PROVENTION CONSORTIUM

Community Risk Assessment and Action Planning project

RWANDA - Karaba (Gikongoro district) and other locations



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Using the Vulnerability and Capacity Assessment Tool in Rwanda

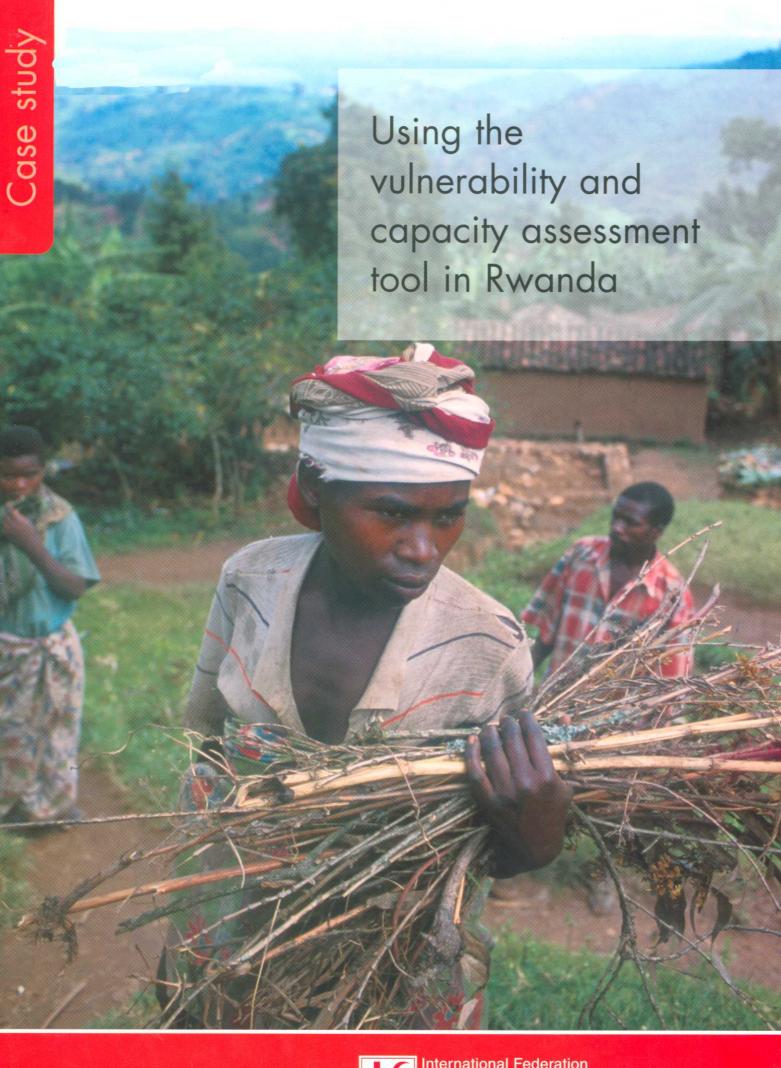
CRA Toolkit
CASE STUDY

This case study is part of a broader ProVention Consortium initiative aimed at collecting and analyzing community risk assessment cases. For more information on this project, see www.proventionconsortium.org.

Bibliographical reference: International Federation of Red Cross and Red Crescent Societies, <i>Using the vulnerability and capacity assessment tool in Rwanda</i> , IFRC, Geneva, Switzerland (2003).
Click-on reference to the ReliefWeb country file for Rwanda : http://www.reliefweb.int/rw/dbc.nsf/doc104?OpenForm&rc=1&cc=rwa

Note:

A Guidance Note has been developed for this case study. It contains an abstract, analyzes the main findings of the study, provides contextual and strategic notes and highlights the main lessons learned from the case. The guidance note has been developed by Stephanie Bouris in close collaboration with the author(s) of the case study and the organization(s) involved.



