Seeking peace of mind
Coping with the psychological and mental health impacts of crisis

Caring for the caregivers
Getting front-line volunteers the emotional support they need

The ‘backbone’ and the ‘brains’
Time for a radical rethink of volunteering

No signal
In the age of hyper-connectivity, what future for family tracing?
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.

**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.

**The International Federation of Red Cross and Red Crescent Societies (IFRC)** is the world’s largest volunteer-based humanitarian network, reaching 150 million people each year through its 190 member National Societies. Together, the IFRC acts before, during and after disasters and health emergencies to meet the needs and improve the lives of vulnerable people. It does so with impartiality as to nationality, race, gender, religious beliefs, class and political opinions. Guided by Strategy 2020 — a collective plan of action to tackle the major humanitarian and development challenges of this decade — the IFRC is committed to ‘saving lives and changing minds’.

**National Red Cross and Red Crescent Societies** embody the work and principles of the International Red Cross and Red Crescent Movement in more than 190 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.**
In rural Kenya, volunteers of the Kenya Red Cross Society’s Tharaka Nithi branch are using digital technology to transform what it means to be a volunteer — engaging a cadre of digital do-gooders to join forces to help tackle everything from car accidents to cholera outbreaks (see page 20).

Meanwhile, a wide range of social media platforms, apps and data-analysis software is providing new tools to help people around the world relocate lost loved ones — even while raising serious concerns about the protection of data of vulnerable people (see page 26).

And just as social technology has ushered in what some call ‘the age of transparency’, providing a voice to victims of abuse and bringing important injustices to light, it has also served to erode trust in once-respected institutions, raising serious challenges for nearly all sectors of society.

Good or bad, technology is changing our world, offering new opportunities and posing new risks for all aspects of Red Cross Red Crescent operations, advocacy and communications.

This magazine is not immune to these radical changes. Created just more than 33 years ago, Red Cross Red Crescent magazine was given the mandate by the International Red Cross and Red Crescent Movement’s Council of Delegates to foster a sense of unity among its many diverse delegations and National Societies while also sharing a unique Movement perspective to the wider world.

Today, the need for unity and Movement cohesion is as great as ever. But the world in which we express that cohesion is very different than three decades ago. And so in the coming months, you will witness a significant transformation of Red Cross Red Crescent magazine as it dives more fully into the digital media universe.

While we will continue having print editions, we will send out fewer copies, targeting markets where print editions are most relevant. This will save money and allow us to invest more in content production and digital distribution. In short, we’ll be producing more stories that are easier and more fun to view and share, and that will be seen by far more people.

Our focus will remain on serving our internal audience of National Society leaders, management and volunteers, as well as the extended family of delegations of the ICRC and the IFRC. But we will multiply our message by partnering with you, our readers, to spread our stories strategically to important audiences and markets.

The editorial board that oversees this magazine based these changes on concrete evidence about magazine performance provided by an independent research firm that surveyed readership and analysed the magazine’s potential in the digital realm.

The company interviewed 76 people, mainly staff and volunteers of National Red Cross Red Crescent Societies and received feedback from 48 National Society branches or chapters. They also conducted an online readership survey, among other things.

In short, there was good news and bad news. The good news is that you like the content: 80 per cent of respondents gave highly positive responses about the quality of the stories, photographs and illustrations. In addition to helping people feel connected to the larger Movement, the magazine is used for updating, learning, sharing and inspiring new initiatives.

The bad news is that we are not doing a good enough job sharing our stories. Part of the reason, researchers found, has been a lack of clarity about our editorial agenda and publication schedule, along with a lack of tools to help National Societies share our stories in their markets.

Fortunately, many of these things are fairly simple to fix. In addition to expanding our digital offerings, from now on we will provide National Societies and delegations with all magazine content in formats that are easy to repurpose and share. We will be more inclusive in gathering content and more informative about our editorial agenda so readers can integrate our stories into their own agendas and campaigns.

As the stories from rural Kenya and on Restoring Family Links show, people all over the world (rural and urban) are deeply engaged in digital conversation. But, even in this age of hyper-connectedness, people can fall through the cracks. That’s why our research is not over. We hope that you will tell us more about who you are and what you want from this magazine. And we hope we can count on you to help us through this transformation and bring our stories to even more eyes, hearts and minds.

By Malcolm Lucard
Editor, Red Cross Red Crescent magazine
In brief...

One outbreak quelled, another begins
Only day after an outbreak of Ebola virus disease ended in one part of the Democratic Republic of the Congo in July, another emerged — this time in an area where conflict makes the response more challenging. A 19-person team from the Red Cross of the Democratic Republic of the Congo, the ICRC and the IFRC quickly responded. The team included a safe-and-dignified-burials unit, water and sanitation experts and a community engagement specialist. Some on the team were deployed directly from the earlier Ebola response in Equateur Province. There, the Red Cross played a key role in successful combatting the disease by conducting safe and dignified burials, monitoring the disease’s spread and educating people about prevention.

Multi-party, ‘internal’ conflicts on the rise
The number of non-international armed conflicts has more than doubled since the year 2000, according to new findings from the ICRC. At the same time, an increasing number of decentralized groups on the battlefield makes talking to armed groups about respecting international humanitarian law far more difficult. Nonetheless, a new study by the ICRC, The Roots of Restraint in War (see page 29), provides evidence that talking to armed groups can produce positive results in terms of protection of civilians. “Formal training in international humanitarian law continues to make a real difference on the battlefield,” says long-time humanitarian Fiona Terry, one of the report’s authors. “It also points to the broad range of external influences on arms carriers, and shows that informal norms can also have a significant effect on behaviour in conflict.”

Fighting reaches port critical to aid in Yemen
As fighting reached the Yemeni city of Hodeida, a seaport that has been a vital entry point for relief aid, humanitarian organizations warned that any reduction in access to the port would worsen an already catastrophic humanitarian situation across the country. “Real people, real families will suffer if no food is getting in and we are concerned that ongoing military operations continue to hamper the arrival of essential goods,” said Robert Mardini, the regional director for the Near and Middle East for the ICRC. The ICRC had pre-positioned critical food, medical, and water and sanitation supplies, but fighting has made access to people most affected nearly impossible. This latest challenge comes after the ICRC was forced to pull 71 staff members out of Yemen due to a series of incidents and threats against staff. The increase in threats followed the killing of a staff member by gunmen only two months earlier.

As migrants finally touch land, the Red Cross acts
Three ships carrying more than 600 migrants rescued in the Mediterranean Sea were finally allowed to dock on European shores at Valencia, Spain, in June after being denied entry at several ports. The migrants were met by emergency response teams from the Spanish Red Cross, which provided medical assistance and psychological support, and distributed basic items such as blankets, clothes and hygiene kits. The ship’s passengers spent almost a week at sea after being rescued from inflatable boats off the coast of Libya.

When eating is a luxury
Along the long road to the village of Mingui, in Mauritania, the livestock pastures have vanished and no water is to be seen. Animal carcasses litter the roadside, bearing witness to the drought that has hit this nation in north-west Africa. In the tent of one villager, Zeina Mint Mahmoud, the children go to bed hungry. “It hurts my heart to see my children suffering under my own eyes,” she says. “Our animals could not find sufficient food or water so they were progressively weaker and sicker... I was obliged to sell them before they all died.” As similar scenarios unfold across the country, the IFRC launched a US$ 1.6 million appeal to support the Mauritanian Red Crescent in providing assistance to 17,400 people. Meanwhile, in the village of Lekra, eating has become a luxury, says village chief Ahmed Ould Hadiya Ould Bilal: “People wake up hungry, spend the day hungry and go to bed hungry.”

Humanitarian index

| Percentage of states in conflict that have more than ten parties fighting on their territory.* | 25 |
| Percentage of conflicts that have between three and nine opposing forces.* | 44 |
| Number of years that Christel Ehrich (born Pelekies) and her brother Gunter were separated after the Second World War sent them in different directions. They were reunited with the help of German Red Cross family tracing support (see story on page 28).** | 72 |
| Number of separate armed groups registered in the city of Misrata, Libya.* | 236 |
| Number of active cases now being handled by Trace the Face, an online family tracing service created by European National Societies and the ICRC.*** | 3,500 |
| Number of people across Burkina Faso, Chad, Mali, Mauritania, Niger and Senegal struggling to get enough food due to an ongoing drought.*** | 5.8 million |

Sources: *The Roots of Restraint in War, report by ICRC; **ICRC Restoring Family Links Service; ***IFRC.
Cover story

Seeking peace of mind
Psychological first aid needs to be at the forefront of humanitarian response. But how do we address the challenge of bringing it to the front lines of today’s conflicts and crises? Meanwhile, people affected by conflict, the disappearance of loved ones, detention and social isolation caused by conflict and natural disasters tell their stories.

Between hope and desperation
Families of people who have gone missing bear a singular psychological and emotional burden.

