need and helping to manage distribution of non-food items, says Olivia Kenna, an ICRC field officer who covers Northern Bahr-el-Ghazal.

In early July, the Aweil volunteers were also the first to welcome and assist 127 women and children who returned to South Sudan as part of an exchange of abductees with Sudan. National Society branches on both sides assisted with food, first aid, hygiene and tracing.



All photos: Juozas Cernius/IFRC



Polish Red Cross
27 April 1919

Formation of The League of Red Cross Societies

5 May 1919, at the Regina Hotel in Paris, the governors of the Red Cross Societies of France,

Italy, Japan, the United Kingdom and the United States signed the Articles of Association. The League of Red Cross Societies was born. A month later, the Covenant of the League of Nations was signed, with its own

historic article containing an undertaking by member states to encourage and promote the formation of and cooperation between Red Cross Societies.

Paraguayan Red Cross
12 November 1919

Myanmar Red Cross Society
1920 as part of the Indian Red Cross Society. Independent since 1 April 1937.

Red Crescent Society of Azerbaijan
10 March 1920. Part of the Soviet

Alliance of Red Cross and Red Crescent Societies from 1923. Independent since 1991.

Armenian Red Cross Society
19 March 1920. Part of the Soviet Alliance of Red Cross and Red Crescent Societies from

Facing the challenges

Volunteers in other branches, often with support from other National Societies or the ICRC, are coming up with creative ways to help beneficiaries and generate support for their actions. Volunteers at some branches, such as in Raja, in Western Bahr-el-Ghazal state, cultivate food that benefits beneficiaries and volunteers.

Still, internal conflict and other forms of violence are thwarting volunteer and branch development in some areas. In the city of Bor, in Jonglei state, for example, volunteers had been helping to bring wounded people to the hospital. But insecurity forced many of them to flee.

Even in Wau, with one of the most established branches, volunteers face challenges to their mission. "During the Wau clashes in 2012 we went to distribute non-food items to the most vulnerable," one volunteer recalls. "But there were people who used their positions to get something. And if you say, 'no, my target is these people', they say the South Sudan Red Cross is discriminating and not distributing equally."

The South Sudan Red Cross plans a nationwide media campaign next year to explain its role in helping the most vulnerable. Meanwhile, the volunteers say they also need training to help them develop more skills, as well as ways to support themselves and their activities.

Despite the challenges, Wau branch director Leon Arkangelo (above) says volunteers have gained tremendous respect for their consistent action. "Last year, the volunteers had positioned their truck by the airport to welcome returnees but the plane carrying the returnees crashed," he recalled. "The only ones able to reach the people were the volunteers."



Under a shady tree



The volunteer efforts are also crucial in non-emergency settings. In the village of Nygoro, just across the Jur River from the city of Wau, a serious lack of basic water, sanitation and health facilities has exacerbated a range of chronic health problems. In response, the South Sudan Red Cross dug two new boreholes and created local health clubs (below right), in which volunteers train residents to take health knowledge back to their communities.

Sitting under the shade of a mahogany tree, which is surrounded by neatly cultivated rows of sorghum and peanuts, Red Cross volunteers pass around paper sheets with illustrations of various health practices, from proper use of a condom to treatment of small wounds. "Before the Red Cross came, people who had a wound wouldn't know how to wash it out properly," says one woman. "But now they know how to wash it and how to keep it clean."

These efforts have had a significant impact, says Lino Madut Dong, the village chief (left). "The number of sick people has been reduced," he says, adding that the village still needs a health clinic because "when children are sick with malaria or diarrhoea, women must take their children" many kilometres to get care.

Building and improving health facilities, as well as finding and training staff, are some of the key challenges facing Isaac Cleto Rial, minister of health for Western Bahr-el-Ghazal. "This is a very young nation coming out of a long war," says Rial, a surgeon who himself regularly goes to the operating room during emergencies because there are not enough surgeons to meet the needs.

As auxiliary to the state, he says, the South Sudan Red Cross plays a critical role in both developing healthy communities and responding in emergencies. "They are always the first to be there," he says. "And of course they, and the ICRC and the other National Societies, have been doing this for a long time. . . they have been of tremendous assistance to the health of the South Sudanese people."



1925. Independent since 26 March 1992.

Indian Red Cross Society
20 March 1920

German Red Cross
25 January 1921 merger of all

Red Cross associations to form the German Red Cross.

Albanian Red Cross
4 October 1921

Ecuadorian Red Cross
27 December 1922

Guatemalan Red Cross
22 April 1923

Red Crescent Society of the Islamic Republic of Iran
3 April 1923 (formerly Persian Red Lion and Sun).

Red Crescent Society of Kyrgyzstan
1 October 1923. Part of the Soviet Alliance of Red Cross and Red Crescent Societies from 1926. Independent since 26 March 1992.

Red Cross Society of the Republic of Moldova
1924. Part of the Soviet Alliance of Red Cross and Red Crescent Societies from 1926. Independent since 1 December 1992.

and criminal violence; chronic poverty and economic stagnation, as well as intermittent flooding and drought.

In the north, a low-intensity conflict with Sudan continues along contested border areas, causing whole communities to flee. In the eastern state of Jonglei, ongoing inter-communal violence has also led to mass displacement and extensive casualties in areas difficult for humanitarians to access. Clashes between tribes over cattle rustling in Jonglei, Warap, Lakes and Unity states have also turned extremely violent and the ICRC has deployed three mobile surgical teams to treat the wounded in recent months.

"We are operating in a complex emergency," says John Lohor, deputy secretary general of the South Sudan Red Cross. "The needs are everywhere and this poses a challenge to the National Society. We need to prioritize in terms of what we can do and what we cannot do, keeping in mind the other humanitarian actors within the country."

Indeed, the South Sudan Red Cross is far from alone. During years of conflict prior to independence that devastated the population and crippled development, a large-scale humanitarian network has grown as part of an international effort to save lives, ease the suffering and stabilize the country. At any

of the South Sudan's airports, the runways are lined with planes and helicopters marked with emblems: ICRC, World Food Programme, UNICEF, Médecins sans Frontières, UN, among others. On the streets of some cities, nearly all the four-wheeled vehicles are white Land Cruisers bearing non-governmental or UN logos.

Meanwhile, the lack of basic infrastructure makes delivering assistance extremely challenging. The country's roads — long straight ribbons of red gravel cut through kilometres of dense bush and forest — are pockmarked with potholes and often impassable during the rainy season.

There is no countrywide power grid and no municipal water or power systems. Businesses and residences are powered by individually owned, petrol-fuelled generators while water is taken from private wells or public water points. There are no land-based phone lines, cell phone coverage is spotty and reliable internet is rare.

The social and economic indicators are not much better. South Sudan has some of the lowest scores for maternal health and infant mortality, a severe shortage of trained doctors and nurses and one of the highest illiteracy rates among African nations. Some 90 per cent of South Sudanese live on less than US\$ 1 per day, according to the UN.

Great expectations

In this environment, the humanitarian sector is playing a critical role and the South Sudan Red Cross, the newest member of the Red Cross Red Crescent family, is making a visible difference (see accompanying article 'We love this work').