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Acknowledgements

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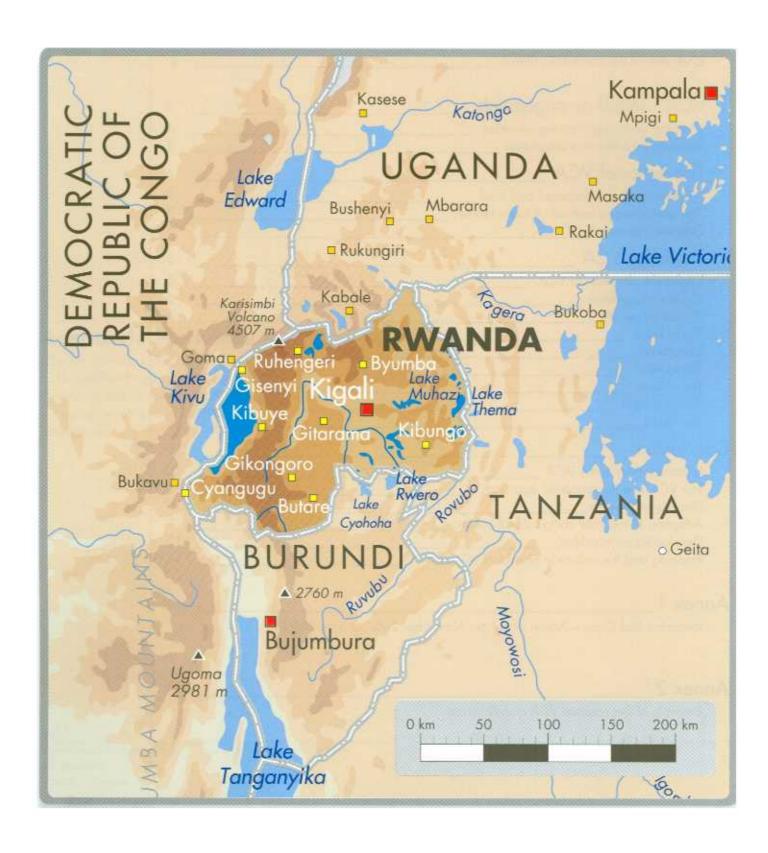
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Introduction

This case study recounts the experience of the Rwandan Red Cross with the vulnerability and capacity assessment (VCA) tool. Devised in the 1990's by the Federation and included in *Strategy 2010*, the VCA is a participative means of obtaining an overview of the risks and capacities existing in a country at the national and local levels.

The aim of this study is to describe the approach adopted by the Rwandan Red Cross and to share the lessons it learned from that experience with other National Societies.

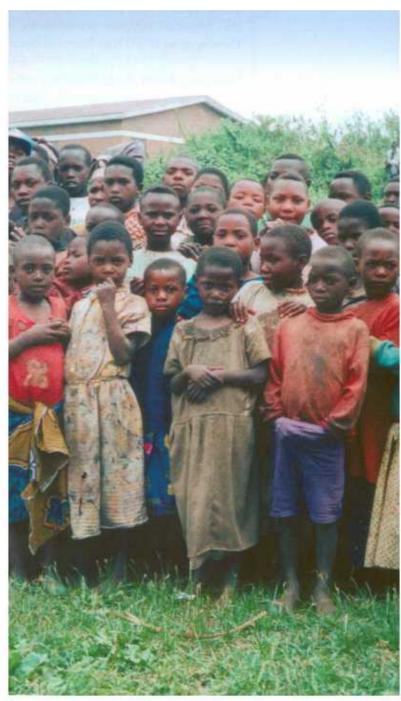
The context

Rwanda, which has 8.1 million inhabitants and a population density of 305 inhabitants per square kilometre, is one of Africa's most populous countries. Most households consist of small farms that consume much of what they grow.

As in most developing countries, many of the diseases that are commonplace in Rwanda, such as AIDS, malaria, acute respiratory infections, diarrhoea, malnutrition, tuberculosis and vaccine-preventable illnesses, have preventable causes.

