



A classic poster from the Japanese Red Cross Society.

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RCRC

Red Cross Red Crescent
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The case for disaster law

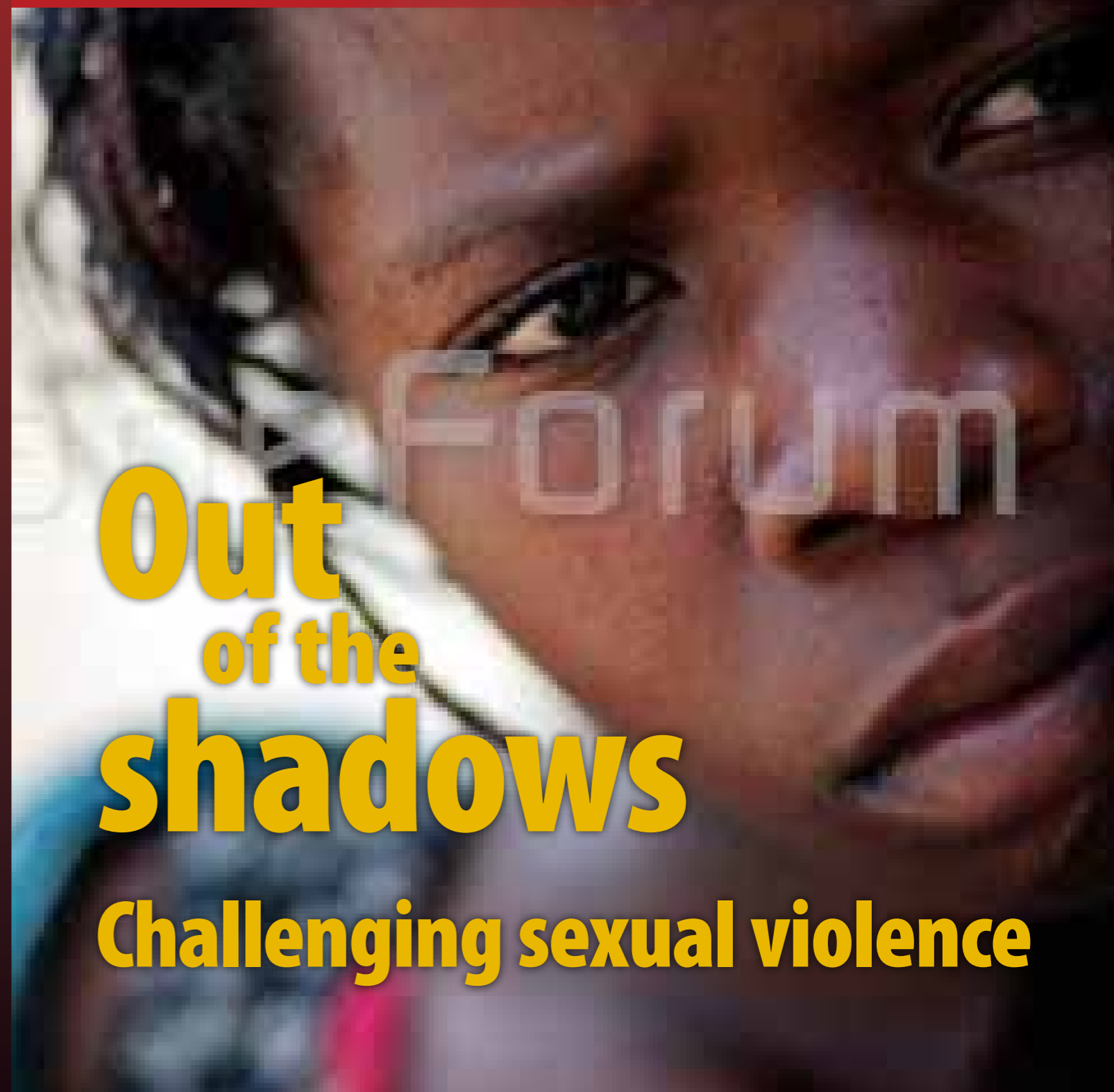
How legislation can help or hinder humanitarian relief

Getting the message

How well are we talking — and listening — to beneficiaries?

A society stands the test

Japanese Red Cross responds to a nation in need



Out of the shadows

Challenging sexual violence



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.



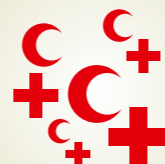
ICRC

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 works on the basis of the Fundamental Principles of the International Red Cross and Red Crescent Movement to inspire, facilitate and promote all humanitarian activities carried out by its member National Societies to improve the situation of the most vulnerable people. Founded in 1919, the IFRC directs and coordinates international assistance of the Movement to victims of natural and technological disasters, to refugees and in health emergencies. It acts as the official representative of its member societies in the international field. It promotes cooperation between National Societies and works to strengthen their capacity to carry out effective disaster preparedness, health and social programmes.



National Red Cross and Red Crescent Societies embody the work and principles of the International Red Cross and Red Crescent Movement in more than 186 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.

Everybody's issue

Gender-based violence can occur at any time, anywhere. But its prevalence is magnified during emergencies because of the absence of law and order, the lack of support services and the breakdown of community networks. This combination leaves women — and men — extremely vulnerable. Humanitarian organizations working in conflict zones or responding to natural disaster must make addressing gender-based violence a top priority — at the onset of any emergency.

Survivors of gender-based violence need immediate support in the form of medical care, police assistance, counseling, and legal aid. Often, few of these services exist before an emergency — and even fewer remain afterwards.

Humanitarian organizations therefore can and must do more — both before and after — to ensure that these services exist, and that they are trained and prepared to support survivors in line with international good practice. Survivors also need to be aware of, and gain access to, these services. Information campaigns and transportation support are a good start.

Prevention is also critical. This is a longer-term effort that could entail media campaigns, positive recreational, cultural or vocational outlets that promote non-violence, and integrating gender-equality messages into education curricula. In emergency contexts, security patrols can improve safety — particularly for those living in camps. Prevention work must be relevant and appropriate to the local context or it will not be sustainable.

The Movement's global reach could enable us to raise the profile of this issue — not just as a "women's issue" but as an issue that effects everyone in emergency settings.

Humanitarian organizations have an ethical responsibility to address these issues. Emergencies may lead women to engage in risky behaviors such as selling sex in order to survive and feed their children, thereby increasing the risk of gender-based violence. Without economic alternatives, women are also vulnerable to sexual exploitation and abuse. Relief organizations and development agencies involved in long-term recovery must do more in terms of training, zero-tolerance policies, and strict codes of conduct to prevent this kind of abuse. Clear messaging ('Humanitarian Aid is Free!' for example) and economic empowerment initiatives can reduce risk and expand choices.

These efforts need to be local, relevant, and sustainable. Otherwise, women might have to travel further for work, engage in riskier occupations, or work in unsafe areas. From the onset of the emer-

Your turn

If you would like to submit an opinion article for consideration, please contact the magazine at rcrc@ifrc.org. All views expressed in guest editorials are those of the author and not necessarily those of the Red Cross Red Crescent Movement or this magazine.

gency, we can support women through vocational skills training and income-generating opportunities. We must also do more to ensure that women living in camps for the displaced have access to safe spaces and separate, lit, lockable facilities.

We also need to remember to ask women what they need. When I spoke to women in Haiti, the first thing they asked for was access to economic opportunity. We can do more to support and protect women working in the informal sector — including safe storage for cash earned. We could have done much better in Haiti to provide economic empowerment initiatives at the very beginning.

But women are not just victims — they are survivors who help countries recover more quickly from emergencies. Women can build bridges between warring communities and increase community resilience. Men are also a key part of the solution. Not all men are perpetrators and they need to be engaged as supporters and advocates.

The Red Cross Red Crescent Movement is well placed to address gender-based violence in a more robust way. The Movement's global reach could enable us to raise the profile of this issue, not just as a "women's issue" but as an issue that effects everyone in emergency settings.

Humanitarian organizations are increasingly recognizing the severity of this problem. Now they need to commit real resources and expertise, attract senior staff and experienced professionals, and give them the ability to act and affect change on the ground where it is most needed.

By **Lina Abirafteh**

Lina Abirafteh, PhD, has addressed gender-based violence in Afghanistan, Sierra Leone, Papua New Guinea and various other countries. She is the author of *Gender and International Aid in Afghanistan: The Politics and Effects of Intervention* and worked recently as coordinator for the Gender-Based Violence Sub-Cluster of the United Nations Population Fund/UNICEF in Haiti.



Movement responds as Libya conflict intensifies

As civil unrest in Libya escalated into all-out conflict in March, the Movement responded with both direct assistance to people affected by the fighting and with repeated appeals for warring parties to abide by international humanitarian law.

Caught in the midst of the conflict, the Libyan Red Crescent (LRCS) faced the difficult and dangerous task of providing medical and psychosocial care at first-aid posts and over-burdened city hospitals. "I was terrified by the injuries I saw. I was not used to those scenes but I found myself just doing my job," said one LRC volunteer.

The ICRC was also on the front lines. While it was unable to obtain safe access to western Libya, it was able to send a four-person medical team to Benghazi in the east and ship more than 180 tonnes of relief goods.

National Societies in Tunisia and Egypt (with support from the IFRC, ICRC and other Mediterranean National Societies) focused largely on assisting thousands of desperate people, mostly migrant workers, fleeing the country.

A joint Movement statement expressed "grave concern for the deteriorating humanitarian situation as a result of the escalation of violence and the plight of the civilian population affected by the crisis in Libya and events in neighboring countries."

The statement also expressed concern about "recent attacks on Libyan Red Crescent personnel and ambulances" and called on States to respect the rights and provide services for migrants fleeing the fighting.

Tough year capped by more floods

More than 25 natural disasters hit Europe in 2010, making it a tough year for National Societies in the region. "This is twice as many as in 2009," said Slobodanka Curic, IFRC regional disaster management coordinator. Over half of these disasters were floods, and more than 20,000 people affected received aid from various Movement sources. "We must focus our efforts on early warning and risk reduction, so that National Societies are able to respond more quickly and efficiently," Curic added.

Humanitarian index

59: Number of children reunited with parents due to Restoring Family Links efforts in Haiti since the earthquake, according to the ICRC.

146: Number of Haitian children who registered with the ICRC as not being able to locate their parents after the earthquake.

185,000: Number of local volunteers in Burundi who care for the most vulnerable people by providing social and health support, distributing food, and building and repairing homes. [source: *The Value of Volunteers*, IFRC/2010]

26,000: Number of volunteers in Ghana who provide a hand-washing service every week at funerals and other social events. [source: *The Value of Volunteers*, IFRC/2010]

273.1 million: Total IFRC and National Society expenditure (in Swiss francs) in Haiti to September 2010. [source: *Haiti Earthquake, One-year progress report*, IFRC]

1.1 billion: Total IFRC and National Society income raised (in Swiss francs) for Haiti relief efforts to September 2010. [source: *Haiti Earthquake, One-year progress report*, IFRC]

Quotes of note

"Aid organizations have to stand up against this and say to the regime, 'We are the largest organizations on the planet, we are powerful NGOs with these large budgets and we will set our conditions', and negotiate a better deal."

Linda Polman, who argues in her book that aid organizations often fuel conflict by allowing armed factions and governments to control and misuse relief aid.