Who cares for the caregivers?
“If you can’t carry yourself, you can’t carry others.” That’s how one caregiver helping tuberculosis patients describes the importance of psychological and emotional well-being of volunteers. Photographer and documentary producer Alexia Webster checks in with volunteers helping some of South Africa’s sickest and poorest patients.

Focus

A city of misery
Bangladeshi photographer Munem Wasif shows how life in camps outside Cox’s Bazar — where some 680,000 people are struggling to survive — compounds the psychological stresses faced by families who fled violence in Myanmar.

Volunteering

The backbone and the brains
Volunteers are often called the ‘heart’ or the ‘backbone’ of the Movement because they have passion and they do most of the heavy lifting. But as technology reshapes society, is it time to reorient the metaphor?

Rural revolution
Even in remote areas, the digital revolution is reshaping what it means to be a volunteer.

Who’s backing up the front-line volunteers?
The Volunteering in Conflict and Emergencies Initiative explores the complexities faced by local volunteers who face the same tragedies as the communities they serve.

Humanitarian leadership
‘Medicine for the heart’
New IFRC President Francesco Rocca takes us on a tour of an ancient city being rebuilt, guides us through the ongoing reform of the Italian Red Cross and outlines the big issues he plans to tackle at the global level.

Restoring Family Links
Mixed signals
In the age of hyper-connectivity, what is the future for the Movement’s Restoring Family Links services?

Resources
The story of Zaza, a 14-year-old child soldier, addressing internal displacement and animated campaigns about diphtheria and climate change.

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Design
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Layout
New Internationalist, Oxford, UK

Printed
on chlorine-free paper by Artgraphic Cavin SA, Switzerland

We gratefully acknowledge the assistance of researchers and support staff of the ICRC, the IFRC and National Societies.
The magazine is published two times a year in Arabic, English, French and Spanish and is available in 190 countries, with a circulation of more than 45,000.
The opinions expressed are those of the authors and not necessarily of the International Red Cross and Red Crescent Movement.
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On the cover: Ayo Narasista, 69, whose son was abducted during the 20-year conflict in northern Uganda between the Lord’s Resistance Army and the government of Uganda. She says psychosocial support sessions in her village have helped her to cope with the lack of answers about the fate of her son. Photo: Jjumba Martin/ICRC
Photos from top to bottom: Mari Mortvedt/ICRC; Alexia Webster/IFRC; Munem Wasif/VD/ICRC; Kelvin Ngenga/Kenya Red Cross Society; Maria Novella/IFRC
Seeking peace of mind

“As soon as my eyes closed, I woke up immediately, always worried. I tried to cry but couldn’t, the tears just wouldn’t come.”

Hana El-Ali, aged 30, who fled extreme hunger and fighting in Syria and found refuge at a camp in Lebanon

Photo: Marwan Tahtah/ICRC
Helping people cope with the psychological and mental health impacts of crisis.

Charity fled as soon as she heard the gunshots. “I could feel the bullets hitting my flesh,” she says, recalling the day last year when armed fighters stormed into her village. “I could see people falling when I turned around. One of them was my husband. I saw him fall, but there was nothing I could do.”

The 36-year-old mother of seven found safety in a camp set up by the United Nations in the city of Wau, South Sudan. But she was haunted by that violent evening. “For a long time, I could hear the sound of bullets in my mind,” she says. “Bam, bam, bam. All the time. It felt like a nightmare and I heard the sounds, even if there were no gunshots around.”

While Charity still suffers great sadness, her pain and her symptoms have eased somewhat due to counselling sessions managed by a local organization called the Women Development Group (WDG). Supported by the ICRC, the organization’s sessions are a mix of group therapy, activities that help the women generate income and lots of love from Sidonia Paul, a WDG field officer trained in providing group support for victims of violence.

“This support is different from giving someone food,” she says. “A person can eat the food, but the problem will still be there. If you can help someone with their mind, they can learn how to provide food for themselves and their family.”

These ongoing counselling sessions are just one example of how humanitarian organizations are integrating mental health and psychosocial support into their humanitarian responses.

While such support has existed for many years, its provision during emergencies has been relatively ad hoc. Now, some form of mental health or psychosocial support is present in nearly every major emergency, but most experts agree it needs to be expanded and more effectively integrated into crisis response.

“After disasters, people know that we have to provide food, blankets and places for people to sleep,” says Eliza Cheung, a clinical psychologist and an expert in psychological first aid. “But if we do not also take care of their mental health and psychosocial issues, we can never really address their full needs.

“We have seen examples of providing food for survivors but they don’t have an appetite,” says Cheung, an adviser for the IFRC’s Psychosocial Support Centre (PSC) in Denmark and a psychological first responder for the Hong Kong Red Cross. “We have provided shelter but they cannot go to sleep because of their haunted memories or flashbacks.”

Loss of sleep, paralysing fear, chronic anxiety. These are just some of the symptoms that can keep people from getting back to normal life. Fadimata Touré, from the Timbuktu region in Mali, was working in her small shop in 2012 when men from an armed group threatened to arrest her for not dressing according to their version of sharia law.

“Armed men got out of the vehicle and ordered me to go with them,” she recalls. “I was so frightened I began to vomit.”

Local elders eventually managed to get Touré released but a gripping fear lingered. “I had nightmares all the time and was unable to sleep properly. I couldn’t stop thinking about what had happened. I lost my appetite and was on edge all the time. I found it difficult to leave the house; it was as if my life had been put on hold.”

Then she heard that the ICRC was helping people with psychological problems caused by the conflict. So she made an appointment.

“I felt as if she had just lifted a heavy burden from my shoulders,” she says, adding that after several sessions she regained the confidence to restart her business. “I started to go out again and meet people. I no longer had trouble sleeping and the incident wasn’t constantly on my mind as it had been before.”

Here and now
Mental health and psychological support don’t erase suffering. But even simple techniques such as breathing exercises can help people cope with distress reactions such as nightmares, anxiety or headaches. “They may still have nightmares, but they know what to do to go back to sleep more easily,” says Cheung.
Experts emphasize that in the aftermath of crisis, it’s not about offering psychological treatment or psychotherapy, in which people delve into the root causes of particular disorders. This kind of treatment would only take place at a later stage, if needed, once the person’s immediate traumatic reaction has subsided or stabilized.

“Getting them to recall the gruesome details of a traumatic experience can cause a secondary trauma,” notes Cheung. “So with psychological first aid we do not dig into these stories unless the person feels the need to do so. In that case, we provide proactive listening and emotional support. If the person does not want to talk, our approach would be to focus on their needs here and now.”

“It’s important to keep in mind, she says, that even months after a disaster or crisis, many people are still undergoing traumatic upheaval. After the April 2015 earthquake in Nepal, for example, people had to set up temporary housing very close to their destroyed homes.

“People would pass by the rubble of their old houses every day and would point out, ‘This is the place where I found my dead child. Passing by and seeing it every day makes me really anxious. It takes me back to the exact time the earthquake struck,’ says Cheung.

Scaling up
But how to bring meaningful and effective psychological care, appropriate to the needs, to large numbers of people in places where health systems are inadequate, non-existent or highly disrupted by crisis?

Consider the conflict in Syria. Before the war broke out, the country had a functioning health system that included psychologists and psychiatrists in both public health services and private practice. Now the health system is largely destroyed and most health professionals have fled the country.

For millions of Syrians living under siege, displaced or living in other countries, finding help is extremely difficult. Health systems in neighbouring countries, stretched thin before the conflict, are not able to meet the increased demand. Humanitarian organizations and local non-governmental organizations (NGOs) are working desperately to fill the gaps.

“We do not have enough staff to address these problems, so many people are not being helped,” says Martha Bird, an adviser at the IFRC’s PSC in Copenhagen, who is coordinating research on a variety of scalable psychological interventions proposed by the World Health Organization.

“What these interventions generally try to do is change who — which professionals and which people — can offer help. So instead of using highly trained psychologists, Syrian refugees who are not suffering from severe mental health problems can be trained to offer these services. It’s a peer-to-peer model.”

Through randomized control trials with Syrian refugees in eight countries (Egypt, Germany, Jordan, Lebanon, the Netherlands, Sweden, Switzerland and Turkey), the research is hoping to establish whether these interventions work. If they do, the idea would be to bring them to a far wider group.

“Hopefully, it will allow us to address the mental health problems of a lot of people at lower costs and with more people able to do it,” says Bird. “What we have to be very careful about is implementing the intervention with the right beneficiaries. So the intervention precludes, for

Nadezhda Butenko, 81, remembers when people in her neighbourhood used to gather in her yard — for holidays or for no reason — and drink tea, laugh and gossip. “Now it’s every man for himself,” says Butenko, who lives in Mayorsk, a village in the Donetsk region of Ukraine, with her husband Vladimir. Already suffering great hardship from the war, elderly people such as Butenko are especially cut off from comfort.