Already, the National Society has achieved a lot. In only two short years, the National Society has worked with Movement and government officials to convene a General Assembly, enact the National South Sudan Red Cross Act, which establishes its role as auxiliary to the new South Sudan government and launch a major volunteer recruitment drive. And in July last year, with advice and support from the National Society and the Movement, the country became the latest signatory to the 1949 Geneva Conventions and their Additional Protocols.

For Arthur Poole, the secretary general of the South Sudan Red Cross, the rapid evolution of this

Members of the South Sudan Red Cross emergency action team in the city of Wau present a simulation of emergency first aid to show how volunteers deliver neutral and impartial humanitarian assistance during times of unrest and conflict. Photo: Juozas Cernius/IFRC



Red Cross of the Democratic Republic of the Congo (Kinshasa)

19 February 1924 as part of the Belgian Red Cross. Independent since 30 June 1960.

Icelandic Red Cross

12 October 1924

Red Crescent Society of Uzbekistan

3 October 1925. Part of the Soviet Alliance of Red Cross and Red Crescent Societies from

1926. Independent since 26 March 1992.

Red Crescent Society of Turkmenistan

26 March 1926 as part of the Soviet Alliance of Red Cross and Red Crescent Societies.

Independent since 26 March 1992.

Dominican Red Cross

16 May 1927

Red Crescent Society of Tajikistan

23 December 1927 as part of

the Soviet Alliance of Red Cross and Red Crescent Societies. Independent since 23 March 1992.

Kenya Red Cross Society

1930 as part of the British Red Cross. Independent since 21 December 1965.

➡ The ICRC is also a key provider of humanitarian assistance in areas affected by violence. Here, that usually means inter-communal violence or cattle raids that often leave dozens of people wounded and dead. These ICRC doctors are caring for people in Malaka, near the country's north-eastern border.

Photo: Marco Di Lauro/Getty Images/ICRC

new National Society is profound. "For me, it is something great in my life after struggling for so long to build up the National Society," says Poole, who worked from the early 1970s until independence to help establish the Sudanese Red Crescent in the southern part of the country.

It was often a challenge to operate as a Red Crescent in the predominantly non-Muslim south, Poole says. Nevertheless, with support from the ICRC, the IFRC and other National Societies, Poole and colleagues established the first branches (in Juba, Malaka and Wau, which today still have vibrant volunteer networks) and built up acceptance for the National Society's neutral humanitarian mission.

Since then, partner National Societies (most of them among the first created in Europe nearly 150 years ago) continue to invest in South Sudan Red Cross operations and the capacity of its branches. The ICRC, for its part, continues to train personnel and pays salaries for 60 of the Society's 100 employees. Partner National Societies pay for 35 staff salaries and the IFRC pays for five. All these Movement components also provide training, equipment and aid supplies.

Today, the South Sudan Red Cross's challenges are akin to those facing the country as a whole: how to develop the capacity and resources to eventually be independent from external assistance. "This will take time," Poole says. "Our country is not fully developed. There is still war going on and we don't have adequate security or systems in place to invite donors to come and support us."

There is also still a great need of capacity building and training in key aid delivery areas, from health and first aid to water and sanitation, tracing, communication and dissemination, Poole adds.

In the meantime, expectations are high. As one of the few functioning indigenous civil society organizations in the country, high hopes are being placed on this new National Society — by beneficiaries, partners, government agencies and donors.

"There are quite a lot of expectations based on the enormous needs of the country," says Lobor. "But we cannot take all initiatives because we have first of all to know our capacity and see what we can and cannot deliver. If we try to do too much, we will be pulled apart."



Photo: Juozas Cernius/IFRC

"We are operating in a complex emergency. The needs are everywhere and this poses a challenge to the National Society."

John Lobor, deputy secretary general of the South Sudan Red Cross



Historic lessons

Amid all the talk of building the South Sudan Red Cross's capacity, it should not be forgotten that this National Society and its volunteers — full of energy yet building on their experience and history under the Sudanese Red Crescent — also have much to teach the Movement as it marks its 150th year. The skills developed while bringing neutral assistance in war-torn communities could help sharpen the capacity and understanding among those in even the most well-established National Societies.

"My dream is that in the next five years the South Sudan Red Cross will first become deeply rooted in communities through its volunteer network, so that people will have no doubts about its capacity to mobilize and deliver services to the people," says Lobor.

"Next, it will become the partner of choice for the Movement and other international organizations working in South Sudan and be seen nationally and regionally as a key humanitarian player, not only in South Sudan, but also supporting operations of other National Societies in the region." ■

By **Malcolm Lucard**

Malcolm Lucard is the editor of *Red Cross Red Crescent*.

Magen David Adom in Israel
7 June 1930

Zimbabwe Red Cross Society
1930 as part of the British Red Cross. Independent since 2 October 1981.

Baphalali Swaziland Red Cross Society
1932 as part of the British Red Cross. Independent since 13 October 1970.

Iraqi Red Crescent Society
1 April 1932

Haiti Red Cross Society
29 May 1932

Malawi Red Cross Society
1933 as part of the British Red Cross. Independent since 13 January 1967.

Nicaraguan Red Cross
10 January 1934

Seychelles Red Cross Society
1935 as part of the British Red Cross. Independent since August 1989.

Ethiopian Red Cross Society
8 July 1935

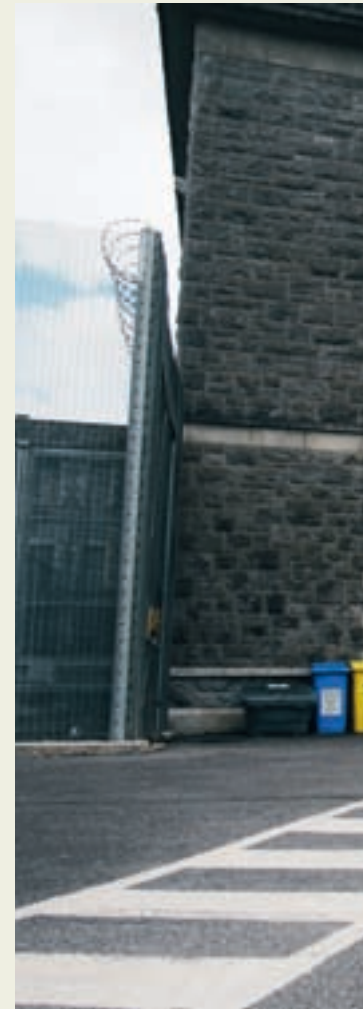
Principles behind bars

men, transform prison culture, reduce violence and improve the physical and psychological health of inmates. Since the Community-based Health and First Aid programme (CBHFA) was put in place (via a partnership between the Irish Prison Service, the national Vocational Education Committee and the Irish Red Cross), the percentage of fights involving an illicit, handmade blade has gone down from 97 per cent to 10 per cent in one year. The result has been fewer injuries and reduced prison health-care costs. But the real beauty of the programme is that the volunteers don't come from outside the prison, they are the inmates themselves. Sporting black T-shirts with the seven Fundamental Principles listed on the back, the prisoners run a host of projects — from hygiene promotion to HIV counselling to violence prevention — which prison health officials tried but could never achieve. These photos and words tell the story of those volunteers and the lives that have been changed.