"Aid can bring with it very serious negative side effects. But really prolonging war? It's not often that an armed group depends on aid for their survival."

Fiona Terry, long-time humanitarian and author of *Condemned to Repeat? The Paradox of Humanitarian Action*. See story, page 24.

Thousands displaced from Côte d'Ivoire

The ICRC and the Red Cross Society of Côte d'Ivoire treated dozens of people injured during recent clashes in Duékoué, in the west of the country, where they are continuing to help 12,000 people displaced by violence and political unrest. "We've been working continuously," Côte d'Ivoire Red Cross volunteer and first-aid coordinator Christine Dehe Mahan reported. "At the same time, I'm also trying to find part of my own family."

More than 15,000 people, mostly women and children, have fled to neighbouring countries. In December, the IFRC launched a preliminary emergency appeal for US\$ 1.39 million to help the National Societies of Burkina Faso, Ghana, Guinea, Liberia and Mali assist the displaced.

Polio outbreak hits Congo

The Congolese Red Cross mobilized more than 700 volunteers in response to a deadly outbreak of the wild polio virus late last year in Kouilou and Pointe Noire, where the disease killed 128 people and paralysed 280. "The volunteers are raising community awareness and calming the population to avoid panic," said Christian Sédar Ndinga, president of the Congolese Red Cross. "We will also participate in the national immunization campaign, while focusing our efforts on the most affected areas."

Sun helps provide water in Sudan

In Jonglei state in southern Sudan, close to the border with Ethiopia, the ICRC is using solar power to provide clean drinking water for thousands of people displaced by inter-community fighting in 2009. "More than 55,000 people — almost 20,000 of them displaced — found themselves without enough water," said Jean Vergain, ICRC regional water specialist based in Nairobi, Kenya. The project uses 420 solar panels to power a series of pumps that draw water from ten metres below the ground.

Australia responds to floods, cyclone

The first months of 2011 were busy ones for the Australian Red Cross. The National Society was still dealing with the aftermath of massive floods in Queensland when the state was hit by Cyclone Yasi, which destroyed at least 150 homes and left another 650 uninhabitable. In response to the flooding, the Red Cross flew in trained staff and volunteers from across Australia and New Zealand to manage evacuation centres and assist with relief efforts. Leading up to the cyclone, the Australian Red Cross helped out at ten evacuation and recovery centres where more than 5,400 people were assisted.



REUTERS/Anthony Farmer, courtesy www.alexnet.org

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Recent atrocities in the Democratic Republic of the Congo have once again brought the issue of sexual and gender-based violence in conflict to the fore. But wide-scale rape and sexual violence are not unique to the DRC or to conflict zones. Iolanda Jacquemet examines the humanitarian response.

■ Natural disaster **The case for disaster law** 10
When an earthquake rocked Pisco, Peru in 2007, the Peru Red Cross and international aid groups responded in force, providing generous amounts of much-needed aid. But both the immediate emergency response and the long-term recovery have been hampered by gaps in the laws and regulations that deal with disaster response. Lima-based reporter Tyler Bridges reports on efforts in Peru and around the world to improve the laws that impact international disaster response.

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During the 10th anniversary of the Year of the Volunteer, author, blogger and humanitarian watchdog Sandra Schimmpfennig says our focus shouldn't be on competing for new volunteers. Rather, she argues, National Societies need to better manage and retain the volunteers they already have.

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■ Humanitarianism **Does relief prolong war?** 24
Aid workers have long debated whether relief during wartime can be misused to fuel or prolong conflict. To better understand these difficult questions, RCRC magazine speaks with two authors: Dutch journalist Linda Polman, whose 2009 book *War Games* was recently re-published for the US market; and Fiona Terry, who raised these issues in 2002 in her book *Condemned to Repeat, the Paradox of Humanitarian Action*.

■ Natural Disaster **A society's greatest test** 26
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Resources available from IFRC and ICRC, among others, include *The Value of Volunteers*, *Assessing Haiti one year later*, *HIV/AIDS and Harm Reduction* and various new materials on Restoring Family Links.

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

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On the cover: A ten-year-old girl who was raped twice in ten days leans against a wall while being admitted to a clinic in Goma, Democratic Republic of Congo, 24 November 2008. Photo credit: AFP Photo/Roberto Schmidt



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Out of the shadows

Sexual violence has always been part of armed conflict but humanitarian groups have only recently begun to respond. A few programmes offer support for victims and serve as potential models.

“WE COULD HEAR the crude laughter and boots treading the floor, the excitement among the officers. How many times was each one raped that night? I was left with a body that was torn and fragmented everywhere. There was not an inch of my body that did not hurt.”

A victim from the former Yugoslavia of the 1990s? A quote from today’s Democratic Republic of the Congo (DRC)? No: these are the words of Jan, who was a 17-year-old Dutch ‘comfort woman’ during the Japanese occupation of Indonesia in 1944. But she could have been one of the Sabines abducted by the Romans in antiquity, a victim of the Visigoths in fifth century Europe, a Vietnamese girl during the war with the United States, a German woman in Berlin in 1945.

As it could have been so many others.

“Rape in times of war has always been systematic,” notes neuropsychiatrist Boris Cyrulnik, who is known for his writings on the psychological resili-

“This is ideological rape, one that aims, like in Kosovo or Congo, to destroy the enemy.”

Boris Cyrulnik, French neuropsychiatrist and expert on psychological trauma recovery

ence of trauma survivors. “Fighters were ordered to kill and maim, and then they were let loose to help themselves to food and to women.”

According to Cyrulnik, this violence with “a sexual signification” has given way, over the past 30 to 40 years, to rape as a weapon of war. “This is ideological rape, one that aims, like in Kosovo or [DR] Congo, to destroy the enemy.”

For many groups of people, few things go deeper than the ‘virtue’ (many would say ‘honour’) of their mothers, daughters and wives, so ‘staining’ them will destroy the community more surely than killing a few of its members. And all the more so when pregnancies follow the attack, burdening the victim and her people with a child fathered by the enemy. In extreme cases, rape equates murder — such as the rapes with machetes perpetrated during the 1994 Rwanda genocide.

Men and boys are also victims. For example, castration, which was practised by the Ku Klux Klan in the US south and by the French in Algeria. Detention is particularly conducive to abuse, aimed at humiliating and dehumanizing the other; think of the infamous images of Abu Ghraib or of the thousands of Muslim and Croat men abused during the war in Bosnia.

For Florence Tercier, a former women and war adviser at the ICRC, violence against women is about “where the power lies”. Already marginalized in peacetime, women will be the victims of choice when normalcy collapses. Not only wars, but also natural disasters and displacement may lead to sexual and gender-based violence.

Frequently in such situations, people live in cramped, insecure camps, with little if any privacy



or police protection (see box, Vulnerable in disaster). The men are uprooted and unemployed, so there is often frustration, substance abuse and domestic violence. “When emergency strikes, the stress levels rise and so does the level of violence,” says Vera Kremb, gender adviser for the IFRC. “The same is true for sexual violence.”

This pressure can bring out the worst in otherwise non-violent men. “He used to be a good husband before we fled to this refugee camp in Malawi,” a Congolese woman recently told an IFRC video crew, recounting how her husband threw boiling water over her. In camp settings, girls risk being raped when they go to wash or fetch wood.

Listening to the unspeakable

The world over, rape is a taboo, and it is the victims who carry the stigma. Their family and their community may reject them; they can be killed to ‘cleanse

Valantine Mbolibirani, 15, is seen in Obo, Haut-Mbomou, Central African Republic in September 2010. She was 13 when she was abducted by the Lord’s Resistance Army, which forced her to become one of the commander’s many wives. Marcus Bleasdale/VII

the family honour’. The physical and psychological scars of rape can last a lifetime. In the book *Listening to the Silences: Women and War*, the former ‘comfort woman’ Jan, who received no counselling for 50 years, speaks of how the old fear still “burns me up”.

The trauma of rape can also lead to debilitating depression, shame and anger which make it extremely difficult for the victim to get back to a normal, productive life. Psychosocial support is therefore a key part of the humanitarian response.

In the field, several approaches are being tried out that could serve as models. In the DRC, the ICRC supports a series of maisons d’écoute or listening houses, where the counselling starts with a simple act: offering women a safe place to tell their stories.

“When a victim of rape comes to our listening houses, the first priority is to make the person feel secure, lower her anxiety and ensure she gets proper medical treatment. At a second stage, we

Your turn

What should the Movement do to better respond to gender-based violence during conflict and other emergencies? Please send your opinions to: rcrc@ifrc.org or join the discussion on www.facebook.com/redcrossredcrescent



help rebuild her image of herself which was shattered by the rape,” says Jacques Caron, an ICRC psychologist in eastern DRC.

The lush hills of the Kivu, as the region is called, have seen unspeakable horrors during the past 15 years of conflict. Rapes, sometimes accompanied by extreme violence and targeting all ages from babies to great-grandmothers, have affected more than 150,000 women over this period according to a United Nations estimate.

The listening houses were created in 2000 by Congolese women, some of whom were rape victims. International support followed. Starting in 2004, the ICRC trained the staff and now supports 40 of these structures.

The ICRC also makes post-rape kits available at the health centres it supports. The kits include emergency contraception to prevent unwanted pregnancies, anti-retroviral drugs to prevent HIV transmission, treatments against sexually transmitted infections and immunization against tetanus and hepatitis B. If used at the most 72 hours after the attack, these kits lessen the risk of contracting HIV.

Food and a bed are available for those unable or unwilling to go home. Injured victims are referred to ICRC medical facilities. A number of agencies, including the Red Cross of the Democratic Republic of the Congo with help from the IFRC, also assist women, particularly those rejected by their husband after the rape, to start small income-generating projects.

In the province of North Kivu, Kiwanja, at a listening house for victims of sexual violence, a woman speaks with a psychosocial worker. “The listening house is a refuge because when a person is raped, she cannot speak of it to her neighbors and even less to her husband who might reject her,” the worker explained.

Pedram Yazdi/ICRC

“Since I have spoken to the ladies at the listening house, and they have shown me that this could have happened to anyone, my heart is lighter.”

43-year-old rape victim in the Democratic Republic of the Congo

The results can be uplifting. Fanny*, 43, says she used “to feel so dirty and disabled after what happened. But since I have spoken to the ladies at the listening house, and they have shown me that this could have happened to anyone, my heart is lighter.”

Could the listening houses model be exported to other contexts such as Haiti, where the epidemic level of rape in the camps is putting the spotlight on the issue? Projects in Colombia, Malawi and South Africa also offer potential models for integrating sexual and gender-based violence issues into existing, long-term efforts in the fight against HIV and AIDS, and in emergency operations dealing with internally displaced persons.

Some within the Movement are also advocating for improved preparedness and planning in the design of emergency shelters and camps, i.e. better lighting, better siting of sanitation services, privacy between the sexes, and provision of fuel so women don’t need to search for firewood. Awareness about rape should become more mainstream, they argue, along with a general improvement in reproductive health services for women during emergencies.

“Based on our mandate, we could play a much more prominent role in fighting gender-based violence — through humanitarian diplomacy, through our vast network of community volunteers and by providing medical and psycho-social services for survivors of sexual violence during emergencies,” says IFRC’s Kremb, noting that teenage pregnancy,

self-induced abortion and HIV infection rates also rise in the wake of emergencies.