“Before the conflict, everything was fine. I felt great. But due to my shattered nerves, I lost my good health. It all happened when the shooting started.

“Everything has changed with the conflict — our mood, our health, our attitude to life. We used to live in peace. Now we are isolated and cannot go anywhere. I am the kind of person who is not afraid of anything, but now my nerves can’t stand the strain.

“We miss our relatives so much, but we cannot just go and visit them. We need to go through two checkpoints on both sides of the front line. Recently, we haven’t been able to even call them.”

‘Life is boring without it!’

Butenko says regular visits from Ukrainian Red Cross Society volunteers ease the social isolation and sorrows of elderly people, many of whom have limited mobility due to health problems. “We always get so much tenderness, affection and attention” from the volunteers, she says. “We talk about different topics, we sometimes gossip… life is boring without it!”

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instance, people who are suicidal. They would need much more care.”

Supervision is also a key element. A typical scenario might involve four Syrian asylum seekers working in an NGO with a fifth overseer who is a Syrian psychologist and a sixth who is a psychologist from the host country. “They would monitor whether the helpers are themselves well and implementing things correctly,” says Bird.

National Societies are also scaling up. Under a cooperation agreement with UNICEF, the Turkish Red Crescent Society is training young Turkish and Syrian volunteers to work with children in dozens of ‘child- and youth-friendly spaces’ — established in numerous camps and urban centres — where children can freely and safely express themselves.

According to two psychologists who studied the impact of these efforts, the child-friendly spaces allow young people, who have experienced great trauma and continue to live very restricted lives, to be children again.

“Some children have been living in camps for over four years, behind fences, without contact from anyone outside the camp,” the two psychologists wrote in a 2016 report. Those who live in cities, meanwhile, are in poor, overcrowded accommodation, face daily harassment and a very uncertain future.

While the volunteers cannot address all these problems, the fact that Turkish youth workers can speak with the child refugees (in Arabic or in some cases Kurdish) means that at least the children can be heard. The young Syrian volunteers, meanwhile, enjoy an even closer cultural connection. “As a result, the work turns into a healing process for the children and the young people,” the psychologists reported.

According to the Turkish Red Crescent, about 2,500 volunteers have been trained so far and some 377,000 children have benefited from the child-friendly spaces. Still, the authors conclude that to meet the need, the number of such spaces in camps and urban areas needs to expand dramatically.

**Psychologists to the rescue?**

The authors also recommend that more specialists in psychological counselling and social services be hired. After all, activities and safe spaces, in and of themselves, don’t necessarily address more serious mental health challenges.

Given financial and other constraints, however, scaling up the response may not lie with humanitarian organizations deploying armies of psychologists or volunteers in every emergency. Milena Osorio, coordinator of mental health and psychological support programmes for the ICRC, says one solution

People living through major emergencies or conflict often have to cope with multiple, overlapping traumas. A 30-year-old father of two from Darya, Syria, Mohamed painted furniture for a living when, in 2010, he fell from a roof, breaking two vertebrae and paralysing his legs. When his health declined and the war intensified, he and his family fled to Lebanon, where the challenges of his paralysis, a worsening case of diabetes and the disappearance of his brother in Syria contributed to a deep despondency.

“I would spend the whole day lying down, just staring at the wall. They would be talking but I’d say nothing. My mother would ask me, ‘What is it? Are you ok? Why do you do this to yourself? Talk to me, answer me.’ I kept silent.

“I was so scared and very bored. I had low blood sugar and I couldn’t even sit up. I was lying down the whole day, not talking at all.

“Before the accident, my condition was really good. I had a shop, a car, a house. I was friendly to everyone. Now, I get angry a lot.

“I worry at night. I’m always thinking so I don’t sleep well. I don’t bring up these ideas, they just cross my mind.”

Ironically, another tragic twist of fate finally brought Mohamed some comfort. After slipping in the shower and breaking his thigh, an ICRC doctor helped him manage his diabetes and referred him to an ICRC psychologist. “In two sessions I let everything out and felt much better,” he says.

“After four sessions, I was able to overcome many challenges. Hopefully I will be able to overcome the rest in the near future. I dream of walking as I used to. I would take my kids outside and play with them the whole day.”
Around services that are still very foreign in many cultures.

"There are people all over the world already doing a fantastic job but not with a lot of tools or resources," she says. "We want to give them the tools so they can continue to be doctors, nurses, teachers and volunteers but with more empowerment to address some of the psychological needs people are experiencing."

With proper training, these local workers can identify which problems they can handle and refer those they can’t to specialized professionals. And because they know the local culture and languages, they are more likely to build up awareness and trust around services that are still very foreign in many cultures.

After all, psychological counsellors such as Bakitta walet Bettou, who works at a referral health centre in Kidal, Mali, must often address very sensitive issues.

“Sexual violence remains a taboo subject that people pay little attention to in spite of it being a very real problem,” she says, adding that despite falling victim to many traumas, many local people don’t know about, or have little faith in, psychological counselling.

It could happen to anyone

Another problem is that people don’t understand that what they are experiencing is normal given what they have been through.

A 28-year-old mother living in Switzerland, Ruken Hüseyin (not her real name), often has panic attacks when she leaves her quiet neighbourhood. An ambulance siren or an accelerating car can take her back to the worst hours of her life.

Fortunately, she became aware of services for people who have been tortured or affected by war offered by the Swiss Red Cross. In a group therapy workshop for women, surrounded by recent migrants, asylum seekers or refugees from Eritrea, Sri Lanka and Syria, she felt understood. “For the first time,” she says, “I think I may not be crazy.”

But there is nothing ‘crazy’ about Hüseyin’s reaction. “It could happen to anyone,” says the ICRC’s Osorio. The problem is that in many cultures there is an intense stigma associated with both having psychological weaknesses and seeking treatment.

“It’s one of the few problems where if you look for help, it’s not seen as doing something good,” she points out. “So it’s very challenging, on the one hand, to live with the problem and, on the other hand, to receive help.”

Changing mindsets, therefore, is critical, she says. “If it becomes less difficult to say, ‘I need help and I’m going for it’, then all these people who are suffering in silence may go and get the help they need,” she adds.

One of those people was 30-year-old Hana El-Ali from Halab, Syria. She and her family fled extreme hunger and fighting in Syria and found refuge at a camp in Lebanon. Deeply affected by her experiences, she was in “a terrible psychological condition”, she says. Withdrawn and underweight, she lost her ability to cope and even to laugh.

“I was living among other people but only my body was there. I couldn’t sleep. As soon as my eyes closed, I woke up immediately, always worried. I tried to cry but couldn’t, the tears just wouldn’t come out.”
For some time, fear of judgement from family, friends and neighbours kept her from seeking care. With support from her husband, she found the courage to ask for help.

“At first people were saying, ‘She goes to the psychiatrist, she must be crazy,’” she says. “But I explained that you don’t have to be crazy to go to the doctor.”

What finally convinced them was the change they could see with their own eyes. “I put laughter back into my life, I resumed playing with my children and going out,” she says.

**Helping the helpers**

Emergency workers also need psychological and emotional support. “Most [psychosocial support] interventions or programmes target the general public and we forget the people providing the services — the volunteers,” says Kinan Aldamman, a clinical psychiatrist and former psychosocial coordinator for the Syrian Arab Red Crescent.

“Both volunteers and the people they are helping are part of the same community,” says Aldamman, who is doing a doctoral thesis at Trinity College, Dublin, Ireland, on the psychological needs of volunteers based on his experience in Syria. “So the volunteers are experiencing the same stressful things that the community is facing. Yet the volunteers are asked to be compassionate towards people and provide services with very limited resources.”

After seeing the effects of that stress first hand, Aldamman helped create a peer-support programme along with the ICRC in which Syrian Red Crescent volunteers are trained to offer basic psychosocial support to their colleagues.

Aldamman hopes his studies, supported by the IFRC’s PSC, will help Red Cross and Red Crescent National Societies improve their own volunteer support systems.

“First-aid volunteers provide physical first aid after an attack or an explosion, which they are trained to do, but they also provide psychological first aid, for which they often lack training,” he says, adding that this can cause additional stress on the volunteers.

“They have a strong feeling of responsibility towards the survivors so they sometimes get too deeply involved in their stories, which makes them vulnerable to vicarious trauma or other extreme stresses.”

Slowly, the humanitarian sector is waking up to the great need for mental health and psychosocial support for all people affected by crisis. Avril Patterson, who worked as health coordinator for the ICRC in Syria for four years, says that attention is long overdue.
Between hope and desperation

Families of people who have gone missing bear a singular psychological and emotional burden.

The missing son

The son of 69-year-old Ayo Narasista was abducted during the 20-year conflict in northern Uganda between the Lord’s Resistance Army and the government of Uganda. Thousands of people went missing as a result of the fighting and the fate of many of them remains unknown today.