Many problems within Rwandan society, particularly those associated with health, food insecurity and humanitarian values, are inherently linked with poverty. Moreover, the genocide has had a deep psychological impact on the Rwandan people.

Generally speaking, information, education, communication, basic health care for the sick, the supply of drinking water and sanitation play a significant role in the prevention and management of most of the illnesses occurring in the country. When disease strikes, it spreads rapidly unless swift action is taken.



1. VCA - the initial arrangements

For two years, the National Society worked with a Federation delegate to draw up a disaster preparedness and response plan. This programme, which can be consulted on the Federation's Internet site (www.ifrc.org), comprises over 20 points relating to institutional capacity that the National Society must take into account and adapt to the situation in the country One of those points is the implementation of the VCA programme.

The Rwandan Red Cross decided to launch the VCA process following the 1999 famine, which was particularly severe in Bugesera and Umutara provinces. The aim was to identify those parts of the country most vulnerable to disaster and on that basis to design projects to mitigate the effects of disasters in cooperation with the local communities and authorities.

Rwanda was able to undertake several disaster preparedness activities, including the VCA, thanks to the financial support provided by the United Kingdom's Department for International Development (DFID) to National Societies in the region (Rwanda, Ethiopia and Sudan).

Learning from neighbouring countries

To start with, the Rwandan Red Cross sent five officials to Uganda for one week. The Ugandan Red Cross had been using the VCA tool for several years and was able to to share its experience with its neighbours. During their visit, the Rwandan Red Cross officials obtained information on VCA techniques and approaches. The administrator of the Ugandan Red Cross, who had been recently transferred to Nairobi, provided technical support in terms of the VCA process.

Defining priorities and orientations

The Rwandan Red Cross then organized a workshop for all the disaster-preparedness officers of the National Societies of Rwanda, Ethiopia and Sudan and the regional office in Nairobi. The participants discussed the obstacles encountered in implementing the programme, chiefly the deadlines imposed. The three National Societies therefore decided to review the programme planning together and to focus on key activities in the following 15 months.

The workshop was also attended by representatives of the Ministry of Health, Social Affairs, and Land-Use Planning, the cooperation delegate of the International Committee of the Red Cross (ICRC), the DFID technical coordinator in Geneva and the British Red Cross technical adviser.

2. The national VCA

A questionnaire is prepared and used

Following the workshop, a working group drew up a questionnaire covering health, climate risks and local infrastructure (number of schools, number of hospitals and health facilities, reception facilities, sources of water). The questionnaire (see annex) was then translated from French into Kinyarwanda.

In order to facilitate the distribution of the questionnaire nationwide, the Rwandan Red Cross had to provide its district volunteers with training. The training process was headed by the regional officer in Nairobi who, as a staff member seconded by the Ugandan Red Cross, was familiar with the VCA method.

At the same time, the disaster preparedness coordinator and the head of the relief service from the Rwandan Red Cross travelled throughout the country, training three members in each provincial committee and one member in each district committee.

Each committee had to be familiar with the VCA and the questionnaire method, especially when it came to data collection.

In all, 62 of Rwanda's 92 districts were involved in collecting information nationwide.

The questionnaire method - the lessons learned

The study of the data collected through the questionnaire was rapidly put to good use when the volcano erupted in Goma. Both the National Society and the government were able to easily identify pockets of vulnerability and to plan a response on the basis of the data collected. The questionnaire was also sent to the international and local organizations working in the country, thereby fostering enhanced cooperation between all stakeholders.