Photo: Jarkko Mikkonen/IFRC



In ten of 14 prisons in Ireland, special-status Irish Red Cross volunteers* use the Fundamental Principles of the Red Cross and Red Crescent Movement to change the lives of troubled



“I didn't appreciate life,” says Eddie, an inmate at Wheatfield Prison speaking of the days before he was sentenced nearly nine years ago. “I was hanging out on street corners taking drugs, robbing cars, doing everything I shouldn't be doing. I went on getting into more and more trouble until one day I ended up in a prison cell facing a life sentence.”

“There were two things that changed my life,” he says. “One of them was the [prison] psychologist and the other was joining the Irish Red Cross.” The psychologist helped Eddie deal

with his emotions, while the Irish Red Cross gave him a sense of purpose and value. Prisoners who volunteer complete an intensive course in CBHFA, covering basic first aid, disease prevention, health promotion and community mobilization.

*The Irish Red Cross agrees to have prisoners become special status Irish Red Cross Volunteer Inmates. Should an inmate wish to continue volunteering with the Irish Red Cross upon their release, they must apply in the normal way as any member of the public and comply with all vetting requirements.

Afghan Red Crescent Society
9 April 1934

The Sri Lanka Red Cross Society

1936 as part of the British Red Cross. Independent since 1 April 1949.

Sierra Leone Red Cross Society
1937 as part of the British Red Cross. Independent since 16 August 1962.

Honduran Red Cross
24 September 1937

Kazakh Red Crescent
1938 as part of Soviet Alliance of Red Cross and Red Crescent Societies. Independent since 26 March 1992.

Mongolian Red Cross Society
16 June 1939

Irish Red Cross Society
6 July 1939

Papua New Guinea Red Cross Society
1939 as part of the Australian Red Cross. Independent since 7 April 1976.

The Bahamas Red Cross Society
1939 as part of the British Red Cross. Independent since 23 June 1975.

The Trinidad and Tobago Red Cross Society
12 July 1939 as part of the



Photo: Jarkko Mikkonen/IFRC

The seven Fundamental Principles of the Red Cross Red Crescent Movement as adapted for the Irish prison environment:

Humanity

We show kindness, understanding and respect to everyone we talk to.

Impartiality

We don't discriminate with a wide range of nationality, culture and different crimes, we treat everyone the same.

Neutrality

We don't take sides in any issues or arguments.

Independence

Independent from Irish Prison Service but follows their rules.

Volunteer service

We don't look for any gain. We do it because we get great satisfaction.

Unity

Only one Red Cross, all work as a team.

Universality

All Red Cross in Irish prisons are equal, share responsibilities and hoping to set up in all prisons.

➡ The seven Fundamental Principles of the Red Cross and Red Crescent Movement are central to the programme's effectiveness. "Right from day one, the volunteers learn about the Fundamental Principles," says the programme's creator, Graham Betts-Symonds, a former IFRC staffer who is now CBHFA programme manager for the Irish Prison Service.

"The prisoners are aware of the Fundamental Principles — and not just from reading out of a book. They can tell you what it means in terms of prison life. Neutrality to them means not taking sides with one gang against another. Not to hold a grudge. It is really important. It changes the whole dynamic of prison life."



Photo: Ombretta Baggio/IFRC

British Red Cross. Independent since 5 May 1963.

Suriname Red Cross
20 June 1940 as part of the Netherlands Red Cross. Independent since 1975.

Antigua and Barbuda Red Cross Society
1941 as part of the British Red Cross. Independent since 22 July 1983.

The Uganda Red Cross Society
1941 as part of the British Red Cross. Independent since 30 July 1964.

Mauritius Red Cross Society
1941 as part of the British Red

Cross. Independent since 18 December 1973.

Nigerian Red Cross Society
1942 as part of the British Red Cross. Independent since 29 September 1960.

Saint Kitts and Nevis Red Cross Society
22 February 1942 as part of the British Red Cross. Independent since 24 July 1985.

Focus

➡ “The most important and challenging project that the volunteers got involved in was the weapons amnesty,” says Irish Red Cross volunteer John.¹ At Wheatfield, there had been a major problem with inmates cutting each other using handmade knives. “There was a cutting happening nearly every two weeks. One fellow nearly died.”

John and other volunteers arranged meetings with inmates and prison authorities to figure out what to do. Eventually, they agreed on a weapons amnesty in which inmates could hand in weapons anonymously. “But we asked, ‘How are we going to get that started?’ I said, ‘Let’s use the seven Fundamental Principles. A different one on each day as a countdown — seven down to zero.’”

“We started off with humanity,” says John, adding that by day five and six, the inmates understood the principles behind the programme and that in a few days the amnesty would expire. Today, the prison is virtually free of fights involving handmade blades. “And that’s something for the Irish Red Cross to be proud of because that never happened in the jail before. They are saving the time of emergency medical staff and saving people from going to the hospital. It’s a massive savings in terms of the budget.”

¹ Not his real name



Photo: Ombretta Baggio/IFRC



Photo: Ombretta Baggio/IFRC

➡ The programme started in 2009, when Graham Betts-Symonds began looking for a way to improve access to health care within Wheatfield Prison in a comprehensive way. “The prison health care was very reactive,” he says, adding that hygiene was poor and prisoners were apathetic about their health. “Prisoners went into the infirmary when they were sick. Nobody was looking at how to live a better and healthier life.”

So Betts-Symonds decided to apply lessons he had learned during humanitarian missions, during which he helped local communities create systems for managing and improving their own health. In the prison setting, that meant creating community health committees, made up of prison health staff, teaching staff and volunteers. “The local community in a prison is the prisoners themselves,” he says. “So what we needed was something that created action and empowerment within that community.”

The key ingredient to create that community ownership is the prisoners themselves, says Lydia O’Halloran, CBHFA programme manager for the Irish Red Cross who also played a key role in the programme’s formation. “The Irish Red Cross came up with the idea that we would have Irish Red Cross inmate volunteers within the prisons — that has never happened before in the world.”

Syrian Arab Red Crescent

30 May 1942 (United Arab Republic from September 1959 to September 1961; Syrian Arab Red Crescent from 18 February 1962).

Indonesian Red Cross Society

17 September 1945 as the Netherlands Red Cross Indonesia Section; transferred authority to the Indonesian Red Cross Society on 16 January 1950.

The Red Cross of The Former Yugoslav Republic of Macedonia

17 March 1945 as part of the Yugoslav Red Cross. Independent since 21 May 1992.

Liechtenstein Red Cross

30 April 1945

Lebanese Red Cross

9 July 1945

Red Cross Society of the Democratic People’s Republic of Korea

18 October 1946

Vietnam Red Cross Society

23 November 1946



Photo: Jarkko Mikkonen/IFRC



Photo: Jarkko Mikkonen/IFRC

“My father died from AIDS when I was 10, my mother when I was 15,” says Ryan, another Irish Red Cross volunteer in Wheatfield Prison. “After my mother died, I turned to alcohol and drugs.”

“When I came into prison, my life was upside down,” recalls Ryan, adding that he was also afraid he had contracted HIV.

Another Red Cross volunteer inside Wheatfield helped Ryan get an HIV test. “It came back negative and it was a huge weight off my shoulders. It was a second chance.”