ICRC adviser on women and war, Nadine Puechguirbal, agrees. “Humanitarians think as soon as the emergency passes they can organize camps and integrate gender issues, but by then it’s too late,” she says.

A watershed in the 1990s

Despite the long history of rape in conflict, the humanitarian response did not come until the mid-1990s. The triggers were the conflicts in Bosnia, with its litany of rapes, and Rwanda, where the genocide shocked the world. Médecins sans Frontières and the International Rescue Committee were among the first to start gender-based violence programmes in these contexts.

The evolution was due to a convergence of factors, explains the historian Carol Harrington. “In World War II Berlin or after the 1971 mass rapes in Bangladesh, victims were provided with medical services, for abortion and venereal diseases treatment. But this did not happen at every conflict.

“One of the biggest changes in the 1990s was the attention given to the psychological trauma, following work by experts who had previously linked rape to torture. Another important factor was the work of feminists who were focusing on violence against women, highlighting that women’s rights were human rights.”

Rape had evolved from being a matter of ‘honour’ to a matter of human rights, as well as a medical issue, one with both visible and invisible wounds. Meanwhile, the ad hoc international criminal tribunals in the 1990s — on the former Yugoslavia, Rwanda and Sierra Leone — were a watershed.

Their guiding statutes mention rape under crimes against humanity which are in the ambit of the tribunals. Their jurisprudence was groundbreaking, including, in the case of the former Yugoslavia, for men-on-men violence.

The 1998 Rome Statute of the International Criminal Court (ICC) further grounded “rape, sexual slavery, enforced prostitution, forced pregnancy, enforced sterilization, or any other form of sexual violence of comparable gravity” as a “crime against humanity”, under certain conditions. The text speaks of “any civilian population”, thus encompassing both sexes. The ICC has already issued several indictments based on this article.

The Movement’s Response

Within the Movement, the 1990s were also a turning point. There were related resolutions at two International Con-

ferences of the Red Cross and Red Crescent in 1996 and 1999. At the latter, the ICRC pledged to better assess and respond to the “needs of women and girl children affected by armed conflict” and, among other things, to “actively disseminate the prohibition of all forms of sexual violence to parties to an armed conflict”.

Despite this evolution, programming to combat gender-based violence is still not fully integrated into the Movement’s on-the-ground response in both conflict and natural disaster. Some in the Movement who work on this issue argue that the response is too episodic and situational and that more needs to be done to integrate gender-based violence awareness and programming in emergency preparedness, relief and recovery.

Still, a few programmes provide examples of what this integration can look like. In southern

Silent suffering

In Colombia, instances of domestic and sexual violence are frequent but mostly unreported. The issue is still largely taboo, the signs of abuse are not always obvious, and most of the victims remain anonymous. This is especially the case when the crime is linked to the armed conflict.

To get free state medical services, Colombian law requires the victim to file an official complaint. But few victims feel sufficiently safe to press charges. “Mostly, victims sexually abused by an armed actor are too afraid to speak out because they fear for their lives,” explains Tatiana Florez, in charge of ICRC’s health programme in Colombia. There, the ICRC works in partnership with a family planning organization called Profamilia to assist victims of gender-based violence.

But this is not a simple task. Victims themselves don’t always see rape as their greatest trauma, or post-rape assistance as their biggest need. “Rape is often seen as just another crime, considered as relatively minor in the face of the murder of a husband, the loss of all one’s belongings, or the estrangement from one’s home,” Florez adds.

“We orient people who wish to file a complaint toward the appropriate agencies,” explains Luz Marina Tamayo, the ICRC’s advisor for issues related to women facing war. The ICRC offers free medical and psychological assistance to those who prefer to not seek recourse through the state system. In all cases, victims are assisted in complete confidentiality. People with very sensitive cases are sometimes given aid to quickly relocate.

Follow-up with victims is also extremely challenging. “When first meeting a victim of sexual violence, one must always have in one’s mind that it might be the only time you will see this person,” explains Marina Alexandra Caidedo, coordinator of a psychological program for gender-based violence victims for the Colombian Red Cross. “That’s why we have trained our collaborators and our volunteers to respond to this type of situation.”

In Cali, Colombia, this victim of sexual abuse received a visit and assistance from the ICRC. Christoph Von Toggenburg/ICRC

It’s also important to go to where the victims are — in Colombia that often means in dispersed, isolated communities. The Colombian Red Cross, also present in many hard-to-access regions by virtue of its mobile health units, directs people to pertinent institutions for psychological or other support, or to the ICRC and Profamilia.

In 2010, close to 180 people were assisted by the ICRC. “The big challenge for us today is to raise awareness that sexual violence is also a medical emergency, which requires intervention, including HIV prophylaxis, within 72 hours,” concluded Marie-José Siirro, the delegate in charge of health in Bogota. “It’s also necessary that the people know that they can come to the ICRC and speak about the problem.”

Marie-Servane Desjonquères



Africa, programmes undertaken as part of the Global Alliance on HIV, which encompasses the IFRC, National Societies, volunteers and partners in ten countries, weave gender-based violence programming in prevention work that reaches deep into rural and urban communities.

Meanwhile, the Malawi Red Cross Society and the Office of the UN High Commissioner for Refugees developed a comprehensive approach to sexual violence in Dzaleka, a refugee camp of 10,000 people, which has now inspired similar efforts in 15 districts throughout the country. Community-based committees lead sensitization and mediation. The police and the courts are involved. Safe houses, as well as psychosocial counselling and income-generating projects for abused women, are available. One key outcome: an increasing number of cases are being reported.

In major disasters, the response to gender-based violence is also increasing. The Haiti earthquake, for example, marked the first time that a gender focal person was part of the rapid assessment team. It was also the first time the IFRC hired a delegate specializing in programmes about gender-based violence, sexual exploitation and abuse to be part of the emergency response. After receiving some basic training, Haitian Red Cross Society volunteers,



“The situation here is bad, especially for young girls,” Malawi Red Cross worker Janette Honore says of the Dzaleka refugee camp. “Many women lack even basic items and feel that they are forced to exchange sexual favours.” Along with Jimmy Ndayishima, Honore is a member of the camp’s committee against gender-based violence.
Damien Schumann/IFRC

who have unique access to camp communities, are raising awareness and referring women to locally available services.

But there are still gaps. While post-rape kits have been made available in Haiti at all the basic health Emergency Response Units and were offered by some National Societies, the number of staff specifically trained to deal with the unique psychological and medical needs of rape victims is not sufficient. (At the time of going to press, the Haiti gender-based violence delegate post had been vacant for four months.)

Better equipped

Similarly at the ICRC, the response to sexual violence is not completely mainstreamed although there has been considerable progress in the last ten years.

The comprehensive 2001 ICRC study, *Women Facing War*, showed that awareness about gender-based violence was already improving but was still not sufficiently integrated into ICRC delegate training and international humanitarian law (IHL) dissemination. Part of a broader ICRC effort (also based on the 1999 pledge) to better protect and assist women affected by armed violence, the report concluded that conflict affects women differently from men. Thus, the approach must be specific to those needs.

Since then, the ICRC has produced guidance documents (for example, *Addressing the needs of women affected by armed conflict*, 2004) and increasingly integrated the issue into its general training and programme materials (*Women and War*, 2008). Messages regarding the prohibition of sexual violence, including direct dissemination to armed groups, are increasingly part of the IHL repertoire. The ICRC also works with local women to document cases of gender-based violence.

“Delegates today are far better equipped to respond than ten years ago,” notes Charlotte Lindsey, author of the 2001 report and now ICRC director of

communication and information management.

Meanwhile, the number of ICRC projects specifically addressing gender-based violence is small but growing. Apart from the DRC, the ICRC offers programmes and services for victims of sexual violence in Darfur and Colombia. There are also plans to begin programming in Côte d’Ivoire, Haiti and Senegal.

In many of these areas, specific assistance for women of various forms (from pre- and post-natal care to physical rehabilitation and help finding missing family members) is already being provided. In Iraq and Nepal, for example, there is particular emphasis on economic security for widows left alone to provide for their households. Women in these circumstances are often extremely vulnerable to various forms of violence.

The debate continues, however, about the proper Movement role and response to sexual violence and the specific needs of women. Former women and war adviser Tercier notes that there has been concern from some who saw gender-based violence programming as a challenge to the ‘all-victims approach’. Rooted in the Fundamental Principle of impartiality, this approach is based on the idea that assistance is given comprehensively and strictly on the basis of need.

In response, it is pointed out that developing a stronger response does not alter the all-victims approach; rather it reinforces the notion of a comprehensive response based on a “better understanding of the needs and particular vulnerabilities of certain

categories, in this instance women”, according to the 2001 study.

There is also debate about whether rape falls outside the strict mandate of emergency response because in certain contexts it is ‘cultural’ or existed before the emergency. But does that argument still hold when conflict or natural disaster causes an extreme spike in gender-based violence

There is one thing that most interviewed for this story do agree on. Gender-based violence is a difficult problem to address — particularly during crisis. Victims of rape are hard to identify (see box, Invisible victims) and often, there are insufficient referral services, partner organizations, safe houses or resources to respond properly.

Greater on-the-ground Movement action would require greater commitment to volunteer and staff training, more investment in psychosocial services, better preparation for medical and security services for displaced people and resources for delegations and volunteers already overwhelmed by crisis response.

“The progress made over these last years is impressive, and this issue becomes more and more part of each of our activities,” says Pierre Krahenbuhl, director of operations at ICRC. He notes, however, that “we still have a long way to go”. ■

By Iolanda Jaquemmet

Iolanda Jaquemmet is a freelance writer based in Nepal. She has reported on sexual violence during conflicts in the Balkans, The Democratic Republic of the Congo and elsewhere.

* Not her real name.

The systematic rape of women during the 1992-1995 war in the Balkans led to protests demanding that allegations of rape be included as part of war crimes proceedings. Below, two members of the Bosnian association “Women – Victims of War” join protests in Sarajevo demanding justice for rape victims.
AP Photo/Hidajet Delic

Vulnerable after disaster

25-year-old Nirva sits among a group of women and girls at a camp for displaced people in Port-au-Prince. “You have rights, just like men,” she tells them softly but firmly. “You don’t have to accept being victims.”

Three years ago, while walking home, Nirva was grabbed by five men and gang-raped. Now she is a member of the grassroots organisation KOFAVIV, and comes to this camp every Sunday to tell the girls and women living here how to avoid a similar fate — or what to do if they cannot.

Prior to the quake, action against gender-based violence was increasing. But the quake erased that progress, killing female leaders, destroying safe houses and permitting hardened criminals to escape from prison.

For the hundreds of thousands of girls and women living in camps for internally displaced people, sexual violence is a daily threat. They sleep in tents that permit any intruder to enter with the slash of a knife. Lighting is scarce, the camps pitch black at night. Armed gangs roam undeterred. Many husbands, fathers and brothers died in the quake, leaving women to fend for themselves. And a majority of the camps have no police presence or security.

“I sleep during the day and stay awake every night to keep watch over my two girls,” says Evelyne Denney, a widow who lives in the Caradeux camp in Port-au-Prince. Residents of this camp have formed an informal security patrol, but without equipment as basic as flashlights or whistles they can do little.