“My son Okeny Alex was my hope for continuing our family name. Alex was abducted by armed men on the way back from a school competition in Kalongo village. All this happened in 2000 when he was about 13 years old. The whole community turned on me because I had failed to protect my son and could no longer have a daughter-in-law. My husband soon left, leaving me feeling like a failure. I was so depressed and alone. For a long time, I could not sleep.”

Sleeping well

Ayo Narasista now takes part in psychosocial support group sessions offered by the ICRC in her village. “Talking about it with other people like me has helped me to sleep well at night,” she says.
For those whose loved ones have gone missing, the psychological scars can endure for decades. “The families of missing persons tend to alternate between a feeling of hope of finding them, and desperation and hopelessness as the years go by,” says ICRC psychologist Eva Esteban Finck, who helps communities in Bolivia, Ecuador and Peru deal with the disappearance of loved ones during various periods of violence and conflict in those countries.

“That alternation also creates emotional burnout and high desperation,” she says. “There are many emotions; the person may feel shame or sadness or emotional exhaustion. Someone may feel guilty for not having done enough to avoid the disappearance or not doing enough to search.”

Not the only one

It’s been nine years since Ranjinithewi’s husband, brother-in-law and two brothers went missing during the conflict in Sri Lanka. Last year, Ranjinithewi (pictured, third from left) received training to become an ‘accompagnier’ who facilitates group sessions for other relatives of missing people in her community.

“The mental anguish was unbearable. My parents were so affected that I wondered who I could share my feelings with. I didn’t speak to anyone in the village. They wouldn’t understand.

“After I joined the family accompaniment group, I realized I wasn’t the only one suffering. The others in my group have suffered too, some more than I. But they have learnt to cope.

“Some have changed, but others — in spite of talking — are still anxious and worry over the fate of their missing relatives. They feel some peace during the sessions, but their anxieties return when they go home.”

Looking forward, moving on

Ranjinithewi says her mental and emotional heaviness has reduced somewhat due to group family counselling. “The memories never leave but I’m able to cope now and take care of my family. I’m more loving towards my children and I have started to look forward to seeing them finishing school and moving ahead in life.”

’I didn’t want the night to come’

In October 2009, Dilma Pilar’s daughter, Olga, went off to her job in a factory about 40 minutes away from their home in Honduras and she never came home. From that day on, Pilar’s life was turned upside down. The emotional anguish was too much to bear. “Those were difficult times,” she says. “I didn’t want the night to come as I couldn’t sleep for wondering where my daughter could be.”

To learn the result of Dilma Pilar’s years-long search for her daughter, visit www.rcrcmagazine.org
Who cares for the caregivers?

A small group of dedicated volunteers in South Africa show how caring for the caregivers can have a direct impact on the quality of care they give.

RUTH MUFALALI VAN ROOYEN was worried. One of her most dedicated volunteers was distraught. A young girl the volunteer was helping was very sick. “The volunteer was in tears on a daily basis because she was really worried that this child was not going to make it,” says Van Rooyen, the provincial programmes manager for the South African Red Cross Society (pictured above). Based in Port Elizabeth, she coordinates volunteers who care for people infected by multi-drug resistant tuberculosis (MDRTB), HIV and other chronic illnesses.

For the volunteer, who had been visiting the girl every day for more than a year, ensuring she took her medicine and cared for herself, it was like losing a loved one. Fortunately, a few months earlier, Van Rooyen had sought out a volunteer psychologist to offer free counselling sessions for all the caregivers at the Port Elizabeth and Uitenhage branches. “Through sessions with the counsellor and fellow volunteers, she kept going,” says Van Rooyen. “Today, this child is cured.”

Van Rooyen’s decision to seek out support is one example of a growing recognition in humanitarian circles that helping communities get healthy requires healthy caregivers, able to remain calm and compassionate despite the many pressures they face. After all, most volunteers on the front lines of today’s crises usually come from the same community as the people they serve. They are affected by the same worries and challenges. Photographer and documentarian Alexia Webster talked to some of the South African TB caregivers. Here’s what they have to say.

Jeanette Mqaqa, 45, became a caregiver because she likes teaching people how to better care for themselves and move forward in their lives. “When people pass away, it’s sometimes very difficult. It’s like you’re not doing your job. Sometimes I go to the others and say, ‘This person is defaulting [on their medication regime].’ Maybe I think, ‘Hey, this person is a defaulter and I blame myself. Maybe she’s a defaulter because of me. Maybe she doesn’t like me.’

“To deal with the stress, sometimes I go to church. There’s a kid’s club; we educate the children and then I play with them. I sing and talk with the people and the stress is relieved. I have also done a group
Jeanette Mqaqa heads out for her daily visits with people suffering from multi-drug resistant tuberculosis.

Photos: Alexia Webster/IFRC

“I’ve learned I have to carry myself before I can carry others.”

Jeanette Mqaqa, 45, volunteer caregiver with the South African Red Cross Society

Jeanette Mqaqa, 45, says she’s an empathetic person by nature with a long-time interest in psychology and in caring for people.

“There are cases where the client’s condition gets worse and sometimes I cry. Like the cases where a client was a mother, a single mum who’s got kids... and the mum is going to pass away. Who is going to look after the kids and what kind of care are the kids going to get? In those cases I cry a lot... but not in the presence of a client because I don’t want her to lose hope. I have to wear a mask and stay strong for the sake of the client.

“The most interesting thing we learned from counselling was how to cope with stress — like what we can do to assist ourselves before visiting clients. Because we won’t be able to help others if we are not in a good way. You have to know your weaknesses and your strengths. And not to take things personally. Don’t blame yourself for things that are out of your control... You have to just let go.”

Lindeka Nkumanda, 41, says she’s an empathetic person by nature with a long-time interest in psychology and in caring for people.

“My job is very stressful and complex psychologically because if someone is really ill, and has the potential to infect the whole house, the other family members, how do you get that person to take the treatment without actually forcing them? I mean they have this individual right, but at the same time they’re endangering other people’s lives. So those are also some of the factors that the caregivers bring up in the debriefing sessions.

“Through these sessions, I try to find out where everyone is mentally and emotionally and then build a supportive environment. Depending on the major things that come from the debriefing, we work to find solutions. Let’s say they have a problem with a client or a patient who doesn’t want to adhere to treatment. We try to find ways the volunteers can help without forcing them.”

Akhona Williams started working for the South African Red Cross as a volunteer in 2016 after finishing a university degree in psychology. Now a masters student in psychology at Rhodes University, he offers free group and individual counselling sessions to the MDRTB caregivers.

“I’ve learned I have to carry myself before I can carry others.”

Jeanette Mqaqa, 45, volunteer caregiver with the South African Red Cross Society

“Akhona Williams started working for the South African Red Cross as a volunteer in 2016 after finishing a university degree in psychology. Now a masters student in psychology at Rhodes University, he offers free group and individual counselling sessions to the MDRTB caregivers.

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Lindeka Nkumanda, volunteer caregiver with the South African Red Cross Society

© Jeanette Mqaqa heads out for her daily visits with people suffering from multi-drug resistant tuberculosis.

Photos: Alexia Webster/IFRC

“In those cases, I cry a lot... but not in the presence of a client because I don’t want her to lose hope. I have to wear a mask and stay strong for the sake of the client.”

Lindeka Nkumanda, volunteer caregiver with the South African Red Cross Society
A city of misery

Amid the hills and valleys not far from the Bangladeshi city of Cox’s Bazar, a series of sprawling camps now contain a population similar to that of a small city (comparable to Washington DC, USA). Some 680,000 people now live in desperate conditions, inside hastily erected tents and shacks set up after violence in Myanmar forced them across the border into Bangladesh. The physical and emotional suffering these people have endured — most of them women and children — has been enormous. And the nightmare is far from over. Bangladeshi photographer Munem Wasif spoke with three families, asking them to talk about their daily struggles, their lingering grief and their long-term worries.
Terrible memories

In a one-room, makeshift tent, Setara Khatun lives with her 70-year-old maternal aunt Sanapru and her three children. One of her sons, 12-year-old Nejamuddin, went missing while looking for firewood on the outskirts of the camps. Like many women in the camps, Khatun is the sole head of household, her husband having been killed when he went back to their village to collect some belongings.

One of the most traumatic events on their journey came when Khatun and her four children had to wait on an island for 15 days before crossing the river to Bangladesh on a small, overcrowded boat.

“I cried a lot, I was wailing. There were a lot of people there. You could only see heads and more heads. Some were crossing, some were staying. Some were cooking and eating, some were starving.

“My children were in a lot of pain. I was in a lot of pain. Where is rice? Where is water? Some people gave us rice and water, a few snacks. I gave those to the children and drank water myself.

“We were scared. It was raining, there was a storm and there was wind blowing. The children were scared, they thought the boat would sink.

“The memories of this pain make me restless. Sometimes I think that maybe it would have been better to have been shot dead.”