He decided to take up John’s offer to become a Red Cross volunteer. “He got me started with first aid and I loved it. I couldn’t believe that I could deal with these things. I never believed in myself. That is how it all started and I haven’t looked back.”

He says it’s especially satisfying to help other inmates overcome the kind of addictions he once faced. “I feel like I am giving the other lads some hope,” he says. “I was dependent on drugs and alcohol when I came in, I know how it feels. This was the help I really needed.”

“I’d like to continue with the Red Cross on the outside if possible. I don’t want to go back to the old Ryan, the old lifestyle — that will never happen.”

Philippine Red Cross

13 January 1947

Pakistan Red Crescent Society

20 December 1947 (the Pakistan Red Cross Society from 1947 to 1973).

Jordan National Red Crescent Society

27 December 1947

Botswana Red Cross Society

1948 as part of the British Red Cross. Independent since 17 January 1968.

Brunei Darussalam Red Crescent Society

1948 as part of the British Red Cross. Independent since 1 August 1983.

Malaysian Red Crescent Society

1948 as part of the British Red Cross (the Malaysian Red Cross Society from 1948 to 1975). Independent since 22 November 1957.

The Guyana Red Cross Society

1948 as part of the British Red Cross. Independent since 29 December 1967.



Keeping it clean

Water and sanitation projects are having a major social impact in some of Côte d'Ivoire's poorest communities. But how can Red Cross Red Crescent programmes encourage local ownership and long-term viability?

DEEP IN CÔTE D'IVOIRE's countryside, marked by a rich tapestry of rice fields and plantations of cocoa and rubber trees, changes are under way in villages that have been scarred by war or overlooked by government services.

More than a decade of political instability followed by a six-month civil war in 2011 left the country's water and sanitation system in tatters. In the villages identified by the Red Cross Society of the Côte d'Ivoire before the war, only 17 per cent had access to toilets and half of the water points were not functioning.

Red Cross Red Crescent hygiene promoters and technical experts began working in these communities using an approach known as PHAST (Participatory Hygiene and Sanitation Transformation) in which the villagers themselves set up water and sanitation committees responsible for hygiene and waste management.

The war, however, not only delayed the start of the project by ten months, it also made it more dif-

Red Cross of Monaco
3 March 1948

The Gambia Red Cross Society
1948 as part of the British Red Cross. Independent since 1 October 1966.

Zambia Red Cross Society
1949 as part of the British Red Cross. Independent since 22 April 1966.

Tanzania Red Cross National Society
1949 as part of the British Red

Cross. Independent since 7 December 1962.

Jamaica Red Cross
1948 as part of the British Red Cross. Independent since 9 July 1964.

Saint Lucia Red Cross
16 March 1949

Singapore Red Cross Society
3 April 1949 as part of the British Red Cross. Independent since 6 April 1973.

Saint Vincent and the Grenadines Red Cross
15 July 1949 as part of the British Red Cross committee. Independent since 15 May 1984.



PASSING THE BATON

Part one in a series about how humanitarian organizations can help build projects that continue in local hands after international relief workers leave.

where diseases such as diarrhoea, dysentery, cholera and typhoid are endemic.

Community-led total sanitation

In March 2012, Zakari Issa, IFRC water and sanitation delegate, added a revolutionary new technique to the project — ‘community-led total sanitation’, which is sometimes more familiarly referred to as the ‘shame and disgust’ approach because it forces communities to confront publicly problems of open defecation. It’s also part of a strategy that aims to encourage communities to adopt hygiene and sanitation as their own issue, not something imposed from the outside.

“I had to adapt to the realities on the ground and change the way we worked in order to ensure ownership and long-term viability,” explains Issa.

At community meetings convened by the village chief, the hygiene promoters facilitate a series of activities during which villagers draw a map showing their houses, existing latrines and where people defecate in the open.

Then, the promoters calculate the amount of excrement produced over a year and the cost of water-borne diseases. Villagers then go on a ‘walk of shame’ to the areas of open defecation before the hygiene promoters graphically show the link between excrement and food and water contamination.

“The community is so ashamed and disgusted that they immediately want to build latrines,” says Marie Louise N’takpe, a hygiene promoter for 11 villages in Divo, a region hard hit by the civil war and with poor social cohesion. “The technique creates demand as they see open defecation is unacceptable.”

The Côte d’Ivoire Red Cross advises on the design and location of the outdoor latrines while villagers draw up a plan of action for their construction and maintenance, as well as for other hygiene-promoting activities such as encouraging hand-washing and raising household drying racks for kitchen utensils away from animals or from the ground.

Many of the villages involved in the project have since been declared by the authorities as ‘open-defecation free’, marking a major cultural change in

📍 In many villages in Côte d’Ivoire, volunteers help communities create sanitation maps that help understand and pinpoint health concerns, such as places of open defecation, water sources or livestock pens. Photo: Red Cross Society of Côte d’Ivoire

difficult to mobilize communities that were either too afraid to hold meetings due to ongoing security concerns or too mistrustful to work together.

“Nine months ago the Red Cross helped us understand the link between hygiene and disease,” says Oboute Noe, head of the water and sanitation committee for Godililie, a village in the Divo region in south-west Côte d’Ivoire. “Now we are on target for our goal of one latrine per household and fewer villagers are falling ill from water-borne diseases.”

Godililie is one of 65 villages in the country’s west, south-west and south benefiting from a three-year project implemented by the IFRC and the Red Cross Society of Côte d’Ivoire. The food multinational Nestlé has provided US\$ 1.48 million to fund the project, which seeks to improve health in communities

Red Cross of the Republic of San Marino

8 October 1949

Belize Red Cross Society

1950 as part of the British Red Cross. Independent since 18 August 1983.

Cyprus Red Cross Society

1950 as part of the British Red Cross. Independent since 1 November 1969. Recognized by the ICRC 23 February 2012; admitted provisionally to the IFRC in September 2013, pending

formal decision at 2013 General Assembly.

Lesotho Red Cross Society

1950 as part of the British Red Cross. Independent since 17 November 1967.

The Solomon Islands Red Cross

1951 as part of the British Red Cross. Independent since 15 July 1983.

Republic of Vietnam Red Cross

27 October 1951 (South Vietnam (ceased to exist in 1976)).

Burkinabe Red Cross Society (Burkina Faso)

1952 as part of the French Red Cross. Independent since 31 July 1961.



Often, important solutions need to be low-tech and inexpensive, such as this water source for hand washing, provided by the National Society and the IFRC.

Photo: Claire Doole/IFRC

behaviour. Jacques Bi Kouassi, vice-president of the youth committee for Jbkro village in Gagnoa region, says he is proud when he can point his many visitors to his latrine and not to a patch outside.

Taking ownership

The project's long-term viability will only be possible when villages take ownership and responsibility. This is being done as communities choose members of water and sanitation committees, which organize the construction and maintenance of household latrines, promote village hygiene and ensure rubbish is put in covered pits and courtyards are swept. Anyone who does not respect the rules can be fined.

"We have fined several households," says Pauline Brois Konan, responsible for keeping an area of Jbkro tidy. "We put the money in a bank account so we can buy cleaning materials."

Volunteers with the Red Cross Society of Côte d'Ivoire carry out spot checks once a week to see how well the community is operating on its own before its technicians organize the construction of latrines and hand-washing facilities for the local school.