Children are also extremely vulnerable, says Jocie Philistin, project coordinator of the organisation KOFAVIV. “People now find themselves in a place where nobody knows anybody, where a sense of community doesn’t exist, and where women make up the labor force. They must leave the camp to work, and the children are pretty much abandoned.”

The situation in some camps is better than that in others, either because residents knew each other beforehand or because the camps were set up with lighting and separate sanitary facilities. “One of the lessons learned is that people really need to be aware of these kinds of problems from the beginning,” says Sian Evans, a programme officer for the United Nations Population Fund who coordinates the gender-based violence sub-cluster in Haiti.





A case for the law

Good disaster response laws can help relief agencies save lives. Inappropriate laws prevent aid from reaching those in need. Around the world, the Movement hopes legal reforms will come to the rescue.

📍 Wilfredo Medrano looks at an X-ray of his lungs at the San Juan de Dios hospital in Pisco, Peru. Red tape delayed entry of the machine into Peru immediately after the 2007 earthquake but the device is now a vital part of hospital's services. Rolly Reyna

DOZENS OF MAKESHIFT tents cover a dusty plain. It is an encampment for people left homeless by the giant earthquake that struck Pisco, Peru in 2007.

Haydee Cartagena and six family members live in one of the tents, if one could call it that. Straw matting, burlap bags and cardboard artfully matched together provide the walls. A blue tarp that leaks when it rains forms the roof. Their floor is dirt.

Candles offer the only source of night-time light. Water comes from a well 150 metres away. The out-house is closer by.

Like others in the camp, Cartagena remains stuck in a legal limbo common to poor natural disaster victims. None of them can build more solid housing until the government awards them legal title to the humble plots that they now occupy.

"It's better than nothing, but we don't have every-

thing yet," says Cartagena, a stocky 56-year-old who survives on babysitting and washing clothes.

The 8.0-magnitude earthquake that levelled Pisco and killed more than 500 people has left much of the coastal town in ruins. It also exposed not just the susceptibility of Peru's infrastructure to earthquakes but also gaps in its laws related to response and reconstruction from a natural disaster — a problem common to many countries impacted by natural disasters around the world.

Legal issues also delayed aid sent to Peru by the IFRC and other international groups immediately following the earthquake — including vehicles, medicine and even a portable X-ray machine. The Peruvian government had to grapple not only with a natural disaster but also with a deluge of aid, much of it inappropriate, that came pouring in by plane, car and truck through the country's airports and borders.

In response to situations like this around the world, the IFRC is spearheading an effort to proactively address legal problems of response and recovery. It is also organizing work groups in Peru and elsewhere to help interested governments examine their laws and policies to ensure that they are ready to both speed the entry of humanitarian aid the next time a natural disaster strikes and adequately oversee and monitor the quality of that aid.

Acting before disaster strikes

The IFRC began its International Disaster Response Laws, Rules and Principles (IDRL) programme in

The key IDRL recommendations for governments include:

- Reducing visa, customs, taxation and other legal barriers to the entry of relief goods and personnel from foreign states and approved international humanitarian organizations
- Ensuring adequate oversight and monitoring of international relief according to internationally agreed standards of the quality of humanitarian assistance
- Establishing and disseminating the procedures they would plan to use to facilitate and regulate foreign assistance before a disaster strikes.

2001 after its *World Disasters Report* highlighted the fact that a comprehensive and universally accepted international legal framework exists for armed conflicts but that the regime for aid in natural disasters is dispersed and little known. Several years of work led the 30th International Conference of the Red Cross and Red Crescent in 2007 to unanimously approve a new set of guidelines on facilitating and regulating incoming aid, based on existing international laws and treaties.

Governments would be asked to adopt the non-binding guidelines, which were given a formal name: Guidelines for the domestic facilitation and regulation of international disaster relief and initial recovery assistance, or the IDRL guidelines for short. The United Nations (UN) General Assembly and other intergovernmental forums have encouraged member states to use the IDRL guidelines to strengthen their own laws (see box).

The IDRL guidelines "are designed to help countries to look at their own laws and regulations", says

📍 Now being rebuilt, the church on Pisco's central square was central to city life before it collapsed during the 2007 earthquake, killing dozens of people. In and around Pisco, the Peruvian Red Cross has been involved in multiple building projects including shelters, a school and a soup kitchen. Rolly Reyna



David Fisher, the IFRC lawyer who is overseeing efforts to support the implementation of the guidelines throughout the world.

"It's in the interest of governments to be better prepared for these regulatory problems during international relief operations," he says. "The midst of a crisis is not a good time to develop a whole new set of rules. Some governments are more prepared than others, but most have very little law on this. They figure they'll deal with the regulatory problems when they come."

Once disaster comes, it's too late

When the massive earthquake struck, with Pisco at its epicentre, at 18:40 on 15 August 2007, the ground shook violently for three minutes, crumbling most of the adobe homes and businesses.

Foreign governments and international aid groups immediately mobilized to send aid to Pisco, a poor town of 130,000 residents, three hours by car south of Lima. But as is often the case in major disasters, the government and aid agencies were swamped with a plethora of inappropriate and unneeded aid. Piles and piles of clothes donated by Peruvians and foreigners, for example, had to be discarded because they were dirty and torn or because it was taking too much time and effort to store and sort them.

"It was a mess in a lot of ways," says Milo Stanovjevich, who heads operations in Peru for CARE International.

Meanwhile, some assistance that might have been helpful was stymied due to regulations. Six doctors from the Colombian and Panama Red Cross Societies came to care for quake victims, but could not sign prescriptions because they were not licensed by the health ministry. "We always had to have Peruvian doctors with them so it limited our flexibility," says Juan Cordero, a Peruvian Red Cross doctor.

At the same time, some much-needed material (vehicles, tents, antibiotics) sent by well-established relief organizations were held up in customs for a variety of reasons. The Pan American Health Organization (PAHO), for example, shipped a portable X-ray machine from the United States to Peru for use in Pisco's main hospital, which was destroyed in the quake.

Though the town was left without any X-ray machines, the device was held in customs until PAHO officials secured an import certificate, a licence from the country's National Institute for Nuclear Energy and a permit from the health ministry.

Just one example

Such stories should not obscure the fact that most of the aid sent did get through and that Peru's existing disaster response laws did allow domestic and

"It's in the interest of governments to be better prepared for these regulatory problems during international relief operations. The midst of a crisis is not a good time to develop a whole new set of rules."

David Fisher, IFRC disaster law specialist

Authorities in Peru are working to improve disaster response laws. After the Pisco quake, however, the vast majority of aid material did reach recipients quickly and without complication. Here members of the Peru Red Cross distribute aid near Pisco in the village of Tupac Amaru Inca. Giancarlo Shibayama/IFRC



international agencies to respond in the immediate aftermath. Peru's experience after Pisco reveals the challenges many governments face in balancing necessary import and health laws against urgent disaster response.

These types of problems aren't unique to Peru.

Oxfam had 50 vehicles stuck in customs in Haiti for six months following the devastating January 2010 earthquake there. The organization had to rent vehicles for US\$ 3,000 per month per vehicle.

In Indonesia, following the 2004 tsunami, authorities received several tonnes of expired medicines and food, as well as medicines that were unusable because they were labelled in languages not spoken in the country.

But in Indonesia, considerable progress has been made which has sharpened its disaster response, in part by establishing a "one-stop" permitting procedure for Banda Aceh, says Isabelle Granger, now IDRL coordinator for the IFRC's Americas zone. This accelerated relief efforts because aid workers could find all the officials from the different government agencies and ministries in one place.

Making a list

A similar type of pre-disaster approach is outlined in the 2007 IDRL guidelines. They encourage governments to establish a register of pre-approved international humanitarian groups that could be accorded a "fast track" through entry controls, such as customs. Governments should also allow registration after a disaster hits for other aid groups capable of providing competent assistance.

Sorting out which groups are able to add value is becoming especially important because more and more associations are rushing to help disaster-stricken countries. About 100 non-governmental organizations (NGOs) showed up to help after the 2001 earthquake in Gujarat, India, says Granger. For

the 2003 earthquake in Bam, Iran: 120 and for the 2004 Indian Ocean tsunami: 200. In Haiti, roughly 550 NGOs are registered but some observers have estimated that as many as 12,000 have a presence on the ground.

"It has been a burden on authorities," Granger says. "They couldn't coordinate all of them. Some of them didn't come prepared."

The good news is that governments are beginning to use the IDRL guidelines, with Indonesia leading the way. New Zealand, Norway and Panama have also drawn on the guidelines in developing new rules and procedures for international relief. In Europe, where European Union treaties have made national borders easier to cross, there are signs of cooperation on disaster response law emerging in nations that previously saw no need for regulating or facilitating external humanitarian relief.

It's a slow process, concedes Fisher. Ten years after the issue was raised in the *World Disasters Report* and three years since it was prioritized in the International Conference, only a handful of countries have adopted comprehensive reforms, although over a dozen others are currently in formal review processes examining their existing laws and, in some cases, drafting new legislation.

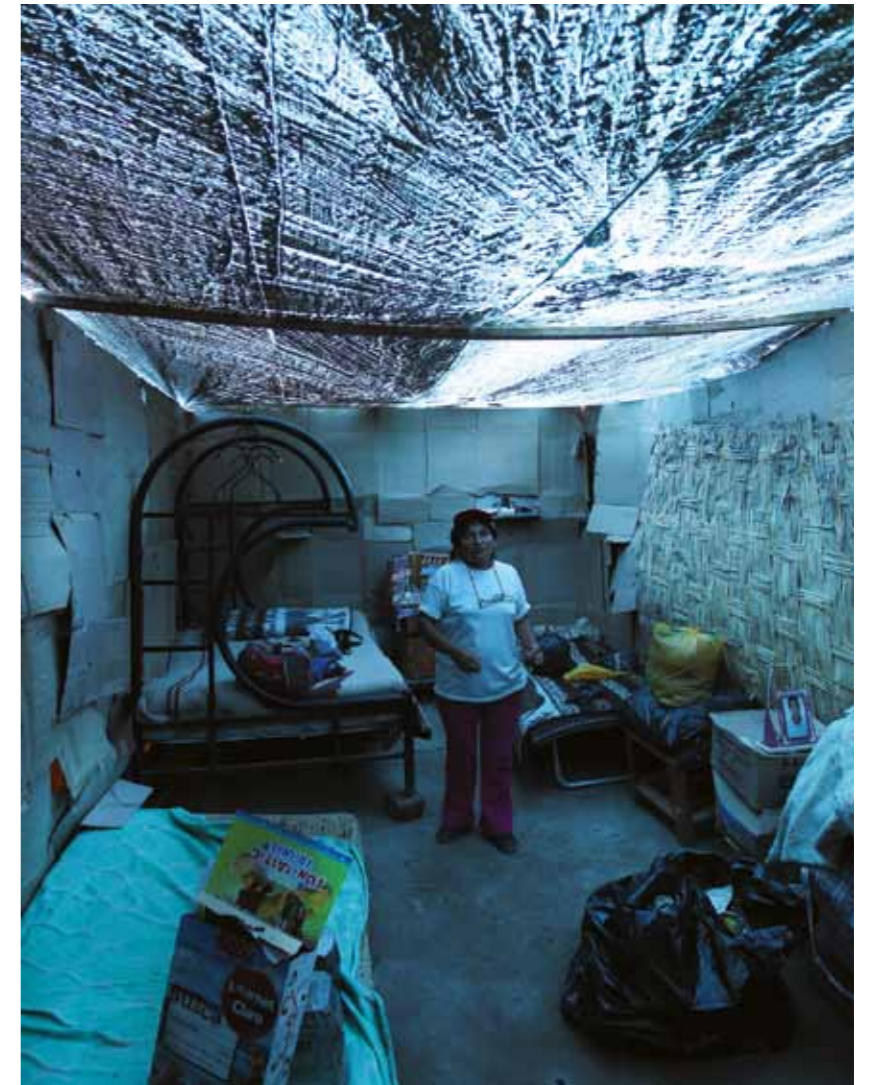
With no natural and large domestic constituency for this type of legislative reform, it can be difficult to bring this issue to the fore. Also, politicians might see codifying procedures for accepting foreign relief as an admission of weakness, a sign that they are reliant on outsiders. Fisher feels National Societies can use IDRL as an opportunity to lead the debate and enhance disaster preparedness in the process.