However, an analysis of the shortcomings of the questionnaire method in the conduct of a VCA brings to light the following points:

- 1. Only 56 per cent of the 62 districts surveyed replied There may be several reasons for this relatively low response rate:
 - lack of time, the volunteers concerned having to work in the fields;
 - the remoteness of certain places;
 - lack of means (for example, of transportation).
- 2. The method used to compile and sort the data transmitted to headquarters was not effective for the purposes of the analysis. For example, it would have been very useful to train personnel in the use of computer spreadsheets.
- 3. Food insecurity is one of the country's biggest problems, a point that was obviously highlighted in the questionnaire and that perhaps automatically steered the action of the Rwandan Red Cross away from other serious potential risks (such as epidemics and weather phenomena).
- 4. While assessment by means of a questionnaire is only one part of conducting a VCA, it nevertheless requires a substantial investment in terms of time and human resources.

Disaster response

While the Rwandan Red Cross was conducting the VCA, it had to launch several disaster relief operations, specifically in October and November 2001 when the Gisenyi region was hit by torrential rainfall and landslides, and on 17 January 2002 when a volcano erupted, destroying part of the town of Goma. In the latter case, the Rwandan Red Cross was obliged to mobilize all of its available resources to come to the aid of the inhabitants of Goma and the neighbouring town of Gisenyi.

These operations seriously disrupted the schedule initially established for the risk-reduction programme, resulting in a number of delays.

3. The local VCA

Following the national VCA, the decision was made to conduct a more detailed VCA in one of Rwanda's most vulnerable districts and to give the National Society the possibility of cooperating with the local communities, not only in identifying the principal risks but also in drawing up appropriate mitigation projects.

The district of Karaba was chosen on the basis of several criteria:

- dynamic regional and local committees;
- backing from the local authorities;
- recurring problems of food insecurity;
- presence and support of other non-governmental organizations (NGOs);
- backing of the community.

Objectives of the local VCA

- To detect the problems faced by the local people in their everyday lives.
- To classify those problems by order of priority, so as to determine which are the causes of food insecurity.
- To propose sustainable solutions to the community.
- To make an effective contribution to the establishment of a district development plan.

On-site cooperation

In cooperation with the mayor of Karaba district, 26 provincial committee volunteers who would act as facilitators in meetings with the communities took part in a six-day course of training covering the following main points:

- introduction to disaster management at community level;
- introduction to the VCA:
- progression of vulnerability;
- risk evaluation;
- capacity evaluation;
- techniques and tools for conducting a VCA;
- introduction to the participative method,
- tools of the participative method.



The VCA project coordinator travelled widely throughout the district in order to enhance his understanding of the distances the volunteers would have to cover, to identify the best places for meetings, and to familiarize himself with the environment and the provincial committee. The Rwandan Red Cross headquarters regularly informed the Director General for Land-Use Planning, the Environment and Habitat, who is in charge of the Prime Minister's Disaster Management Office, of the progress being made in the VCA process.

The local population is regularly being asked questions by organizations wanting to set up programmes. The problem is that these surveys rarely produce concrete results or benefits, and as a result, some local people no longer want fo participate.

Choice of sectors

The Rwandan Red Cross limited the local VCA to 13 out of 26 sectors, or half of Karaba district.

The sectors were chosen so as to be representative of the entire district from the geographical economic and social points of view. The availability of the people to be interviewed was also taken into account.

For the purposes of the VCA, interviews were conducted with a sample of 60 people per sector who were called the "working group" and were representative of the groups in the community namely:

- 20 members of the basic structural organization, including 10 women;
- 10 members of the basic organizational structure among young people;
- 30 resource people: educated people, the elderly, community representatives.

The survey lasted two weeks. The participants spent one or several days each in total, depending on their availability.

The method

In order to collect all the information required, the topics of discussion were shared out as follows:

- the elderly worked on the sector's history, with special emphasis on problems relating to food security;
- the women's representatives focussed on the seasonal calendar and the daily routine;
- the young people produced a map of the sector showing community development achievements.

Groupwork

The elderly

The key to the community's collective past is held by the elderly, who can pass on their experiences and specifically explain what they did during periods of food shortage.