The house will break

“In Burma [Myanmar] we had our own house, we built it very nicely,” says Khatun. “My husband was a day laborer. Sometimes he sold vegetables. We had a lot of options for income.”

Now Khatun says her family is entirely dependent on aid agencies for food and they never have enough. On top of that, she worries her flimsy tent won’t withstand the monsoon storms. “There is no man at home so I don’t know how I will rebuild. I fall asleep thinking about these things.”

‘I forget my worries’

In the community centre in the Tasnimarkhola Camp, Khatun finds some comfort at the ‘women-friendly space’ offered by the Danish Red Cross in coordination with the IFRC and the Bangladesh Red Crescent Society. The centre offers a place for women to share their problems, socialize and temporarily forget their worries while engaging in small, money-making projects.

“There are a lot of women there so I feel at peace. Some have lost their children, some husbands, some parents. But when we go [to the centre] we can laugh. Here, I forget my worries. When I go back home I will hear that there is no firewood, no kerosene, no vegetables, and the children will cry for a shirt. These things make me restless again.”

Coming to the centre has inspired Khatun to become a volunteer herself. “I go to people’s houses and teach them how to take care of children, how to stay clean so that no one falls ill, how to take care of sick people,” she says.
‘When will our suffering end?’

With her one-and-half-year-old daughter in her arms and a five-year-old stepson at her side, Hasina Begum walked five days to reach Bangladesh. They left the same day her husband, Abdul Jalil, disappeared. It was the day before Eid ul-Adha, which began in September 2017, and Jalil had gone to the market looking for work. Hearing that her husband had been killed, the 25-year-old widow had only enough time to pack a change of clothes for her children before heading for the border.

“It took us five days to come here, and we had a lot of trials on the way, in the middle of a storm, with little children among us,” Begum said, her fragile voice trembling as she mustered the strength to tell her story. “No rice to eat, no water to drink, no chance to sleep. We had to lie on the road.

‘I can’t tell anyone’

For Begum, every day brings worries: about the vulnerability of her home to storms, about how to find clean water and about her stepson who has to venture out to find firewood at the outskirts of the camp, where children have reportedly been hurt or have disappeared.

“I am a mother, how could I let him go there? But when people we know from around go to get firewood, then I would let him go. Because there was no firewood left I told him: ‘If you can go and bring some, then go.’

“But I can’t look at the children, my heart aches. I can’t tell anyone how much it hurts.”
When Nur Mohammad’s entire family of 12 (wife, children, grandchildren) fled violence in the northern areas of Myanmar’s Rakhine State, they left behind a two-storey home, a small plantation of 100 betel nut trees and bamboo bushes, as well as numerous cattle, sheep and chickens.

But this is not the family’s greatest sadness. Two of the couple’s daughters — 22-year-old Zaka Ullah and 18-year-old Setara Bibi — are missing and presumed dead. Their eldest son, Rashidullah, was shot in the abdomen while fleeing and Mohammad himself injured his leg. “After we reached here I saw my leg was swollen, there was pus coming out,” he says. “Sometimes blood comes out too.”

Building a new home at the camp took almost four days. “All the children had to dig,” he says. “They dug and made the ground level. My wife, my daughters all worked. I couldn’t do anything because of my leg. My son was shot in his waist, so he couldn’t do anything either.”

“In the front room, I live with my wife and son. In the back room, my daughters live. Our feet touch each other’s heads.”

Now he worries that his flimsy home will not withstand the monsoon season. “These things worry me. But what can I do other than worry?”

His worries intensified recently after hearing news that people in the camps might be sent back to Myanmar. “How did we fall into such a terrible situation? These thoughts trouble me.”

Finding some peace
Nur Mohammad does physical exercise with other men at a community centre run by the Danish Red Cross in coordination with the IFRC and the Bangladesh Red Crescent Society. Here, men are able to discuss their worries and daily challenges with volunteers and staff trained in psychosocial support.

“They try to motivate us, to have us do things. We make nets, mats and a couple of other things,” Mohammad says. “They ask us about our problems. They ask us about how we live, how we are and they can work for us. They ask us about our sufferings — that’s why it feels good.

“When we go to the group, we talk and hug each other and feel good for a while. Otherwise it just feels restless. I go to the group, because it makes me feel at peace.”

Helping people feel better is closely linked to alleviating some of the causes of stress and anguish — be they concerns about healthcare, shelter, education or safety. Counselling sessions, therefore, can provide important links to assistance or services.

In times of crisis, the greatest anxiety is often caused when people lose touch with loved ones. Here in the camps, Bangladesh Red Crescent volunteers (with support from the ICRC) facilitate phone calls for people arriving from Rakhine State and exchange short written messages between displaced people and relatives in Myanmar. Those who don’t know the fate or whereabouts of family members can also ask the Red Cross Red Crescent Movement to search for missing loved ones.

‘What can I do other than worry?’
Wiem Chamsi, 24, head of dissemination for the Tunisian Red Crescent in the seaside city of Sousse takes a selfie with Kelvin Njenga, volunteer chairperson of the Kenya Red Cross Society’s rural Tharaka Nithi branch. Photo: Kelvin Njenga/Kenya Red Cross Society

The backbone and the brains

Volunteers are often called the ‘heart’ or the ‘backbone’ of the Movement because they have passion and they do most of the heavy lifting. Is it time to rethink these metaphors?

Wiem Chamsi, 24, has no shortage of motivation. A masters-degree student in management, she is head of dissemination at the Tunisian Red Crescent branch in the northern seaside city of Sousse.

But that’s not all. She is a trainer for Junior Chamber International, a solar-energy ambassador, a founder of Youth for Change, a club that deals with sustainable development, and a project manager for Enactus International, an organization that promotes social change through entrepreneurship and innovation among young people.

“The Red Crescent spirit is: you are passionate about the things you are doing, coming with ideas and enthusiasm to put things into action,” Chamsi says.

But people need to feel enabled to put their passion and ideas into action, she adds. The digital revolution has given many people a sense of having a voice, a feeling of empowerment. Online tools allow people to organize, start businesses, raise...
funds or get involved in numerous social issues much more easily, often without traditional bureaucracies or structures.

“So if we have volunteers lifting boxes... at some point that volunteer will get fed up if it’s not more than that,” she says. “That volunteer should be part of the decision-making process, to identify problems and try to propose solutions and exchange ideas.”

Matt Baillie Smith refers to this as ‘volunteer agency’ — the ability to take initiative or at least play a role in shaping the course of action — and it cuts across all the big trends affecting volunteering today.

“People always say that volunteers are ‘the backbone of the Movement’, but I’m always surprised they are not also referred to as ‘the head’,” says Baillie Smith, a professor of international development at Northumbria University in the United Kingdom, who has co-authored several key studies on volunteering for the IFRC and the Swedish Red Cross in recent years.

“For me, this is the next big battleground. How do we move from volunteers as an inexpensive form of service delivery to active participation shaping the humanitarian and development agenda?”

In any case, he says, volunteers are leading, even if they are not always recognized for it. That leadership takes many forms. Carlos Rodrigo Ballesteros manages a local Red Cross branch in Cali, Colombia and is helping to create new models of community volunteering in order to engage young people in violence prevention (see his story right).

‘Informal’ volunteers

“We are not focusing on telling young people, ‘Become a Red Cross volunteer so you can do this or that’. They build their own group, put their own names on it, build their identity and start working,” says Ballesteros. “Our job is to support them.”

This new type of volunteering is developing at community level and not through formal institutions, he says. “This is something we as a Movement have to move towards... working with the community and building a base for future volunteers,” he says.

“In Colombia, if you want to get an education, you have to work at the same time because it’s so expensive,” he says. “So we need a totally different model. The Red Cross has to go where people are — in schools, neighbourhoods and workplaces. The challenge is to build new models of voluntarism that fit these new dynamics.”

This is just one example of how volunteers are already leading in a changing world. The question is whether the rest of us will follow. According to Baillie Smith, there are both ethical and practical reasons to do so.

“The ethical reason is that, increasingly, volunteers are used to legitimize international aid activity on the grounds that they constitute local ownership of that activity — they become part of the aid sector’s local ownership agenda,” he notes. “But that only works if we are actually listening to what they have to say and consider what they have to offer.

“The pragmatic reason is that they do in fact have first-hand knowledge of what’s going on in their communities.”
The digital volunteering revolution is not only unfolding in high-tech, urban centres. In the remote Kenyan county of Tharaka Nithi, Kelvin Njenga is helping to transform the Kenya Red Cross Society’s local branch into a test bed for digital innovation and revolutionizing what it means to be a Red Cross volunteer. A freelance graphic designer, Njenga was the brains behind the ‘I-Volunteer Crew’, who use social media to report emergencies and share information on important campaigns and issues.

“In Tharaka Nithi, there is a cholera outbreak and Kenya Red Cross volunteers are taking care of people and doing door-to-door campaigns. But even though we have these outbreaks every year, most people [who aren’t directly affected] don’t know about them. Also, when we go to the villages to inform the people, some of them are not around.