A complex process

But ironing out the legal ramifications is not as simple as it might sound. Governments have legitimate concerns about controlling who and what enters their countries. The chronicles of humanitarian response tell stories of untrained volunteers, fraudulent doctors, untested drugs, harmful aid and even human traffickers entering countries during times of emergency. Good disaster response laws need to take these realities into account, and that's why the IFRC is offering legal guidelines and proposes a process to guide the reforms, not a one-size-fits-all solution for every country.

In the Americas, there are ongoing projects in Colombia, Haiti and Peru, with more projects planned in Argentina, Chile, the Dominican Republic, Ecuador, El Salvador and Jamaica.

In Peru, the efforts involve representatives from all government ministries, two prominent businessmen, the UN and four humanitarian groups, including the IFRC. "The collaboration has been very extensive," says Gustavo Adrianzen, a law-



More than three years after the quake, some earthquake survivors such as Haydee Cartagena still live in tents without running water. As often the case after natural disaster, this is partly due to legal problems over land ownership that prevent people from building new homes. Rolly Reyna

yer hired by the IFRC to support the process. "The government realizes the importance of the issue because of what happened in Pisco, as well as in Haiti and Chile."

In the meantime, life is slowly returning to normal in Pisco, but at a slower pace than everyone hoped. The government is now paving streets and rebuilding sidewalks, beginning in the centre of town. But jagged scars deface many walls and many homes seem tied together with whatever occupants could salvage. Only about 50 per cent of the homes now have land title.

At the San Juan Dios hospital, the X-ray machine serves as a reminder of how inflexible rules can complicate the arrival of needed aid. Fortunately, the machine eventually did clear customs and remains in constant use today. It serves about 500 people a month, says Wilfredo Medrano, a hospital technician. "It's a good machine."

He is interrupted as Ricardo Galvez, a 34-year-old singer suffering from tuberculosis, steps on an apparatus to be tested.

"Take a deep breath," says Medrano to Galvez. ■

By **Tyler Bridges**

Tyler Bridges is a freelance journalist based in Lima, Peru.

Reader question:

In what ways do your country's national disaster laws hinder or help in delivering disaster relief?

Send your experiences to rrcc@ifrc.org or join our discussion on www.facebook.com/redcrossredcrescent

A time to volunteer



If not for the marks of time — the slightly burnished photographic paper, the fading contrast, the stiffness of the posed 19th century images, the horn-rimmed glasses and the bell-bottoms — these photos could easily describe the spirit and motivation of volunteers today. Dating from the American Civil War to the present day, the images show volunteers in action over 15 decades. Many of these photographic gems were recently unearthed from IFRC and ICRC archives, and are now part of the new exhibit posted on the IFRC's web site (www.ifrc.org) to celebrate the tenth anniversary of the International Year of Volunteers.

These women, members of the Soldier's Aid Society who served throughout the American Civil War, were the forerunners of the Red Cross Volunteers of today. American Red Cross

Youth members of the Danish Red Cross carry out rescue and first aid exercises in Frederiksberg, Denmark. IFRC



Volunteers sort clothing for flood victims in a school in Fréjus, France. The flood resulted from the rupture of the Malpasset Dam on 2 December 1959. IFRC



Red Cross Hospital Recreation Worker Sharon E. Dunnell helps navy men Michael J. Flanigan (right) and Alan Kadaroff pass the time pleasantly with a game of cards at the U.S. Naval Hospital, in Philadelphia, Pennsylvania. American Red Cross / Rudolph Vetter

☞ A member of the Burma Junior Red Cross delivers first aid to an injured man during the Union Day celebrations in Pa-an. IFRC



☞ A Red Cross volunteer gives medical attention to an elderly cyclone victim. The cyclone hit India on November 19, 1977, killing 4,204 people. IFRC

☞ Youth members of the Hungary Red Cross pay a visit to an elderly retired farmer in the village of Ostoros, Hungary.



☞ Nicaraguan Red Cross volunteers pick through the rubble of a building destroyed by an earthquake. The 1972 disaster killed 5,000 people, left 250,000 homeless, and destroyed 13 square kilometers of Managua's city centre. IFRC

☞ A woman hands a Red Cross worker her child from a train after floods in San Pedro, Argentina. IFRC



Author, volunteer and humanitarian watchdog Sandra Schimmelpfennig says our focus shouldn't be on new volunteers, but on better managing the ones we have.

The year of the volunteer

MANAGEMENT

As a volunteer myself, and someone who has managed volunteers, I know how challenging it is to manage them well. Recruiting is the fun part and often gets the most attention. But that's just the first step of the management cycle, which includes training, supervising, providing opportunities to learn and grow, recognizing volunteer contributions and ensuring that giving one's time to help others does not become a financial burden.

As Dashdeleg Aleksandr, head of the Mongolian Red Cross Society's operational department, explains, "Volunteers will leave if there are no activities, no capacity to manage them, no incentives to stay or no chance for promotion."

"They've had a tough life and want to give back," Aleksandr says of the Mongolian Red Cross's volunteer corps. Unfortunately many only stay a year or two because "we don't have things like insurance and incentives for the volunteers". Funding for transportation costs and other expenses is also limited.

Rather than trying to address all problems at once, Valli Ponniah, Asia Pacific volunteering development manager for the IFRC, suggests that National Societies first take stock of where they are in the volunteer management cycle.

That's what the Sri Lanka Red Cross Society did after the 2004 tsunami revealed the need to improve standards for managing, tracking and reimbursing volunteers. "The Red Cross brought in a focal person specifically for volunteering, and now they have a manual, a volunteer database, standards and regulations," she says. "They were the first National Society to sign up for the global volunteer insurance policy."

Pandora's box

Insurance is a good example of how addressing volunteer needs can open a Pandora's box of

managerial issues. Accident insurance provides a sense of security for volunteers, especially for those responding to disasters. But when the IFRC first developed a volunteer insurance scheme for National Societies, no one signed up, says Ponniah.

The reason? Many National Societies didn't have the management practices in place to make it work. Often, they didn't know how many volunteers they actually had, let alone all their names.

Before an accurate list of volunteers can be created, however, National Societies face a variety of tasks including:

- defining who is a volunteer, a member or staff
- developing a spreadsheet or database to store and update information
- training branch staff on tracking volunteers and data entry
- designating a national focal person to oversee the process.

While it can be expensive and time-consuming, there are many benefits. If there's a disaster, the National Society has up-to-date information on volunteer addresses, skills and experience. With this

Your turn

How should volunteers be better managed? What do you think of the Value of Volunteers survey? Please send your opinions to: rcrc@ifrc.org or join the discussion on www.facebook.com/redcrossredcrescent

data, National Societies can more quickly deploy the volunteers. Tracking volunteers, and inviting them to join other programmes, helps retain them. Otherwise, when programmes end, they slip away.

Giving the 'doers' a voice

Such tracking and communicating is just one way National Societies can help their unpaid workforce feel rewarded and recognized. "Volunteers are often considered to be just the 'doers' and they're called upon when there is something to do like distributing goods or doing health programmes," notes Andreas Sandin, volunteering development coordinator in the IFRC's Americas zone office. "But often they are not involved in the institutional life at branch and national levels."

This is one reason why the New Zealand Red Cross aims, where possible, to treat its volunteers like staff, says Gillian Peacock, national people and capability manager. "Our induction programme for volunteers is the same as the one staff get," she says. "And when we received scholarships from Outward Bound (an organization that promotes personal growth through outdoor experiences), half of them went to volunteers and half went to staff."

The Peruvian Red Cross increasingly brings volunteers into its planning process, says Aguenda Aguilar García, coordinator of the National Society's country support plan. This year, volunteers are helping to craft a new strategic plan by participating in national workshops.

In Nepal, the focus is to "create an environment so volunteers can express themselves and have their issues addressed", according to Sudarshan Adhikari, the Nepal Red Cross Society's head of organizational development. Unfortunately, finding the long-term financial support needed to develop an integrated strategy at the national level and roll it out across all projects and locations has been difficult. "Organizational development is not a high priority for donors," he notes. "They always want to fund the direct delivery instead."

The recently released IFRC survey and report, *The value of volunteers*, underlines the need for better management systems to protect, promote and support volunteers. This is a good step. To make the most of this year's focus on volunteering, we might also consider renaming 2011 'The Year of the Volunteer Management', to focus the attention of National Societies, donors and the media on this less glamorous, but equally important, part of that contribution.

Sandra Schimmelpfennig

Sandra Schimmelpfennig is a writer and humanitarian watchdog based in Utah, USA, where she authors the blog, *Good intentions are not enough*.

Volunteer values

Volunteers are central to the Red Cross Red Crescent Movement's ability to improve health, reduce poverty, gain access to vulnerable communities and respond to emergencies. But exactly how many Red Cross Red Crescent volunteers are there and how much value do they offer?

A recent IFRC survey, published in a report entitled *The value of volunteers*, provides answers. Roughly 13.1 million active Red Cross Red Crescent volunteers donated nearly US\$ 6 billion worth of services that reached about 30 million people in 2009, according to the report, released in late January to mark the tenth anniversary of Year of the Volunteers.

Based on survey results from 107 National Societies, *The value of volunteers* quantifies the economic value of the volunteer workforce and describes the many social contributions they make in their communities. The IFRC will use the results in its efforts to protect, recognize and promote volunteer efforts.

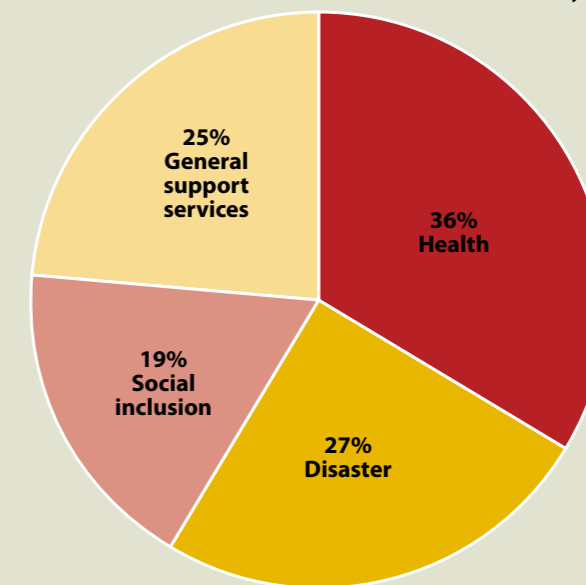
Conducted by Dalberg Global Development Advisors and based on a methodology developed by the International Labour Organization and the Johns Hopkins University Center for Civil Society Studies, the study provides a baseline for tracking volunteer recruitment and retention.