Committee members also learn to repair water pumps, some of which have stood idle for more than 20 years. One reason is that over the years, different models of pumps have been installed by numerous international organizations from different countries, making the supply or purchase of spare parts extremely difficult. In response, the ICRC and IFRC successfully encouraged the government to enact nationwide standards on pump installations.

Most importantly, it's critical that communities feel they themselves own the pump — that they are the ones who can and must maintain the service.

This is not the case in many places where international organizations have installed pumps, says IFRC water and sanitation expert Robert Fraser.

"Communities often say that it is Oxfam's or World Vision's pump rather than seeing it as their own," he says, "so that when the organization leaves and it breaks down they don't feel they have the authority or the skills to repair it."

To make sure infrastructure is maintained, Côte d'Ivoire Red Cross technicians train a member of the water and sanitation committee to repair the village pump in the event of a future breakdown and provide a toolkit so the committee member can also earn some extra money repairing pumps in neighbouring villages.

"I keep half of what I earn from repairing pumps elsewhere and the rest is to pay for spare parts for future repairs to our pump," explains Yves Dorange Zebi from Godililie. Zebi is also responsible for collecting the monthly subscription of 200 CFA francs (US\$ 0.41) agreed by the community for drawing drinking water from the pump. The money collected also goes into a bank account for future repairs.

Greater expectations

This kind of pay-for-service model is difficult to impose during the first phase of emergency operations, but it is becoming more common in the recovery phase after an emergency or in the kind of post-conflict, development-oriented projects now under way in Côte d'Ivoire's villages.

While it may seem strange for humanitarian organizations to ask people to pay for water they provide, the money stays in local hands and provides a resource for pump repairs. "If they are paying, there is ownership, they will have higher expectations," says Fraser. "They'll ask, 'I'm paying for this, why isn't it fixed?'"

The approach doesn't work in all communities, he adds. Money collection can also cause mistrust in some communities and the decision to collect money must be taken on a case-by-case basis.

Experience in other countries shows some encouraging results, as well as many challenges. A 'look back' study on the sustainability of water and sanitation projects in the Mount Darwin area of Zimbabwe showed that after two years, there were widespread improve-

German Red Cross (East Germany)

23 October 1952. Reunited with German Red Cross 3 January 1991.

Malta Red Cross Society

1952 as part of the British Red

Cross. Independent since 24 October 1991.

Samoa Red Cross Society

1952 as part of the New Zealand Red Cross. Independent since 1 January 1983.

Fiji Red Cross Society

1954 as part of the British Red Cross. Independent since 27 September 1971.

Somali Red Crescent Society

1954 as part of the British Red Cross. Independent since 27 April 1963.

Lao Red Cross

1 January 1955

Cambodian Red Cross Society

18 February 1955

Algerian Red Crescent

11 January 1956

ments in hand-washing and other important hygiene practices. Local water committees also continued to function with a wide range of activities. The practice of cash contributions, however, was still spotty, with most communities taking a reactive approach, raising money once their pump had broken down.

A successful exit strategy

Building in part on the lessons learned in places such as Zimbabwe, the Red Cross Society of Côte d'Ivoire last year introduced local, regional and national steering committees to facilitate its exit strategy from the communities, and to ensure the authorities could give input and see what had been achieved.

"In some of the villages there were problems of leadership, but most have been resolved and I am confident the project will be viable in the long term," says Mathieu Lago, deputy chief administrator for Divo.

At the end of the project in October 2013, the local steering committee — made up of the village chief and representatives from each ethnic group — will continue to supervise the water and sanitation committee.

A Red Cross volunteer will check that the sanitation projects are working well.

"I shall visit each village once every two months to see if the pump is working and to encourage the different committees to keep the momentum going," says Hervé Vilard Zama Attebi, Red Cross volunteer for the Divo region.

Some communities are well on the way to sustainability. In addition to the requisite school hygiene club, the village of Jbrko has created an association to keep the village tidy.

"We now have 86 children from 7 to 18 years of age who sweep the village twice a week," notes Aimé Cedric Koffi Konan, a young tailor who set up the association and gave the children T-shirts emblazoned with the words: "Don't dirty my environment".

The village also plans an annual Red Cross day where they will run cleaning and sports competitions. Meanwhile, the track leading to the new school latrines now boasts the name of Red Cross Street.

The signs for long-term viability are encouraging, although there are a handful of larger villagers where it has been difficult to mobilize the whole community.

"If in a couple of years' time we find that 75 per cent of the villages have kept the momentum in sustaining water and sanitation facilities, we can consider it a real success, given the country is still suffering the consequences of war," adds IFRC's Zakari Issa.

Scaling up

The success of the water and sanitation project has improved the visibility of local branches of the Red Cross in remote rural areas and boosted recruitment, with many villagers becoming volunteers. "We hope this project will now have a snowball effect and we can expand it to neighbouring villages and areas of the country," says Monique Coulibaly, president of the Red Cross Society of Côte d'Ivoire. She adds that the National Society's local office, which had little expertise in water and sanitation, is now considered a leading light in the country.

In the farming communities of Côte d'Ivoire, the project continues to convey a sense of solidarity and social cohesion fragmented after years of instability and conflict.

"Thanks to the Red Cross we are better organized as a community and better able to achieve other development goals," says Jacques Kouassi Koame, a member of the Jbkro steering committee. "We have been put on the map and are now lobbying the authorities for a health clinic and electricity in our village to finally bring us into the 21st century." ■

Claire Doole

Claire Doole is a freelance journalist based in Geneva, Switzerland.

"I had to adapt to the realities on the ground and change the way we worked in order to ensure ownership and long-term viability."

Zakari Issa, IFRC water and sanitation delegate

Volunteers help organize community members to form water and sanitation committees that engage in numerous tasks, from construction and maintenance of household latrines to promotion of hygiene, rubbish removal and the sweeping of courtyards and public areas.

Photo: Claire Doole/IFRC



Grenada Red Cross Society

1955 as part of the British Red Cross. Independent since 21 August 1981.

Tunisian Red Crescent

7 October 1956

The Sudanese Red Crescent

30 October 1956

Ghana Red Cross Society

1 October 1957

Libyan Red Crescent

5 October 1957

Moroccan Red Crescent

24 December 1957

Dominica Red Cross Society

28 January 1958

Yemen Red Crescent Society

1958 as part of the British Red Cross. Independent since 16 July 1970.

Togolese Red Cross

26 February 1959

Red Cross of Benin

July 1959

The Barbados Red Cross Society

17 February 1960 as part of the British Red Cross. Independent since 31 July 1969.

The digital h

NEVER BEFORE has so much information been available to so many so quickly. According to the IFRC's *World Disasters Report* for 2013, which focuses on technology and humanitarian action, this communications revolution is having a profound impact on the way people respond to emergencies.

Around the world, there are now some 6.8 billion mobile phone subscriptions and 2 billion mobile broadband internet subscriptions, according to the report. (These are impressive numbers considering that the earth's population is now estimated at roughly 7.1 billion. The digital divide is still vast: only 54 per cent of people in Africa have mobile phones while in Europe, there are more mobile phone subscriptions than people. Still, in the last five years, mobile phone subscriptions have doubled in developing countries.