The following questions were asked:

- What years stand out in the district's history (drought, famine)?
- How did the communities organize themselves during those years (sharing of food, use of food stocks)?
- Were some sectors more seriously affected than others? Why?

Three examples are illustrative of the data collected:

- In the past, when times were hard young people married earlier than usual in order to have a plot of land they could farm and to be able to eat one meal a day, which they could not do if they stayed with their parents.
- A district cleric took steps to buy, at a fixed price, the farmers' surplus production in times of plenty. If the following harvest was also good, he sold his stocks to merchants. If, however, lack of rain gave rise to famine, he sold all or part of their harvest back to the farmers at the same price, thus easing the effects of the famine. He also explained the need to save with a view to having something put aside when times were hard.
- Prior to the ethnic conflicts of 1959 to 1994, the large numbers of livestock meant that the soil was easily fertilised, making it less acidic. Those herds had been decimated by various ethnic conflicts and the environment had suffered as a result

From this groupwork, the Rwandan Red Cross obtained an understanding not only of how famine had affected the district but also of people's coping mechanisms (for example, eating seed or selling the tiles from the roof of their house).

It is important to note that many of the people interviewed underscored the shortage of livestock as a major source of concern.

The women

Women are a true pillar of Rwandan society. They are the ones who usually tend the fields and take care of the crops and the family's children. In addition, the genocide made many women household heads. Some of them are widows, others have their husbands in jail. Women therefore know a great deal about their land and the daily difficulties and obstacles that they face.

The group of women started by drawing up a seasonal calendar of work, in order to share their collective experience. It was thus possible to determine, in the light of the rainy seasons that mark the crop cycle in Rwanda, during which period women sowed their seeds, what they sowed and why.

To do this, the women drew a large circle on the ground and divided it into 12 months. They placed different vegetables and cereals in the calendar, depending on when they were sown. It became clear that certain species were not at all cultivated in the region.

The discussion focused on the legumes, roots and cereals that the women's group had placed on the calendar and what were the best crops to grow.

For example, several sources had said that the district had the perfect soil for growing coffee and that millions of coffee plants had once grown there. This is no longer the case.

The discussion with the women's group revealed that production had slowed after several dry seasons and, above all, that without washing stations the coffee beans could not be properly treated and sold at the current market price. And yet, the income generated from coffee production was far higher than that obtained from growing vegetables, for example.

"We had never thought in this way about how we live and grow food, we had never taken the time to visit our neighbours, even if they didn't live nearby, to ask them. When, why and how do you do that? We grow this variety rather than that one because...".

Young people

The elderly and the women worked on the vulnerabilities. With the young people, the Rwandan Red Cross broached the issue of capacities.



Capacity is used here to refer to the achievements and existing infrastructure in the district, in terms of community development.

First, the group of young people and the volunteers divided between them the 13 sectors taking part in the local VCA.

Then, for two weeks, usually on foot, the young people travelled throughout the sectors to meet with the locals and draw up a detailed map of the local infrastructure. They noted in particular:

- the number of bridges and what state they were in;
- the number of hospitals, schools and health facilities and their capacities;
- the number of standpipes, their quality and capacities;
- the community programmes carried out and their effects

This information was recorded on a map of the region and used rapidly to assess the capacities of each sector. It was then forwarded to the working group at headquarters for more indepth analysis. The latter's conclusions will be used to draw up programmes adapted to the communities in the Karaba region.

VCA results

Once the data had been compiled, Rwandan Red Cross section coordinators and local authorities listed the problems encountered in the sectors selected by order of priority. That order of priorities was then taken to be representative of the entire district.

The results of the analysis and the definition of priorities show that the five main causes of food insecurity in the district are:

- 1. low numbers of livestock;
- 2. the absence of income and jobs outside the agricultural sector;
- 3. very poor knowledge about how to start income-generating projects;
- undeveloped marshland (75% unused);
- 5. disease (malaria, AIDS, worm infections).