It also paints a clearer image of the key areas to which volunteers contribute. While Red Cross Red Crescent volunteers work in many fields, the greatest number of volunteers engage in health promotion, treatment and services. This is followed by disaster preparedness, response and recovery, and then by general support services.

In addition, volunteers extend the paid workforce by a factor of between 1 and 2,000, with a median global average of 20 volunteers to every paid staff member. (In sub-Saharan Africa, the mean average ratio of volunteer to full-time equivalent staff is 327 to 1 and in South-East Asia, 432 to 1. In the United States and Canada, the ratio is 11 to 1, the lowest of all regions.)

What do all these numbers prove? To the IFRC, they show that investment in volunteer-based community development yields good returns. "The value of the IFRC volunteer network is that it offers an opportunity to invest more, not less, in tackling the root causes of suffering," the report notes.

Breakdown of Red Cross and Red Crescent Volunteers by field



Volunteering by the numbers:

- US\$ 6 billion:** approximate value of donated services provided in 2009 by Red Cross Red Crescent volunteers
- 13.1 billion:** approximate number of volunteers worldwide
- 4:** Minimum number of hours contributed per year to be counted as a volunteer
- 107:** Number of National Societies that participated in IFRC's *Value of Volunteers* survey
- 46:** Percentage of volunteers who are men
- 54:** Percentage of volunteers who are women
- 20 to 1:** the average ratio of volunteers to paid National Society staff



Getting the message

Whether by mass SMS campaigns or face-to-face conversation, getting information to beneficiaries can be critical to their survival. Technology offers new tools. But old questions remain: are they getting the message and how well do we listen?

From Haiti to Mongolia, cell phone technology is changing the way the Movement talks to and empowers beneficiaries. In Mongolia, herders such as Khairkhandulaan Soum use cell phones to warn each other of harsh weather, and to share other life-saving emergency information. Rob Few/IFRC

SEATED AT HER desk at the IFRC base camp in Port-au-Prince, Sharon Reader brings up a Google map of Haiti on her laptop computer. Scattered over the map are tiny blue markers representing cell phone towers. She selects a group with her cursor, then types a message in Creole and hits “send”. In less than an hour, nearly 24,000 people in the northern town of Port-de-Paix receive an SMS from the Haitian Red Cross Society reminding them to wash their hands thoroughly with soap to protect against cholera.

Ten minutes away in the camp known as La Piste, a Haitian woman with a cheerful smile and blonde braids, Nicolette Bernard, walks up to a woman washing laundry at the entrance to her tent. She introduces herself as a Haitian Red Cross hygiene promoter.

“What do you know about cholera?” Bernard asks the woman. As they start to chat, she reminds her of ways to protect her family from catching the disease.

These two very different communications tactics — one hi-tech, one face-to-face — not only share a common message, they are a critical part of the

effort to improve the delivery of humanitarian aid through communication. By talking and listening to beneficiaries, the reasoning goes, aid organizations can target aid more effectively while giving the recipients a greater role in their own recovery.

“There’s a huge need to include beneficiary communications in any development plan,” says Leonard Doyle of the International Organization for Migration (IOM). “You’ve got a million people who have been living in tents for a year. Does anybody know what they need, what they think, what their problems are? You need to include them in the conversation. Otherwise you’re blindly wandering around assuming you know the right answers.”

This basic idea of talking to victims is not new. It’s been around for as long as people have sought to help others in need. But the concept of beneficiary communications, as it’s now known, has taken on new dimensions in recent years after several major disasters — particularly the 2004 Indian Ocean tsunami — highlighted the need for improved warning systems and aid that better reflects people’s requirements on the ground.

In response, a number of international relief and development organizations and media agencies created a working group called Communicating with Disaster Affected Communities, which supports and encourages those working in the humanitarian sector to communicate with the people they’re aiming to help.

Now beneficiary communications, or ben comms, is part and parcel of many operations, from flood-ravaged Pakistan to famine-afflicted Mongolian herding communities. But the scale of the Haiti earthquake brought the Movement’s beneficiary communications efforts to a new level. For the first time, the IFRC hired a full-time ben comms delegate, while the British Red Cross and Canadian Red Cross both created similar jobs.

“Getting information is as important as getting water,” says Reader, the IFRC’s beneficiary communications delegate in Port-au-Prince. “When something bad happens we immediately turn on the radio or television. There’s a need to know what’s going on — where do I go, what do I do, how can I get help?”

From SMS to megaphones

Since the earthquake, she and her ben comms colleagues have dealt with shelter issues, disaster preparedness, gender-based violence, health and hygiene by using a combination of hi-tech and time-tested methods. They have sent out sound trucks, printed posters, produced radio shows, created telephone call-in lines, supported hygiene teams and transmitted millions of text messages to people’s cell phones.



Even with growing access to cell phones, good communication with beneficiaries relies on face-to-face conversation, door-to-door legwork and in-depth needs assessment. Here a volunteer for the Haitian Red Cross speaks with a resident about hygiene. IFRC

Meanwhile, the use of SMS messages took on a new dimension. “A lot of people had started to use SMS technology but it was not efficient, it was a scattershot approach,” says Will Rogers, a communications specialist for the Irish Red Cross who had been developing cell phone messaging for campaigns in Indonesia.

Before making the trip to Port-au-Prince, he contacted Trilogi International, the parent company of one of Haiti’s phone suppliers and explained the IFRC and Haitian Red Cross Society’s needs. Trilogi’s developers put together a brand-new system that allows the IFRC and the National Society to zero in and send text messages to a specific geographic zone. For example, when a storm surge threatened the northern coast of Haiti last September, they could send a message to 50,000 people in the affected area without disturbing people in the rest of the country.

And unlike other services, recipients don’t have to be subscribers to the alert system to receive the SMS. Thanks to the ingenuity of some camp residents, sometimes people don’t even need phones. At one camp in Port-au-Prince, the camp committee president, Paul Jean Bélo, sends people out with megaphones to broadcast the content of each SMS throughout the camp.

But cell phones have their limits. Most of the cell phones owned by people in Haiti only receive messages of up to 140 characters. So some SMS instruct beneficiaries to dial a toll-free line for a menu option and a longer recorded message. During a campaign

“Getting information is as important as getting water.”

Sharon Reader, IFRC beneficiary communications delegate

about gender-based violence, victims were instructed to call the number for a list of clinics they could go to for help.

When Hurricane Tomas was on its way, an SMS invited people to call for disaster preparedness information. The phone line was overwhelmed and while 310,000 calls got through, many others didn't. Reader plans to address that problem with an upgrade of the line. At the same time, the response has convinced some sceptics that the text messages have an impact. "I myself didn't think they would work so well," says Periclès Jean-Baptiste, communications director of the Haitian Red Cross Society.

All told, the IFRC and the Haitian Red Cross delivered nearly 27 million text messages to 1.2 million Haitians in 2010. Trilogy has licensed the technology to the IFRC for free and is working with Rogers to convert the product into Urdu and adapt it to a mobile network system in Pakistan. In January 2011, the IFRC and Trilogy signed a licence agreement that will allow the IFRC to deploy the system globally.

The personal touch

But SMS is just one part of an overall strategy. When creating a beneficiary communications campaign, Reader starts with a particular issue then builds a plan of action around it, picking and choosing methods that work together and reinforce the message.

At the Annexe de la Mairie camp, for example, she anticipated problems when the IFRC and Haitian Red Cross only had enough available land to build

"A lot of people had started to use SMS technology but it was not efficient, it was a scattershot approach."

Will Rogers, communications specialist for the Irish Red Cross

This weekly TV programme hosted by Pakistan Red Crescent Society and IFRC staff, allowed for two-way communication with those affected by last year's monsoon floods. Messages received by viewers help determine programming. IFRC

350 shelters for 900 families. Working closely with the shelter team, she headed off those problems with what she calls a "tailored solution", putting up notice boards with posters explaining how the Red Cross conducted the selection process and who they considered the most vulnerable members of the community. She sent out a sound truck with the same message, so even those who couldn't read would understand. And she advertised a call-in centre that people could telephone with questions. "We used communications to smooth the process and reduce the amount of frustration," she says.

In Port-au-Prince, La Piste is a massive camp where 50,000 displaced people live in endless rows of dingy tents. This is one of the first places where cholera appeared in the capital, and there is a treatment centre on site. In early January, a number of empty beds served as proof that people were assimilating the message about how to avoid the disease.

Nonetheless, Haitian Red Cross hygiene promoters were continuing to pay visits to the tents every day. One volunteer, a young woman named Lovely, walked up to a woman cooking food in front of her tent. "Cholera is still here," she told her, "so don't forget to keep washing your hands and cooking your vegetables."

"It's so important to keep communicating the messages again and again," says Amanda George, who is in charge of beneficiary communications for the British Red Cross. On Fridays, she often hires a sound truck to do a hygiene promotion road show throughout the camp. Big speakers blast Haitian



Photo credit



Restoring family links

The ICRC and the Haitian Red Cross also used a mix of hi- and low-tech methods in its efforts to reunite families through the Restoring Family Links (RFL) programme. In the days following the quake, ICRC rolled out mobile teams with satellite phones so people could call loved ones around the world.

RFL services were advertised via radio, posters were affixed to any prominent surface and loudspeakers were poised on the back of pick-up trucks. Meanwhile, Haitian Red Cross personnel worked in the camps, collecting data on missing people that could be posted on the ICRC tracing web site. In this case, the beneficiaries of RFL services could be living as close by as the next camp or as far away as Miami, Montreal, New York and Paris.

In situations of conflict, communication with beneficiaries is just as vital, though it poses unique challenges — particularly when it comes to hi-tech tactics. Not only could there be concerns about the beneficiary's privacy and security, cooperation with a telecom provider on SMS campaigns could compromise neutrality if that provider were controlled by or affiliated with a party to the conflict. Direct face-to-face communication with beneficiaries is critical, however, both to assess beneficiary needs and to garner the "humanitarian intelligence" required to understand the political and cultural context into which aid is delivered.

In many conflict areas, people lack access to cell phone service and so radio is the more effective. To assist people separated by conflict in Somalia, the ICRC works the British Broadcasting Corporation on a 15-minute radio broadcasts in which enquiries and the names of people being sought are read out.

music and messages while a couple of volunteers dressed like clowns sing, dance and talk to the crowd about hygiene.

"One of our drivers is a musician," says George. "He composed a song about waste disposal. After he sang it once in the camps, the kids already knew the lyrics and were singing along."

West of the capital in the seaside town of Léogâne, there are nearly 50 wooden kiosks scattered throughout the communities where the Canadian Red Cross is working. The National Society built them as information points, providing material such as lists of people whose houses have been assessed.

"The day after we put up the first one, a man came by and realized his name wasn't on the list. He had fallen through the cracks," says Louise Taylor, the Canadian Red Cross ben comms delegate. The kiosks also have letter boxes for residents' comments, and posters with cartoon drawings explaining various issues, such as the system for distributing transitional shelters.

"You need to include beneficiaries in the conversation. Otherwise you're blindly wandering around assuming you know the right answers."