At the same time, there's been exponential growth in the number of tasks these devices perform: exchanging money, buying goods, getting health advice, sharing first-aid tips, following the news or keeping in touch with friends and family, to name a few.

They can also help save lives. During Typhoon Pablo in 2012, emergency re-

sponders in the Philippines (where more than 90 per cent of the population has mobile phones) processed thousands of Twitter messages — including images and videos — to rapidly create maps of storm damage that helped them direct their response more effectively.

When linked with satellite imagery and geographic information systems (GIS), this can help relief organizations pinpoint aid delivery, says Robert Mardini, ICRC head of operations for the Near and Middle East. "This is clearly changing the way we work," Mardini told those gathered for a GIS conference in April 2012. "Beneficiaries will increasingly have their say about when and how humanitarian organizations will work."

Still, the humanitarian community needs to catch up, argues Patrick Vinck, the editor of this year's *World Disasters Report*. The director of the programme for vulnerable populations at Harvard University's Humanitarian Initiative, Vinck writes that humanitarian organizations are still not equipped to analyse vast amounts of emergency data and turn it into information upon which first responders can act. But they are working on it. Here are a few examples.

First aid at your fingertips

The screen of the smart phone shows a 19-second video of a mother holding her daughter's forearm under the kitchen faucet. Meanwhile, a calm, soothing voice offers instructions: "Cool the burn under cool running water for at least ten minutes." This scenario is from a new smartphone application, developed by the British Red Cross, that aims to put first aid into the hands of everyone. Scrolling down through the smartphone screen, the user sees simple, step-by-step instructions with animated illustrations, followed by series of common questions such as, "Should I put ice on the burn?" Users can also place a direct telephone call to emergency services with a push of one button. The American Red Cross has adapted the app for the US market and has released another series that helps people prepare for hurricanes, earthquakes, tornados and wildfires. Now both these National Societies and the IFRC — through its Global Disaster Preparedness Center and Global First Aid Reference Centre — are working on a universal first-aid app that can be adapted by National Societies around the world to put life-saving skills in even more hands.

The digital village

The digital humanitarian revolution is still about people helping people. Consider the Kenya Red Cross' *iVolunteer* network, in which volunteers all over the country monitor social media around the clock and post Twitter messages about ongoing emergencies. "Hit and run at the Kangemi market," reads one recent report. "Casualty onsite." The information is then shared with the National Society's Emergency Operations Centre, or one of its 63 local branches, to allow a faster and more targeted response.

The computer crowd

One of the big challenges is how to process the flood of data that comes in during emergencies. This is

To find out more

For more about the humanitarian potential and challenges of new technology, see the *World Disasters Report* at www.ifrc.org.

Cameroon Red Cross Society

30 April 1960

Red Cross Society of Côte d'Ivoire

13 October 1960

Tonga Red Cross Society

1961 as part of the British Red Cross. Independent since 10 August 1972.

Vanuatu Red Cross Society

1962 as part of the British Red Cross. Independent since 30 July 1980.

Rwandan Red Cross

July 1962

Senegalese Red Cross

Society

29 January 1963

Saudi Red Crescent

Authority

8 June 1963

Red Cross Society of Niger

16 July 1963

Nepal Red Cross Society

4 September 1963

Burundi Red Cross

31 July 1963

humanitarian

one reason that in March 2012, the American Red Cross opened its Digital Operations Center, where volunteers and staff synthesize 'big data' found in social media conversations in order to better understand how disasters are unfolding on the ground.



Dividing the tasks

Often, the digital volunteers and computer systems used to process the data are dispersed throughout the world. By dividing up computing and data management tasks to digital volunteers around the world, projects can be accomplished that could never be done by any one single organization. One example is SyriaTracker, one of the longest-running crisis maps. Another is the ICRC's project to expand and repair the water supply system in conflict-affected Walikale, in the Democratic Republic of the Congo. ICRC engineers needed to better understand population distribution in the area so they asked volunteers with OpenStreetMap — an internet map website that allows people to create their own digital maps — to mark roads and buildings on satellite images in order to help ICRC teams determine where to lay pipes, dig reservoirs and deliver water.

Instant data

Data collection has often been a weak point for humanitarian organizations but mobile phones may make it easier. In 2011, the IFRC piloted a new way to collect data about the spread of malaria in communities in Kenya, Namibia and Nigeria. Called Rapid Mobile Phone-based Survey (RAMP), the methodology uses web-based, freely accessible mobile phone-based software to collect and upload data directly from the field.

Cash transfers

Instead of shipping bags of rice or oil, relief organizations can now use mobile phone networks to distribute electronic cash vouchers where viable. These vouchers are sent directly to people's mobile phones through SMS and recipients can withdraw cash or goods at identified merchants. This reduces shipping and other overhead costs, speeds up delivery and requires fewer staff and volunteers. It's also safer than having relief workers carry cash into remote areas.

Challenges

Great expectations: Better communication with beneficiaries often means the expectations of people affected by conflict and other disasters are also greater. "But the logistical, financial, travel and other constraints we face on the ground remain unchanged," notes the ICRC's Mardini.

False information: Real-time crisis maps can enhance safety for people affected by emergencies as well as humanitarian workers. But humanitarian platforms could be tainted with false information, or be disrupted. And there is the challenge of monitoring vast grass-roots networks of e-volunteers.

Field versus screen: Could new technology divert attention and resources from on-the-ground field work and human resources? Humanitarian groups stress that technological innovations are only as good as the experience of humanitarian workers who will use or help create the data in the field.

Glitches: How will communities and relief groups function if mobile phone or satellite systems fail? What about areas where broadband is not available? What can be done about the digital divide?

Coming next issue

150 years since the first Geneva Convention

War machines — are humanitarians keeping pace with new generations of high-tech weaponry?

Automated aid — can new technologies such as drones, robots and satellites help humanitarians save lives?

Cyber wars — international humanitarian law in cyberspace.

Photo: Benoit Carpentier/IFRC

Congolese Red Cross (Brazzaville)

22 February 1964

Kiribati Red Cross Society
1965 as part of the British Red Cross. Independent since 12 December 1989.

Mali Red Cross

24 August 1965

Kuwait Red Crescent Society

10 January 1966

Central African Red Cross Society

25 October 1966

The Palestine Red Crescent Society

26 December 1968

Bahrain Red Crescent Society

28 January 1970

Mauritanian Red Crescent

22 December 1970

Red Cross of Chad

1970 as a provisional committee, granted legal status in 1972 and became a National Society on 1 June 1983.

Safety through principles

IN JUNE OF 2011, hostilities between rebel and government forces in South Kordofan, Sudan caused people in and around Kadougli and Kauda to flee their homes. Many settled in a makeshift camp where they received assistance from the Sudanese Red Crescent and other humanitarian actors.

Already facing difficulties with access and acceptance by various groups, the National Society soon faced another challenge: unknown persons wearing aprons bearing the Red Crescent emblem showed up and ordered the displaced people to leave the camp and go to a nearby stadium where they were told, falsely, that they would receive humanitarian aid. This blatant misuse of the emblem endangered the Sudanese Red Crescent, its personnel and its access to people affected by conflict.