“But we know that a lot of people are online. When you look at issues that people are really interested in, like politics, you see they are active in online forums. Just because it’s a rural area, that doesn’t mean people cannot access the internet. So if we create online, digital campaigns, it will be more visible, cheaper and more efficient.

“One of the major challenges we face is lack of resources. Our Red Cross branch does not have a car. So if we go to the villages, we have to use our own means and it’s quite expensive for youth like me who are not employed. But if it’s done digitally, we create a message and ask people to help create awareness by sharing.

“With I-Volunteer Crew, if people see an accident, they can just share it on social media with someone like the Red Cross who can respond. This is great but it is also one of the challenges we face. People might start assuming that once they share it on social media, someone else will come and act. People share and then think, ‘That is enough.’

“But still we need people at the scene; we still need boots on the ground. So when someone posts something on I-Volunteer, I ask them, ‘Where are you? Are you in a position to respond?’ Another problem is that even if people know some first aid, they often haven’t practised it much. So they don’t have the confidence to act. This is why we have to back this up with regular training and demos to boost people’s confidence. We also honour and encourage those who have intervened.”

Kenya Red Cross I-Volunteers send a digital call for help by posting photos on social media when they see an accident or a crisis unfold. Photos like the one above also help encourage people to help. Below, Kelvin Njenga snaps a group selfie during planning for a peace walk to reduce election-related tensions. Photos: Kelvin Njenga/Kenya Red Cross Society
"I am also vulnerable… Wearing an emblem is not a bulletproof vest."

"I am always hearing this: I’m helping, but who helps me?”

These two statements speak volumes about what it’s like to be on the front lines of crisis in the 21st century. Both quotes — from Red Cross and Red Crescent volunteers in different countries — were heard during listening sessions for a global study called the Volunteering in Conflict and Emergencies (ViCE) Initiative, conducted by the Swedish Red Cross and Northumbria University in the United Kingdom.

The first quote, from a female volunteer, reflects the harsh reality that volunteers can be hurt by forces outside their control: they can be targeted or caught in the crossfire between combatants. Or they can be injured or killed by accident or due to forces of nature.

The second quote, from a male volunteer in a different country, reflects another sad truth: that volunteers facing these dangers do not get as much protection and support as they should.

The ViCE study is an effort to understand these realities and the complex dynamics volunteers face while working in emergencies. A three-year collaborative project, the ViCE project centred around listening studies facilitated by National Societies in six countries: Afghanistan; Honduras; Myanmar; South Sudan; Sudan and Ukraine.

While most global research on volunteering has focused on volunteers in relatively affluent countries helping people more needy, the ViCE Initiative explores the complexities faced by local volunteers who themselves are affected by the same tragedies befalling the communities they serve.

“The majority of the volunteers [in the ViCE initiative] cannot withdraw if things get complicated or dangerous,” says Stefan Agerhem, who leads the ViCE survey for the Swedish Red Cross. “They have to stay. So the question is: how can we help them remain in their community, work in a safe way and still carry out their mission?”

What kind of support and protection do volunteers need? Solutions range from ensuring adequate training to helping them avoid potential hazards, accessing insurance in cases where the volunteer is injured or killed to psychosocial support to help them deal with the trauma and stresses of their work, among other things.

Who’s backing up the front-line volunteers?

“The majority of the volunteers… cannot withdraw if things get complicated or dangerous”

Stefan Agerhem, who leads the ViCE Initiative for the Swedish Red Cross.
‘Medicine for the heart’

Newly elected IFRC President Francesco Rocca takes us on a tour through an ancient city being rebuilt, the reform of the Italian Red Cross and the big issues he plans to tackle at the global level.

N THE ANCIENT ITALIAN CITY of L’Aquila, the whine of power saws, the rat-tat-tat of pneumatic drills and the roar of heavy machinery come from all directions, reverberating through the mostly empty stone alleyways, made even narrower by scaffolding that shrouds nearly every building in the city’s centre.

The president of the L’Aquila branch of the Italian Red Cross, Teresa Marinelli, gestures across a public square, mostly vacant except for a few people and flocks of pigeons. “This plaza is where everyone would meet,” she says. “Before the earthquake, at this time of day, this would be full of people.”

The restaurants, windows boarded or shrouded, are empty except for workers in construction helmets. Above, a forest of construction cranes.

Along with a group of local volunteers and staff, Marinelli is joined by Francesco Rocca, the president of the Italian Red Cross Society and the newly elected president of the IFRC.

For Rocca, it’s an emotional day. Around every corner are reminders of the day — 6 April 2009 — when an earthquake destroyed much of the city’s centre and claimed 300 lives. “The streets where we are walking now were full of rubble, many buildings had collapsed,” he recalls.
Because many of the buildings were built during the Middle Ages, the reconstruction takes time. But the progress is encouraging, he says. “Looking at how many areas are under reconstruction makes me feel optimistic. This really is medicine for the heart.”

The 2009 earthquake was a formative experience for Rocca, who had began his job as Italian Red Cross president only four months earlier. He went immediately to the town and lived in a tent for the first months along with some 12,000 volunteers who came from all over Italy.

Rocca says he was deeply inspired by the depth of the volunteers’ commitment. “This is something you cannot forget, something very moving, because they were also affected. Some of them didn’t know what had happened to their own relatives. But at the same time they were so responsible.”

The new IFRC president returned on this day to sign a memorandum of understanding between the Italian Red Cross, city officials and the University of L’Aquila to establish an international training centre for civil protection and natural disaster response training. The agreement is a recognition that the city’s experience, the Red Cross response and other efforts have made the town a case study for local disaster prevention, response and management.

**A complete U-turn**

The experience was even more powerful because only two days before the quake, Rocca had been in L’Aquila, attending his first National Society general assembly as president. That year, by chance, the assembly was hosted by the local branch. One of the key issues on the table was the coming reform of the Italian Red Cross: a structural overhaul that included severing its operations from state control.

Prior to that time, the Italian Red Cross was a part of the public sector: its operations were funded by the state, there was no governing board and a president called the shots in Rome.

Today, things could not be more different. Governing boards at branch, regional and national levels make their own decisions and choose their own leaders. Local members choose local branch leaders who in turn select the regional leaders. A combination of local and regional presidents choose the national president and governing board.

“It’s a complete U-turn, a change of perspective,” says Gabriele Bellocci, who serves as both national deputy for youth and the National Society’s vice president. “Before, it was top–down; now it’s bottom–up.”

For young people, the change was particularly dramatic. “Before, the youth structure was totally separated by the National Society. They had their own strategy that sometimes was not in synergy with the rest of the Red Cross.”

Today, youth volunteers are integrated with all volunteers, though there are youth representatives on governing boards at each level, chosen by youth members. “As a result, youth volunteers are more involved. That’s why their activity increased by 50 per cent compared to the previous year.”

Even the uniforms have changed. Today, young volunteers wear the same uniforms as the other volunteers. Before the reform, the Italian Red Cross had six different uniforms, depending on a volunteer’s particular function. Now there is only one uniform for all volunteers, though two groups wear ceremonial uniforms on special occasions. “The single uniform is a manifestation of the idea that we are one National Society,” says Bellocci.

**Financial independence**

People who lived through the process say it was not easy. Some 4,000 people were employed in
the National Society when it was part of the public service. Even those who agreed with the overall goal were worried about their own futures, as well as the financial solvency of the National Society.

Ironically, the man pushing the reforms, Rocca, had been appointed by the state, which wanted to divest the National Society due to its own financial pressures. A former prosecutor who had also managed large hospital systems, Rocca knew how to reform large organizations.

For Bellocchi, the pains of change paid off. “We are more independent now,” he says. “We can make our decisions and go into some theatres of operations where maybe the political systems wouldn’t want us to go.

“With the migration debate, there was a big discussion whether our military should go to save people or not. But we were already there, saving lives. We also play an advocacy role and it works better to be independent.”

And in terms of financial solvency? “When people see that you are truly independent and they trust how you work, they are more than happy to help. So maybe we have more money now than before,” says Bellocchi.

Someone who’s been there

Rocca’s experience as a reformer could be useful in his role as IFRC president, supporting National Societies through similar challenges. But Rocca says he doesn’t presume his experience in Italy applies universally.

“The lesson I learned is the importance of dialogue,” he says. “It is the right tool with which you can engage with people and help them embrace the change. Every decision comes after you listen because sometimes there’s something you are not seeing that is happening on the ground that you need to take into account.

“So it’s not about to taking my experience and bringing it unchanged to the IFRC. It’s more about the way we engaged — through dialogue,” he says.

There’s no one-size-fits-all approach for the Red Cross Red Crescent’s diverse network, he says, adding that he wants to avoid what he sees as the mistaken Western or Northern international approach of trying to dictate solutions.