Leonard Doyle, IOM Haiti

Face-to-face communication also helps aid workers pick up on and counteract potentially harmful rumours. At one point, Reader caught wind of a rumour that camp committee members were taking money in return for shelters. She immediately printed posters saying that Red Cross Red Crescent shelters were free and providing a number that people could call if they were ever asked for money.

Time to listen

All agree that the biggest challenge of beneficiary communications is making sure that those most in need also have their say. "It's easy put information out," says Reader. "What has taken more time to set up is how to get information back."

To that end, Reader is now working on a small pilot project with a Haitian company called Noula that establishes a telephone line where residents of the Annexe de la Mairie camp can call and make shelter-related complaints. They can also ask questions to people on the other end, who respond using a list of standard questions and answers. When the respondents don't have an answer, they pass the information on to the Red Cross, which can then follow up.

And then there's radio. Every Wednesday at 15:00, the IFRC produces Radio Red Cross on Haiti's Radio One network. It's a call-in show, a fairly new concept here, with invited experts and a different theme every week. The radio show has been so popular that Reader plans to air the programme twice weekly. (The Pakistan Red Crescent Society has also launched an interactive weekly radio show and a 30-minute television show.)

One day this winter, two of Reader's Haitian colleagues, Moralus Joseph and Johnson Hilaire, produced a show on cholera. They carried their laptops to a container office at the Red Cross base camp, plugged in a mixing board and a couple of microphones and a few minutes later, were on the air. Joseph asked his guests (a Haitian Red Cross doctor and a director from the National Society's health department) various questions, Hilaire played a few pre-recorded spots and jingles (including a song about soap and water), then they opened up the phone lines.

The calls started slowly and picked up as the hour moved along. "How long will purified water stay clean?" one caller asked. "If I get cholera once, can I catch it again?" asked another. "If you have diarrhoea does that mean you have cholera?"

Some questions, such as "When is cholera going to leave?", didn't have an easy answer. But the programme allowed people to ask tough questions, to give voice to their fears and to feel like others out there were listening. ■

By **Amy Serafin**

Amy Serafin is a freelance journalist based in Paris.

Two authors, two views: does aid fuel conflict?

IMAGINE you are an international aid worker in a refugee camp and you learn that soldiers, who have been levying taxes on the rice, tents and other supplies being distributed, are using the proceeds to buy weapons. The soldiers then use those weapons to drive more people into the camp or to their deaths. What do you do? It's with this provocative question that Dutch journalist Linda Polman

opens her book, *War Games, the Story of Aid and War in Modern Times*. Polman argues that humanitarian aid often prolongs conflict when it is misused or its delivery is manipulated by armed groups. RCRC spoke to Polman and to Fiona Terry, the author of the 2002 book *Condemned to Repeat? The Paradox of Humanitarian Action*. The two authors raise similar questions but come to very different conclusions.

Linda Polman

Journalist and author of *War Games, the Story of Aid and War in Modern Times*

RCRC: In your book, you argue that humanitarian aid prolongs the suffering caused by conflict. How so?

Polman: Aid organizations have made the analysis themselves several times since 1995, after the experience in the refugee camps in Goma, Democratic Republic of the Congo. One thing they always come up with is that the weakest point is the lack of coordination. That lack of coordination makes aid organizations easy to manipulate by regimes who want to control the aid for their own benefit.

You also make the point in your book that there has been a massive proliferation of aid groups in recent decades and so it's hard to have a united front. So, is the kind of coordination you're seeking truly possible?

It's possible, but only if we want that solution to work. It's the same discussion we often have about the United Nations (UN). We all scream about how powerless the United Nations is. But the member states can make it as powerful as they want it to be.

The same thing goes with the aid world. If we all agreed that the UN, for example, should be the big coordinating body and if we gave them the power to

fulfil that mandate, then it might be possible. The problem is the willingness of donors and aid organizations to compromise a little on sovereignty. They don't want to let others make decisions for them. If only they would compromise on that, it could get better.

Right now in Haiti, they have this well-intentioned attempt for a cluster approach to coordinate aid organizations working on similar issues. These clusters could be a step towards improvement but as soon as one aid group has to give sovereignty to another, they will begin to withdraw.

You make the case that aid groups should withdraw their assistance if they see it is being abused. Can you give us a case in point?

One example is Darfur, where the lack of cooperation among aid organizations has essentially turned them into marionettes of the regime. There is little investigation into the quantity of aid being pocketed by the Sudanese government or by the rebel organizations inside the refugee camps. But if the aid organizations themselves agreed to make a combined stand against the abuse of aid, then probably they would have a better chance [to stop aid being

misappropriated]. I'm not saying it would end, but it would be less easy for a regime or armed group to abuse the aid.

Aid organizations have to stand up against this and say to the regime, "We are the largest organizations on the planet, we are powerful NGOs with these large budgets and we will set our conditions", and negotiate a better deal.

But if you pull out, wouldn't that just punish those in need while causing very little impact on the course of the conflict?

This is the argument that organizations make: that it is our moral responsibility and our mandate to stay. But I believe there is also a moral question about the consequence of staying and one of the options is to say "no" or to leave. I believe the more important question is to make sure that the aid organizations themselves are in charge of their own aid supplies before they go. This is what should be negotiated, otherwise you should not go.

Fiona Terry

Humanitarian and author of *Condemned to Repeat? The Paradox of Humanitarian Action*

RCRC: You've lived through and have been writing about the ethical dilemmas of humanitarian aid for more than two decades. What is your take on Linda Polman's argument?

Terry: When I started my book, it was after the Rwandan refugee camps were attacked in 1994. There was a bit of a knee-jerk reaction from some journalists and analysts who said, "Now we must admit that the Rwandan refugee camps were helping people who were guilty of genocide to rearm and get control over the population. We must not allow that to happen again and we must stop all aid because aid is bad."

That's why in my book I really looked into what is the relative contribution of aid to the fighting machine. How important is it? We throw around words like "potentially prolongs war" but in my analysis, it is really not that important a factor. Aid can bring with it very serious negative side effects. But really prolonging war? It's not often that an armed group depends on aid for its survival.

One of the points that Linda Polman makes is that some aid groups use the concept of neutrality as an excuse to not take a stand when aid is misused.

I would not put this down to neutrality. I think neutrality is in fact a sophisticated position to take. What she is describing is more hiding behind a technical, bureaucratic response that says, "Well, it's our job to deliver aid, so that's what we're going to do." That's not neutrality.

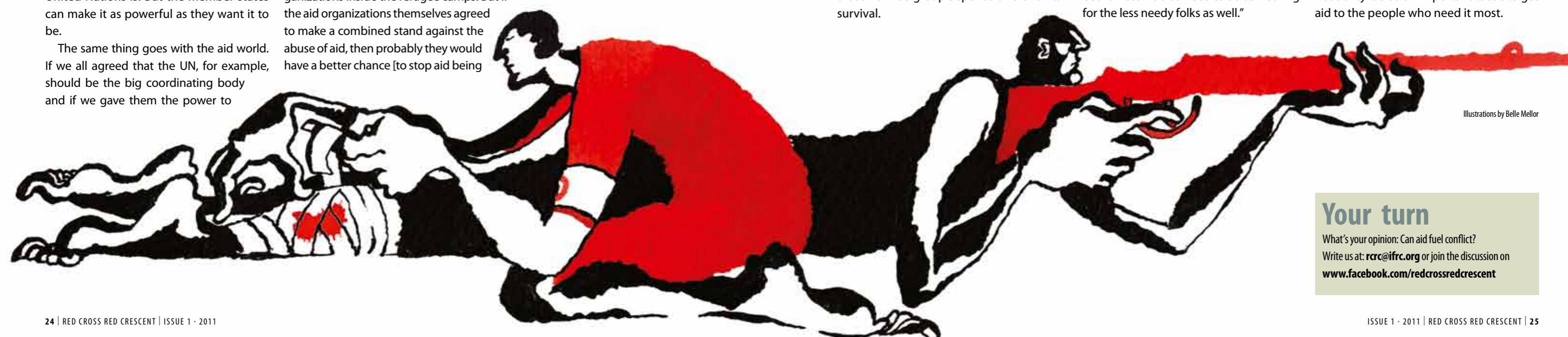
Some argue that fewer aid groups are adhering to this principle of neutrality, which is perhaps misunderstood and also difficult to put into operation.

In some circumstances you have to ask, "What is more important? We have to be perceived as neutral so we need to think about how each side is going to see this aid." And sometimes I think you have to say, "Well, these people over here maybe do not need the aid as much, but since it's really important for us to get access to those who need it most we also need to do something for the less needy folks as well."

That was very much the case in Darfur. Some of the aid groups came in and said, "It's the farmers who have suffered from the tactics of the government, so we are only going to aid the farmers." So they went into the IDP [internally displaced persons] camps and only gave aid to one side of the conflict. By doing so, they ultimately had less access to the most needy populations.

In this case, I think the ICRC was really smart. In the beginning, it set up the camps, but then also got out of them to reach people in rural areas. So it was able to help the farmers and identify the needs of the people in the nomadic groups who couldn't access markets or who needed access to veterinary services. So the ICRC started veterinary services and digging water points. And in doing so, they made a better impression and therefore got access to many more areas.

It's really about being streetwise and smart. So I would disagree and say that neutrality is also an important tactic to get aid to the people who need it most.



Illustrations by Belle Mellor

Your turn

What's your opinion: Can aid fuel conflict?
Write us at: rcrc@ifrc.org or join the discussion on
www.facebook.com/redcrossredcrescent

A society's greatest test

A central part of Japan's health-care and emergency relief services, The Japanese Red Cross Society faces its nation's greatest post-War crisis.

IT'S NIGHT TIME in what's left of Otsuchi and it's bitterly cold. With the temperature at minus 5 degrees Celsius, and no electricity or mobile phone coverage, this once-vibrant city is now almost completely dark.

The exceptions are the fires survivors have built from the timbers of shattered buildings, the light from a few relief centers and the searchlights of helicopters and rescue teams picking through twisted wreckage of once peaceful neighborhoods.

Up until the afternoon of 11 March, this was a quiet and prosperous fishing town of 17,000 people built around one of the many small harbors along Japan's northeast coast.

Today, Otsuchi is just one of several seaside towns being referred to by some media as a "lost city." More than half of the city's population — as many as 10,000 people — perished or went missing after massive surges of ocean water crested the city's 30-foot high tsunami walls and smashed through downtown. The rampaging waters carried away people, cars, homes, schools, even factories and office buildings.

The devastation left behind was almost total. Only a few buildings remained amid a sea of wreckage. Here, and in other cities, media outlets referred to the aftermath as "apocalyptic." A late-winter snowfall, mixed with ash from burning wreckage, draped the ruins with a layer of wet slippery snow that made relief efforts even more challenging.

The hardest hit were the elderly. "There are a lot of people with chronic conditions and today, it's cold so some people have fallen ill," says Takanori Watanabe, a Red Cross doctor from Himeji, in western

Japan, who arrived in Otsuchi as part of a 12-person mobile medical team that ran daily clinics around the evacuation centres.

As similar scenarios played out in numerous coastal towns — including more populous cities such as Ishinomaki, Miyagi, Sendai, Shiogama — the scope of the earthquake and tsunami was quickly recognized as a national catastrophe. With the ongoing struggle to contain radiation at the crippled Fukushima Nuclear Power facility, the prime minister referred to this treble emergency as Japan's greatest post-World War Two crisis.