Across the globe, National Societies often face challenges that can have serious consequences for the lives and safety of volunteers, staff and those in need of humanitarian assistance. As previously stable or peaceful countries confront unexpected turmoil or armed conflict, some National Societies are experiencing these challenges for the first time. Others find themselves working in increasingly complex and dangerous environments — for example, urban areas with high levels of violence.

For this reason, the ICRC has developed the Safer Access Framework (SAF), which draws on knowledge of National Societies that have experience working in insecure contexts. Rooted in strict adherence to the Fundamental Principles, SAF includes specific steps National Societies can take (particularly during peacetime) to enhance acceptance, security and access during times of turbulence.

One National Society doing this is the Mexican Red Cross, which has used SAF to reduce risks faced by emergency service personnel. Since implementing the framework in 2008, more than 18,000 volunteers have completed SAF workshops.

A question of fundamentals

As the Movement gears up to mark, in 2015, the 50th anniversary of the Movement's adoption of the Fundamental Principles in 1965, there is renewed debate and discussion about their applicability. Here are articles about two distinct approaches toward application of the principles, followed on page 28 by an essay that takes a critical look at how the Movement seeks to implement the principle of independence.

To raise the level of professional skills and the visibility of their neutral humanitarian mission, the Mexican Red Cross helped draft a bill on the use of and respect for the emblem (subsequently enacted by parliament), set up a nationwide system to log emergency services delivered in high-risk and violent situations, incorporated SAF into training manuals for emergency medical staff and began scaling up SAF courses in all 31 states, among other measures.

The ICRC also has a new package of guidance materials that include case studies showing how National Societies have dealt with difficult situations. Soon after the incident in South Kordofan, according to one of the case studies, the Sudanese Red Crescent issued a press release (in coordination with its Movement partners), organized a press conference and increased its efforts to publicize the Fundamental Principles, the emblem, international humanitarian law and the National Society's role as an auxiliary to government. It also replaced all jackets and vests with new ones that can be traced by serial number. Since then, access to some critical areas has improved. To read more, visit www.icrc.org.



Bangladesh Red Crescent Society
31 March 1973

Red Cross of Cape Verde
19 July 1975

Sao Tome and Principe Red Cross
20 January 1976

Tuvalu Red Cross Society
1977 as part of the British Red Cross. Independent since 1 May 1981. Awaiting ICRC

recognition and admission to the IFRC.

Red Crescent Society of Djibouti
1 August 1977

Red Cross Society of Guinea-Bissau
2 December 1977

Qatar Red Crescent Society
1978

Angola Red Cross
16 March 1978

Andorran Red Cross
20 December 1980

Mozambique Red Cross Society
10 July 1981

Our principles, ourselves



AS THOUSANDS OF MIGRANT WORKERS fled the conflict in Libya in 2011, volunteers working near the Tunisian–Libyan border faced many difficult tests, recalls Hafedh Ben Miled, a volunteer coordinator with the Tunisian Red Crescent.

Working nearly around the clock, the volunteers did great work, he says. But those with a particular kind of training, he adds, had an advantage.

The training he refers to was not a technical course about first-aid or emergency management. Rather, it was about developing the emotional and psychological qualities and skills needed to maintain impartiality and neutrality in high-stress environments. “For example, when beneficiaries become aggressive due to the fact that they wait for a long time to get services, we are prepared and more patient,” he says. “We stay calm.”

The training Ben Miled refers to is part of an IFRC initiative known as YABC, or Youth as Agents for Behavioural Change, which helps volunteers act as role models in the way they carry out humanitarian work and foster a culture of non-violence and peace through their personal behaviour.

According to a forthcoming study on the YABC initiative, this inner change is having an impact on service delivery. According to more than 300 volunteers who have participated in the programme and took part in the study, these qualities and skills can be learned and further developed through practice, training and exercise.

“To understand how to implement the principles and values of the Movement, it’s

necessary to work on them on a personal level,” says Sonia Pezier, a volunteer with the French Red Cross and YABC peer educator. “Then we can export them in order to change the mentality of others.”

Based on the writings of humanitarians such as Henry Dunant and Jean Pictet (who first crafted the seven Fundamental Principles) — as well as philosophers and activists from Socrates to Gandhi — the YABC curriculum is based on experiential and practical learning.

The five-day YABC peer educator training also helps volunteers see situations from multiple perspectives — from beneficiary to soldier to fellow relief workers — and to develop skills for taking on challenges such as stigma, homophobia, racism, xenophobia and violence.

“Young people are not the only ones who can benefit from this,” says Katrien Beeckman, founder of YABC and head of the IFRC’s principles and values department. “We all need to develop a personal connection to the Fundamental Principles so that from abstract, remote concepts, the principles become personally meaningful, tangible and concretely applicable in our daily work.”

Each of the principles demands certain skills or qualities that can be developed and improved, she says. Impartiality, for example, requires integrity, active listening, objective analysis, critical thinking and the ability to drop biases.

Though there is considerable anecdotal evidence of the transformative nature of the YABC training, it’s difficult to measure the initiative’s impact. An online self-assessment survey in 2012 revealed that 97 per cent of respondents felt they changed in a positive way, while 94 per cent identified specific behaviour changes that are still evident and useful months or years later.

To read a longer version of this article, and the YABC impact study, visit www.redcross.int.

📷 An emergency worker for the Mexican Red Cross takes care of a young child. Photo: Leo Martinez

The Comoros Red Crescent
June 1982

Red Crescent Society of the United Arab Emirates
31 January 1983

The League of Red Cross Societies changes its name to The League of Red Cross and Red Crescent Societies
11 October 1983

Red Cross Society of Guinea
26 January 1984

Red Cross of Equatorial Guinea
16 October 1985

Cook Islands Red Cross Society
5 May 1989

Red Cross Society of Eritrea
1991. Awaiting ICRC recognition and admission to the IFRC.

The League of Red Cross and Red Crescent Societies renamed the International Federation of Red Cross and

Red Crescent Societies.
27 November 1991

Namibia Red Cross
8 February 1992

Czech Red Cross
5 June 1993

Independence: one size does not fit all

DURING THE 25-YEAR, post-*Doi Moi* (or economic renewal) period in Viet Nam, government support for the Vietnam Red Cross has been a vital part of the National Society's ability to assist vulnerable people and respond to disasters.

This support takes the form of staff salaries, offices and vehicles, among other things, and with it comes a certain amount of control. Operationally, the Vietnam Red Cross Society is autonomous, choosing its own activities, work locations and beneficiaries. But government authorities nominate leaders and National Society staff, a practice that raises concerns for any National Society seeking to be an independent auxiliary to the government.

The question of independence does not stop there, however. As the country opened to the outside world in recent decades, the Vietnam Red Cross expanded its international cooperation. Movement partners arrived in large numbers bringing new ideas, expertise and resources.

This support from international donors and the national government was welcome and needed. But this dual support often came with contradictory tasks, rules and expectations. For their part, Movement partners have often found it difficult to understand the closeness of the National Society to government. In their mission reports, delegates have described it as an "organization locked into a system" or "a Gulliver, a giant tied down by bureaucracy". Most also acknowledged the National Society's efficient service delivery.

So the question became, should this giant be untethered and if so, how? The first attempts from the outside came during the process of drafting national legislation and new internal systems of governance.

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.