“I can give a long list of historical examples in which the presence of other National Societies and the international parts of the Movement during a crisis has left the host National Society weaker than before the arrival of these international organizations. Can we be humble enough to admit this?

“So we have to completely change the way we work together. In the last few years, this has started to change but it’s not enough,” says Rocca, who can speak from experience: the Italian Red Cross has strong international operations and is involved in overseas operations from Bangladesh to Syria.

Along similar lines, Rocca is a firm supporter of localization, a cornerstone of his campaign for the presidency. “But localization does not mean dimin-
ishing the role of anyone in the Movement,” he adds, noting that the international contribution, particularly during conflict or major crisis, is critical.

Getting the balance right for each scenario, he says, will again be an issue of discussion. But localization will not be the only issue for which serious dialogue is needed. As president of the IFRC, Rocca will need to bring direction and consensus on numerous controversial issues, from migration to climate change. Internally, he hopes to further debate on issues such as improving gender balance in leadership, giving volunteers a greater voice, and “putting integrity on top of our agenda”, a key promise of his election manifesto.

Rocca takes the helm of the IFRC at a critical time. The rise of the #MeToo Movement, followed by a range of scandals in the humanitarian sector of alleged sexual harassment and misuse of funds have added urgency to the demand for greater transparency and integrity throughout the sector.

**One emblem, one Movement**

Some of these issues have touched the Movement. In the months leading up to Rocca’s election, the IFRC revealed it had discovered that large amounts of money had been misappropriated from its 2014–2016 Ebola response by individuals (including an IFRC staff member) in Guinea and Sierra Leone.

“Stealing money in a situation in which people are in desperate need is unforgivable,” Rocca says. “The lesson learnt is that, first, we have to ensure we have systems in place so we are the first to detect the fraud — which we were in this case.

“But we need to increase our capacity to detect these cases and increase the role of our risk committee and team in Geneva working on corruption and fraud cases.

“And when necessary,” he says, “we need to be tougher [on individuals or National Societies that violate the Fundamental Principles]. We have to be ready to protect the dignity of the Movement. But we also need to speed up the process of investigation and take care of any cases of breach of integrity.

“The Compliance and Mediation Committee is doing great job but we need to increase its funding so it can better fulfil its role and mandate.”

In extreme cases, Rocca says, the Movement should discuss ways it can take international action — separate from the host National Society — in cases where the local National Society is not able to fulfil its mandate. “The IFRC must be able to act to meet people’s needs — we cannot withdraw from people in desperate need simply because the National Society is not able to fulfil its role.”

But he also emphasizes that National Societies who need help will get full support from Geneva. “We in Geneva can play an important role in supporting change,” he says. “For us in the Italian Red Cross, the support we received from the IFRC and the ICRC was very important. They engaged with us and the government and members of parliament to respect our independence even as we remained an auxiliary to the government.”

For Rocca, much of the challenge ahead has to do with trust — a central part of his election manifesto. “We do this by increasing the tools that allow us to be more transparent,” he says. “We must be able to trace every franc or dollar we spend on the ground.

“We also need to create a different culture so that every leader, every secretary general is aware that any damage created at the local level can be spread all over the world by social media in one second — the emblem is one.”

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“The lesson I learned is the importance of dialogue. It is the right tool with which you can engage with people and help them embrace the change.”

Francesco Rocca, president of the IFRC

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By Malcolm Lucard

Malcolm Lucard is editor, Red Cross Red Crescent magazine
Mixed signals

In the age of hyper-connectivity, in which mobile phones and internet access seem ubiquitous, what is the future for traditional tracing services such as the ICRC’s Restoring Family Links?

A PARENT’S DESPERATE TWEET to find a missing child can go viral and be seen by millions in a matter of hours. A refugee arriving on a Greek island can announce his survival to family in as long as it takes to send a WhatsApp message. Someone caught up in an earthquake can register their safety on Facebook with a few clicks.

So what is the future of the Movement’s tracing efforts when it seems that the ability to amplify news of a person’s safety or search has never been easier?

Despite the proliferation of mobile communications, people continue to be separated from their families through conflict, disaster and deprivations of liberty for an unbearably long time, sometimes forever.

Helping people reconnect has been a core mission for the Movement since its founding, inspired after Henry Dunant encountered a young, dying soldier at the Battle of Solferino in 1859. The soldier had a final request: inform his parents of his fate, a message that Dunant delivered to the parents personally.

Today, it would be easy to assume that such a personal touch was no longer necessary. But Eva Puhar, who coordinates the trans-regional work of the ICRC’s Restoring Family Links (RFL) network in Belgrade, Serbia, says appearances can be deceptive.

“One of the main misconceptions today is that everyone can be found through online services, but people don’t realize how hard it can be to find someone once you lose them,” she says. “If you are not on social media or if your SIM card stops working in another country or you lose your phone in the sea or forget your social media passwords, people can lose contact with each other for years.”

So close yet so far

This can be true, even in highly connected cities. The story of 27-year-old Noor is a good example. He arrived in England in 2009 after fleeing Afghanistan in 2007, a journey during which his parents died and he lost contact with his brother. A chance visit to a Red Cross office in Manchester led him to the party of an Afghan man celebrating being reunited with his brother.

The two had found each other using the Trace the Face website, an online tracing tool developed by European National Societies in collaboration with the ICRC. The site allows people to publish their own photo as well as information on the people they seek. (All enquiries are filtered through Movement staff to verify identity before facilitating contact. The site currently hosts more than 3,500 active cases.)

Noor promptly registered. The results came unexpectedly fast.

“When I was shown his photo, I couldn’t stop crying,” Noor recalls. “I was asked to provide more information to confirm and I told them the name of my brother’s school back home and how I kept telling him that I would buy him a bicycle — he would remember that.”

For a long time, Noor had been experiencing ‘ambiguous loss’, which can occur when a loved one has gone missing and his or her fate is unknown, leaving a relative’s grieving process in a sort of limbo. “When they called me in, I honestly thought that they would tell me that he was found dead,
and I was prepared for that, I just needed closure. But when I learned he was here and alive, I couldn’t believe it, living in England for the last year!"

**Off the grid**

What makes reunions like this more challenging is the fact that, for a variety of reasons, many people are off the grid, by choice or necessity, even in highly connected environments. Those who lack proper residency documents, for example, might hesitate to give their names and address for use in official databases. This is one reason why the legal status of anyone using Trace the Face is not taken into consideration.

“Our aim is to have one foot on either side of the digital divide — equipped for modern-day tracing but still able to penetrate remote, off-grid areas,” says Florence Anselmo, deputy director of the Geneva-based Central Tracing Agency, which oversees the ICRC’s RFL services.

The Movement’s new strategy for RFL, to be released in 2019, aims to continue time-tested, individualized tracing efforts while embracing a range of digital solutions in order to increase the efficiency of its search techniques.

“We need better tools to search the increasingly huge amount of data available from various sources and ensure we can safely and effectively share and compare information between different organizations,” says Anselmo. “The ICRC has been partnering with Microsoft, for example, to pilot algorithm-based matching tools to compare names and facial recognition technology to compare photos. We also aim to improve the digital interface of Trace the Face so people can use it on their phone software.”

**Facing the challenges**

Facial recognition holds some promises, although there are also many risks. Facial recognition programmes use advanced algorithms to scan images of faces for identifying features and determine the likelihood of a match.

But there are many technical and ethical challenges. For example, what happens when people change over time? If a child is missing for many years, will technology be created that adapts recognition along with a person’s physical transformation?

Ethically, facial recognition triggers alarm bells, mainly around the issue of consent and protection of those being scanned. What are the risks of using technology that essentially captures biomet-

"If you are not on social media or if your SIM card stops working in another country or you lose your phone in the sea... people can lose contact for years."

Eva Puhar, ICRC trans-regional coordinator for RFL in Belgrade, Serbia

ric information without, in many cases, the subject’s knowledge?

In the wrong hands, people could be sought out for the wrong reasons.

No wonder then that the ICRC is proceeding with caution. “We test and explore things at ICRC, but ethics and the notion of ‘do no harm’ are always high up on the agenda,” says Vincent Graf Narbel, a member of an ICRC innovation team.

For example, the ICRC has worked with Microsoft to improve the user interface and back-end data-matching using existing and well-protected RFL tracing databases. But at this point, the ICRC does not envision employing facial recognition systems that involve photos of people who have not expressly given their consent for such searches.

A similar dilemma arises with the idea of systematic connectivity — offering services such as Wi-Fi ‘hotspots’ — in places such as displacement camps. Very much in demand, this kind of connectivity is offered in many displacement camps today. Making such connectivity more universal could prevent long-term separation. But how to ensure the protection of private data, which might put some or all the camps’ residents at risk if misused or released improperly? And who is responsible for protecting that data?

**Data without borders**

Similar questions arise whenever talking about the mass collection of the data of vulnerable populations. The non-profit organization Refunite advertises itself as the world’s largest family tracing platform.