Amid the extreme loss and grief, the people of Japan's northeast coast were noted for their stoicism, poise and generosity. With fuel shortages and little food coming in to the few shops that remain open, people formed peacefully in long lines to get water or food or to make urgent phone calls to relatives. Others scavenged through the debris for packets of dried food.

A National Society responds

For the Japanese Red Cross Society (JRCS), the scale and multiplicity of the crisis tested its robust resources and capacity. The 124-year-old National Society is well established with an annual turnover topping US\$ 10 billion, a staff of 55,000, and roughly 2 million volunteers.

The JRCS is not only a key element of the national emergency response, it is an integral part of the country's health-care system, managing the nation's donated blood supply and running more than 100 hospitals and nursing colleges. These are a few

reasons why the National Society did not call for an international funding appeal though it did welcomed donations (The JRCS received a total donation of JPY 22.3 billion or CHF 249 million as of 20 March).

With a highly trained and professional staff and volunteer corps, the JRCS manages one of largest international operations in the Movement and it also has experience with major domestic catastrophe (the 1995 Kobe earthquake, for example).

This combination of experience and dedication is embodied in volunteers such as Toda Kazuko, who drove 12 hours through the night from his home in Kobe to reach Otsuchi. Within hours of arriving, a tented clinic had sprung up and members of the team were treating patients in the evacuation centres. A veteran of the JRCS's Haiti earthquake operation, Kazuko was completely focused on the job at hand.

"We have more than 700 staff deployed and in four days the next rotation comes in," he says before having to leave abruptly as an elderly woman, shivering uncontrollably, is brought into the clinic on a stretcher.

Kazuko and his colleagues were among the 249 JRCS medical teams which fanned out across the

length of the 400-kilometre-long disaster zone. Within 24 hours of the disaster striking, the JRCS had set up a network of emergency response units from which five-person teams, comprised of doctors and nurses, operate — moving out to different evacuation centres in nearby towns each day.

Each team included a trained psychosocial nurse, who allows survivors to voice their grief and anxieties, as well discuss practical concerns. The JRCS has 2,400 trained psychosocial nurses, and an eight-member specialist psychosocial team that just returned from a mission in New Zealand, where they were helping survivors of the Christchurch earthquake.

The infirmary set up at Otsuchi high school, where about 700 people filled the floor space of the school's gymnasium, only has two beds, one being used by an elderly woman who is barely conscious and the other by an old man attached to an I/V drip, who was badly dehydrated. Most of the patients at clinic were elderly and many had lost their regular medication in the disaster.

Tired or sick, they lay on mattresses on the floor, swathed in blankets. Many shivered uncontrollably

One week after the earthquake struck and tsunami surged through, a Japanese Red Cross volunteer surveys the damage to Otsuchi in Iwate prefecture. Japanese Red Cross Society





For some of the youngest patients, who may be particularly vulnerable, special care must be provided, however warm skin and a kind voice, together with a watchful eye can go a long way to ensure a speedy recovery.

Toshirharu Kato/Japanese Red Cross Society

under blankets, suffering from hypothermia having been stranded in their homes without water or electricity.

One member of Dr. Watanabe's team trained in psychological counselling sits in the corner, quietly comforting a teenage girl who is sobbing with her head in her hands. Everyone in Otsuchi has lost someone. A relative, a friend, a neighbour — the entire town has been affected. Helping people to overcome trauma is a major issue and teams of Red Cross counsellors are being deployed to combat the stress related illnesses that are beginning to emerge.

Beacons of light

Amid the ruins, Japanese Red Cross hospitals were sources of hope and light — literally — in cities without power. The Red Cross hospital in Ishinamaki, for example, drew people in from miles around, many of whom simply find comfort in being able to sleep in a warm corridor with strangers. With all other local hospitals flooded or damaged, this hospital welcomed over a thousand patients from the surrounding area, and every inch of floor space is occupied with the sick and the wounded.

Most of the injured were brought by civil-defence helicopters and buses, while others managed to limp in or were carried through the doors. The trauma was evident, written on the pale faces of many who have seen loved ones swept to their death.

Dr. Takayaki Takahashi is a surgeon who leads one of the five mobile medical teams that operate out of the Ishinamaki hospital. He's been on call for 48 hours straight. Each day he heads out with another doctor and three nurses to run clinics at the evacuation centres where thousands of people have been housed.

"Today we went to Miyoto, which is only about 10 kilometres away by road, but the bridge from the mainland had been swept away," he says. "We had to get there by helicopter as it is still surrounded by water. We treated 100 people and left three days rations of food and water for 700 people who are sheltering in a school."

Many of the wounded were burn victims whose

Amid the ruins, Japanese Red Cross hospitals were sources of hope and light — literally — in cities without power.

homes caught fire when the diesel from sinking fishing boats ignited the mass of debris being carried inland by the tidal surge.

Some of the seriously injured taken to the hospital were people who were swept up in the tsunami and were brought in with internal injuries and severe wounds. Others were at risk from pneumonia having inhaled large quantities of contaminated sea water.

Hundreds of Red Cross medical staff from across the country have come in to work at the hospital on a four-day rotation from other hospitals across Japan. While morale was high, conditions were difficult. Medical supplies were running low, electrical power was cut off and there were problems finding fuel to run the hospital generator.

As this magazine went to press, search and rescue efforts turned towards recovering the mortal remains of those who had lost their lives. Official estimates had placed the number of confirmed dead at more than 8,000; the number of missing at 12,000. As the number of people missing following Japan's earthquake continued to grow, the ICRC has supported JRCs efforts to provide information on missing loved ones through its Restoring Family Links programme and to identify mortal remains.

Attention was also focused on the Fukushima nuclear power station, where at press time, crews had been able to restore power, raising hopes that the situation would not worsen — though the plant continued to emit radioactive steam.

All 47 of the JRCs prefectural branches have trained nuclear decontamination teams and equipment, including special tents in which radioactive material can be washed off. The teams are designed to be mobilized in conjunction with the government's specialist units. So far, there has been no request from the government to mobilize these teams, but they remain on standby.

With the support of government authorities, the JRCs is monitoring the situation in hospitals close to the exclusion zone, in case radiation levels rise and pose a risk to patients. Meanwhile volunteers have played a key role in caring for the thousands of people evacuated from the 20-kilometre exclusion zone surrounding the affected plants.

Despite the grim, compounding nature of this multiple disaster many draw inspiration from the resilience of the Japanese people and their response to this national tragedy. And there are other reasons for hope: The generous international response will help in both relief and recovery stages. In addition, a regional early warning system developed after the 2004 Indian Ocean tsunami appears to have helped avert further loss of life as the tsunami spread throughout the south Pacific. ■

By **Patrick Fuller/IFRC** in Japan and **Malcolm Lucard** in Geneva.

Resources

BOOKS



The value of volunteers
IFRC, 2011

We all know that volunteers make an enormous contribution towards improving health and reducing poverty and suffering. But what is the true economic value of that contribution? As part of its advocacy efforts surrounding the tenth anniversary of the Year of Volunteers, the IFRC has produced a report that answers that question. Roughly 13.1 million Red Cross Red Crescent volunteers provide some US\$ 6 billion worth of services per year, according to the study. Based on input from 104 National Societies, the report also provides insights into the social value that volunteers deliver to their communities and to development worldwide.

Available in English

Haiti earthquake One-year progress report IFRC, 2011

Ten months of intensive activity has provided sufficient experience with which to reflect on what has been a monumental operation for the humanitarian community. The progress made allows the IFRC to weigh what has been accomplished and to gauge what still needs to be done. The document assesses the achievements made in sanitation, shelter, health and hygiene, livelihoods and other key issues. It also provides basic information on expenditures.

Available in English and French

Out of harm's way Injecting drug users and harm reduction IFRC, 2010

This IFRC advocacy report depicts the stark reality of being an injecting drug user living with HIV. It examines the prevention, treatment, care and support needs of this at-risk population and what the IFRC does in response to the problem. It also offers an advocacy tool to remind governments and National Societies of the obligation to respect the human rights of injecting drug users at risk of, or living with, HIV.

Available in English and French

ICRC offers new RFL materials

The Movement's Restoring Family Links (RFL) activities are highlighted in a new poster available in six



ICRC Institutional Strategy 2011–2014 ICRC, 2010

The *ICRC strategy 2011–2014: achieving significant results for people in need* will guide the ICRC's work over the next four years. It identifies broad strategic orientations related to reinforcing the ICRC's scope of action; strengthening its contextualized, multidisciplinary response; shaping the debate on legal and policy issues related to its mission; and optimizing its performance.

Available in English and French

ICRC materials are available from the International Committee of the Red Cross, 19 avenue de la Paix, CH-1202 Geneva, Switzerland. www.icrc.org

IFRC materials are available from the International Federation of Red Cross and Red Crescent Societies, P.O. Box 372, CH-1211 Geneva 19, Switzerland. www.ifrc.org

MEDIA

North-west Pakistan: flood-affected farmers rush to plant before winter ICRC, 2010

As winter approaches in Khyber Pakhtunkhwa province and the Federally Administrated Tribal Areas, farmers are in a race against time to plough fields and sow seed. The mighty Swat River swept away entire swathes of agricultural land. Those farmers lucky enough to have lost only their crops and who still have a plot of land to work, fear that the soil has been irreparably damaged. The ICRC and the Pakistan Red Crescent Society support 30,000 families all over the region, providing seed, fertilizer and agricultural implements.

Running time: 2:30 min. English

China: summer camp for a common cause ICRC, 2010

In an atypical summer camp experience, students from mainland China, Hong Kong and Macau explored what life is like for those affected by armed conflict. In August 2010, the Red Cross Society

of China organized a week-long Red Cross Youth Summer Camp in Nanjing for high school and college students. The camp programme included an interactive Exploring Humanitarian Law day, the first of its kind in China. Running time: 5:30 min. Available in Chinese and English

Giovanni's story: Haitian deaf community builds shelter IFRC, 2010

As one Haitian Red Cross Society volunteer observes in this short, joyful video, deaf and mute people work well together because they don't waste any time talking. After all, if they want to talk, they'd have to stop working and use sign language. It's just one of the small touches of inspiration that adorn this story of a project in Port-au-Prince, where the Red Cross is building transitional shelters for 350 vulnerable families. One of the construction teams is made up of members of Port-au-Prince's deaf community, which will be among the first to move into the new village.

Available at: www.youtube.com/ifrc

How Does Law Protect in War? ICRC, 2011

The ICRC has expanded and updated its core reference book on contemporary practice in International Humanitarian Law (IHL). This three-part work demonstrates the ongoing relevance of IHL in contemporary practice and its ability to provide answers to humanitarian problems in armed conflicts. It is designed to support practice-related teaching of IHL in universities worldwide. Available in English (third edition) and French (first edition)

languages. But if Arabic, Chinese, English, French, Russian or Spanish isn't understood by the people you need to reach, an electronic version of the poster can be custom ordered in other languages, with different logos or photos. Orders can be placed via shop@icrc.org. Please mention the reference number 4038 and specify the language, as well as preference for electronic or print. In addition, a new version of the RFL newsletter and a French-language version of the *RFL Manual* is also available on the ICRC web site.