The ICRC and IFRC Joint Statutes Commission (JSC) sought to separate governance and management "to avoid conflict of interest and ensure a well-functioning National Society" — a noble goal. The National Society complied in 2007 but reverted quickly to its earlier model of the 'executive president,' in which governance and operations are closely intertwined.

Based on interviews conducted for my 2012 IFRC study, *The art of balancing: A study of Vietnam Red Cross Society and its partnerships*, I believe the JSC had pushed for a model of governance that did not correspond to the National Society's cultural and historic management environment. The mechanical application of an outside model looked good on paper but created practical management issues through the Vietnam Red Cross network.

The drafting of Viet Nam's Red Cross law followed a similar course. The first proposed law was legitimately criticized by the JSC as giving too much decision-making authority to government. However, the text proposed by the JSC, based on IFRC's Model law on the recognition of National Societies, did not suit the complex national reality. JSC members were disappointed with the final law, passed in 2008 by Viet Nam's National Assembly; perhaps the cause of genuine autonomy would have benefitted from a more nuanced, longer-term, organization-building approach.

Outside pressures

Meanwhile, the inflow of external funds also put new pressures on National Society staff, turning them to some degree into 'service providers' for international programmes. Some in the Vietnam Red Cross Society believe the focus on implementation of donor projects comes at the cost of the National Society's own development.

What the Vietnam Red Cross Society's case highlights is that challenges to independence are manifold. The Movement's tendency to impose global concepts and tools based on standardized models, without defining their local relevance, can inadvertently shrink local autonomy. Uncoordinated actions by partners, along with funds earmarked only for programme implementation, may also lead to capacity stretching and compromised local autonomy.

National Societies can achieve amazing things and save many lives with support from various partners. Ultimately, it's up to them to define their true course. As National Societies determine their own paths, Movement partners can best support and sustain their independence by developing longer-term, coordinated strategies based on a deep and nuanced understanding of the National Societies' political, economic and cultural realities. ■

By **Bayarmaa Luntan**

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Exploring the Fundamental Principles

What is your view? How can National Societies best maintain independence between international and domestic demands? Write us at rcrc@ifrc.org.

Palau Red Cross Society
2 June 1995

Timor-Leste Red Cross Society
2000

ICRC 18 June 2013; awaiting admission to the IFRC.

the founding of the first National Society in its state of Württemberg, while the Red Cross Red and Crescent Movement celebrates the birth of the ICRC and the first International Conference of

the Red Cross 150 years ago this past October.

Gabonese Red Cross Society
3 July 1996

Maldivian Red Crescent
16 August 2009

150 years of humanitarian action
The German Red Cross celebrates its 150th anniversary based on

Upcoming in 2014: More National Society and Movement milestones.

Micronesia Red Cross
31 January 1998

South Sudan Red Cross Society
9 July 2011. Recognized by the

PUBLICATIONS



World Disasters Report 2013

IFRC 2013

The responsible use of technology offers concrete ways to make humanitarian assistance more effective, efficient and accountable, according to this year's *World Disasters Report*, with a focus on technology and the future of humanitarian action. Lack of access to information and technology is having a major impact on people's ability to prepare for, survive and recover from disasters, according to the report. Written by more than 40 humanitarians and academics, the report shows how during the first critical hours after an emergency, most lives are saved by the people nearby. It also documents how some first responders don't have access to basic life-saving information and tools, and acknowledges that access to these technologies is still deeply unequal.

Available in English; summaries in Arabic, French and Spanish

A guide to mainstreaming disaster risk reduction and climate change adaptation

IFRC 2013

This guide was developed specifically to help National Red Cross and Red Crescent Societies and IFRC staff to integrate risk reduction measures more systematically into their planning. By describing in

detail what key issues need to be considered and when, the guide aims at ensuring that risk reduction measures are taken into account in different sectors and contexts.

Available in English

Hateymalo accompaniment program

ICRC 2013

The Hateymalo program helps the families of missing persons cope with the ambiguity of their loss through the provision of psychological, socio-cultural, economic, and legal and administrative support. With support groups as the core of its multifaceted interventions, the project helps people discover new connections to move ahead in life and aims to restore the functionality of the families at the individual, community and family levels.

Available in English and Nepali



Nutrition guidelines

IFRC 2013

These guidelines are intended to complement existing IFRC health reference and training materials, such as the *Epidemic Control for Volunteers and Community-Based Health* and *First Aid* manuals and training materials. The guidelines are to be used for awareness-raising, capacity building and integration into National Society health, nutrition and food security programming.

Available in English

MEDIA

Health care in danger: The human cost

ICRC 2013

International humanitarian law demands that hospitals, ambulances and health-care workers must be protected and should never be targeted as they carry out their regular duties. This video shows how this is often far from the reality, documenting how, worldwide, the lack of safe access to health care is causing unnecessary suffering to millions of people.

Available in Arabic, English, French and Spanish

First aid saves lives

IFRC 2013

This short animated video aims at supporting the Red Cross Red Crescent's role as one of the world's leading first-aid educators and providers, and raises awareness about the need to learn basic first-aid techniques. Now available in Arabic, English, French and Spanish — it is easily adapted to any language. For more information, contact: av@ifrc.org

IFRC Plan of Action Climate Change 2013–2016

IFRC 2013

This Plan of Action has been developed to support IFRC work on climate change by providing overall directions and guidance on activities aimed at both climate change mitigation and adaptation. The Plan of Action is also intended to support a better dialogue with partners at all levels, in particular national governments, for both the IFRC Secretariat and National Societies.

Available in English

Physical rehabilitation programme: annual report 2012

ICRC 2013

Since 1979, the ICRC's physical rehabilitation activities have diversified and expanded. By 2012, the ICRC's Physical Rehabilitation Programme had provided support for more than 163 projects (centres) in 48 countries and one territory. According to this comprehensive report, the ICRC has provided more than 390,000 prostheses, 450,000 orthoses, 39,000 wheelchairs and 417,000 pairs of crutches, as well as physiotherapy and follow-up (repair and maintenance of devices).

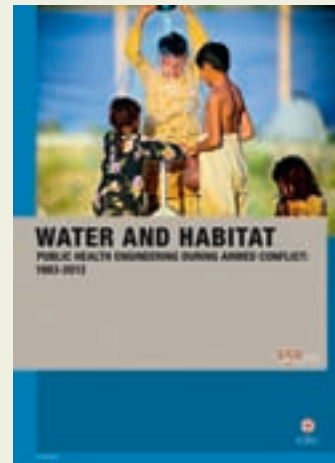
Available in English and French

Water and habitat Public health engineering during armed conflict, 1983-2013

ICRC 2013

As the ICRC marks its 150 year anniversary, one unit within the organization celebrates its 30th anniversary with a richly illustrated photo book that shows the evolution of ICRC's Water and Habitat Unit, or 'WatHab' since its creation in 1983. The book takes a look at recent ICRC history from a 'WatHab' perspective, recounts the growth and diversification of ICRC water and habitat services and recalls some of the unit's achievements during conflicts of the past three decades.

Available in English and French in 2014





The first National Society marks 150 years

To celebrate the 150th anniversary of the German Red Cross, volunteers and staff gathered before the historic Brandenburg Gate in the capital Berlin earlier this year. See page 4.