Unlike Trace the Face, people can upload their own profile online through a website that is publicized by mass SMS marketing targeting large populations of refugees. Founder Christopher Mikkel森 thinks that privacy concerns should not come at the expense of the reach and effectiveness of the tracing platform.

“Our data is stored in Germany and subject to rigorous European data laws,” he says. “But we make a point to say that the platform is open. When companies much more heavily guarded than ours are hacked for information, it would be foolish of me to claim that we are safe, especially as we operate through SMS.”

The ever-expanding array of digital tools flowing into the humanitarian sphere still provokes the
Even in the digital age, people’s best efforts to find lost loved ones can hit a dead end. The story of two pre-school siblings separated during the Second World War is a case in point.

As the Red Army approached Lithuania in 1944, Christel and Gunter Pelekies were evacuated westward. Because three-year-old Gunter was in a children’s home, they left on different trains and ended up in different regions. Gunter did not know his date of birth or the name of his mother so authorities recorded his surname incorrectly. This simple mistake rendered his lifelong search efforts fruitless.

In 2013, after Gunter registered with the German Red Cross tracing service, scrutiny of the archives turned up an old address for his mother. The trail finally led to Christel, who assumed her brother had been killed when the children’s home was bombed.

Gunter and Christel were reunited 72 years later. “We have at least two cases like the Pelekies every year, when people separated during the Second World War find each other alive,” says Annika Estner, the head of the Second World War tracing Unit at the German Red Cross, which in 2016 had 9,000 active WW2-era cases.

question: who is responsible for people’s online safety? Migrants and refugees, for example, are sadly a major attraction for smugglers, traffickers and criminals seeking to exploit a family’s desperation for monetary gain. Might unprotected data make the hacking and exploitation of such vulnerabilities more effective? Could a growing hub of data also be useful to repressive political regimes seeking enemies?

Clearly there are vulnerabilities. In late 2017, a tech firm broke into a software platform widely used by aid agencies and gained access to the photographs, family details, PIN numbers and map coordinates of more than 8,000 families assisted by a non-governmental organization in West Africa.

But Mikkelsen suggests that it’s patronizing to assume refugees are naïve to the risks. “Refugees are way better at defining when they are at risk than anyone else,” he says. “Technology is inherently borderless, you can never stop it. People upload geotagged photos of themselves onto Facebook. As much as you want to think you can control the stream of information in refugee camps, you can’t.”

For Anselmo, there is room for both approaches to co-exist but the Movement’s long-term work in extreme conditions highlights the essential role in tracing for international humanitarian organizations that adhere to principles and have the people-power to pick up where technology leaves off.

“So many apps and platforms are great as immediate tools. You try it and you may immediately get a match,” she says. “But what happens when there is nothing? If I was looking for a loved one, I would try everything I could, but if I come from a conflict area, if the person I’m looking for might have disappeared or is dead or detained, I would also want to have an organization that understands complex conflict environments, can access places of detention, follows my case and is able to update me personally on its progress.”

A lingering divide
For Anselmo, there are compelling reasons why the last mile should still be done by the professional practitioners to avoid possibilities of abusing people or doing harm. National Societies or ICRC delegates offering RFL can link people to a variety of services along with the tracing request, such as psychological counselling, referrals to other organizations or assistance with integrating into a new society.

This is particularly critical given that many tracing requests do not result in a positive match, which is traumatic enough. But even when someone is found, the two people may be divided by borders and hence the initial elation may soon be replaced with anxiety over applying for family reunification. Similarly, the facilitation of contact with a family member in detention and the establishment of the fate of the deceased are processes that inevitably work in tandem with real-world human support by trained counsellors or the intervention of forensic scientists.

It’s important to remember that in many parts of the world, broadband access simply does not exist. And in some cases, many people who are most vulnerable do not have the education necessary to use social media tools.

Despite the ubiquity of Facebook, for example, it requires literacy, a smartphone and money for credit and data. Indeed, people with the greatest lack of reliable communications are the biggest users of Movement tracing services. Refugees from Afghanistan, particularly unaccompanied minors, rank among the tracing service’s top users. A combination of the deteriorating security situation and low literacy levels presents serious obstacles to following up requests for information on a missing loved one.

“We translate each tracing request into the local language and our colleagues at the Afghan Red Crescent Society engage their network,” says Wanda Toso, the RFL coordinator at the ICRC delegation in Kabul. “They travel to the village and start asking the elder, the imam, the baker, anyone who may be able to help.”

By Andrew Connelly
Andrew Connelly is a freelance writer based in the United Kingdom who covers humanitarian issues.
The Roots of Restraint in War
ICRC 2018
Based on two years of research collaboration between the ICRC and six scholars, The Roots of Restraint in War investigates the factors that influence the combat behaviour of soldiers and fighters who belong to various types of armed forces or armed groups. Drawing on eight case studies across five countries, the report aims to promote restraint during armed conflict by providing an analysis that can help humanitarian actors identify the best approach towards each type of armed group or armed force. Available in English.

Addressing Internal Displacement in Times of Armed Conflict and Other Violence
ICRC 2018
At the end of 2016, more than 40 million people worldwide were considered ‘internally displaced’, meaning they had to leave their homes due to conflict or other crises but stayed within the borders of their home country. This brochure explains the extreme hardship these people face and details how the ICRC helps people avoid displacement while addressing the specific needs of displaced people and the communities that host them. Available in Arabic, Chinese, English, French and Spanish.

Zaza the 14-Year-Old Child Soldier
ICRC 2018
Despite being poor, Zaza, a 14-year-old boy, used to spend his days in happiness, with his parents and elder and younger sisters. But his village was attacked and he lost his home and entire family. Hell-bent on revenge, Zaza became a soldier in an armed group. This is how “Zaza the 14-year-old child soldier” begins. A graphic novel written by Kenichi Oishi and illustrated in the Japanese manga style by Morihiko Ishikawa, the story of Zaza brings to light the reality of children pulled into a life of violence. Available in English.

Action to Assist and Protect Trafficked Persons
IFRC 2018
Building on and complementing the IFRC’s Migration Policy, the document provides guidance to European Red Cross National Societies to support their work in assisting and protecting trafficked persons in the context of migration. Available in English.

How to Establish and Manage a Systematic Community Feedback Mechanism
ICRC 2018
This guide aims to help practitioners create better and more accountable programming by establishing structures in which the opinions of people affected by crisis are listened to and acted on. It also offers guidance and tools for designing and implementing feedback cycles that bring continuous and real-time data into day-to-day decision-making. Available in English.

A Matter of Life and Death: Tackling Violence against Health Care in Pakistan, Peru and El Salvador
ICRC 2018
This publication compiles case studies of initiatives taken to safeguard the delivery of healthcare in Pakistan, Peru and El Salvador. Each initiative was designed to prevent or minimize the impact of violence against healthcare staff and facilities. The cases studies are intended chiefly for humanitarian and healthcare workers and will be of special interest to people belonging to the International Red Cross and Red Crescent Movement. The aim is to share lessons learnt and to stimulate discussion — with officials, legislators, policy-makers, etc. — as to how to tackle this critical issue. Available in Arabic, English and Spanish.

Rights of Migrants in Action: Child Protection Projects
ICRC 2018
This synthesis report offers lessons learnt from projects in five countries that aimed to protect and promote the rights of migrants while harnessing the knowledge and building the capacity of civil society organizations. The projects (in Benin, Ecuador, Ethiopia, Guatemala and Indonesia) were part of a larger global initiative called the Rights of Migrants in Action, which focuses on enforcing and promoting the rights of migrant domestic workers and victims of human trafficking, while also improving their access to services. Available in English.

Enter the room
ICRC 2018
With ‘Enter the room’ the ICRC uses the augmented reality technology to provide an intimate sense of what it actually feels like when war comes to your doorstep. Users are invited to download an application to their smartphones that allows them an immersive experience inside the room of a small child as an attack begins. Find the app at http://info.icrc.org/enter-the-room Available in English.

Easy-to-share animations from IFRC
ICRC 2018
As social media becomes an increasingly effective tool for sharing critical information, the IFRC has developed a series of short animated videos designed specifically for social media. Dealing with important subjects ranging from diphtheria prevention to climate change, these 30-second animations are aimed at mobile phone users who often do not view videos for more than a minute. The animations deal with simple but important messages such as how to detect and quickly respond to flu, diphtheria or measles and are available for easy use by National Societies. The IFRC will translate the texts to other languages upon request from National Societies. Downloadable versions at: http://bit.ly/IFRC_Explainers Available in English.
Fleeing from violence in Myanmar, Hasina Begum walked for five days — with her one-and-half-year-old daughter in her arms and a five-year-old stepson at her side — before finding relative safety at a makeshift camp in Bangladesh. See our Focus section on page 14 to learn more about Begum’s story and efforts to help people like her cope with extremely heavy psychological and emotional burdens.

Photo: Munem Waqif/VU/ICRC