Using data provided by World Vision and SNV (the Foundation of Netherlands Volunteers), the Rwandan Red Cross supplemented its analysis and drew up tables of production and livestock in Karaba district.

Plant	Number of tonnes per hectare
Banana	2.3
Cocoyams	4.0
Beans	0.9
Maize	1.0
Manioc	9.0
Sweet potatoes	8.0
Peas	0.7
Potatoes	12.0
Soya	0.8
Sorghum	1.2

Species	Number
	1,150,155
Cattle	12,223
Goats	12,608
Pigs	5,849
Poultry	12,932
Rabbits	6,710
Sheep	5,696











Conclusion

Proper understanding of the VCA

Before launching the VCA exercise, the objectives have to be clearly defined so that the participants are not forced to learn by trial and error and can identify the strengths and weaknesses of the exercise, the opportunities it affords and the resources that have to be mobilized to conduct it.

The Rwandan Red Cross had reflected on the following points:

- risk-assessment programmes carried out by the government and other partners (NGO's, associations etc.);
- its capacity to conduct the VCA exercise;
- the internal and external VCA competences available;
- the means available to follow up the VCA results.

The VCA and the long-term approach

The VCA is a reliable, sustainable development-oriented approach for any National Society wishing to undertake long-term activities. It is a very useful tool for identifying a region's risks, needs and capacity for proper planning.

Sharing knowledge

The Rwandan Red Cross has genuinely learned from others:

- the exchange of experiences during the visit by Rwandan Red Cross officials to Uganda gave the Society the impetus to conduct the VCA exercise;
- partnerships with those on the spot, in particular World Food Programme (WFP), World Vision and SNV, and the support of the Nairobi delegation fostered the exchange of information and experience;
- headquarters officials, the volunteers in all the country's provinces and the authorities of Karaba district, all took part in VCA training.

Adapting to the local socio-cultural context

It is essential to involve the community in which the VCA is being conducted. Volunteers from the communities were a key factor in encouraging the local population take part in the VCA process.

Developing partnerships

Before embarking on the VCA exercise, local partners have to be targeted in accordance with anticipated needs. The Rwandan Red Cross contacted the local organizations that had an experience of the participatory rural appraisal (PRA) method.

The WFP, for its part, has acquired substantial experience of assessment by means of its vulnerability mapping approach.

The support of local political and administrative structures played a key role in mobilizing the communities as well as material and human support.

Planning and reduction of risks of vulnerability

The VCA helps to identify not just needs but also solutions.

Through this approach, all the stakeholders in one community seek solutions to the problems posed, then analyse the possibilities for mobilizing internal and external resources.

One of the biggest challenges when conducting a VCA is to go beyond a mere study and to communicate the information to the communities, the authorities and the National Society volunteers. All those involved want to know what will be done once the assessment is concluded, and the people expect concrete help.

The Rwandan Red Cross and Karaba district must now unite their efforts to find the financial means to respond to the priority needs identified by the communities in Karaba.

Annex 1

Rwandan Red Cross Action plan, November 2001 - June 2002

Objective: to strengthen the Rwandan Red Cross (RRC) disaster preparedness, response and mitigation capacities.

Objective	Activities	Indicators	Outcome	Timeframe	Financial support
1. To draw up a disaster- preparedness (DP) plan/policy and to help formulate a national government disaster	Conduct 12 seminars with 12 provincial committees and partners to discuss the National Society draft DP policy/plan (180 people targeted).	Report on the 12 provincial meetings. Feedback on the draft DP policy.	The members, personnel and valunteers help formulate the policy and thereby have a sense of ownership.	November - December 2001	DFID
management policy/framework.	Conduct a national workshop for the 38 people in charge of examining the revised National Society DP policy.	The national workshop report and recommendations are incorporated into the draft policy.	The final National Society draft DP policy is submitted to the Board for approval.	December 2001	DFID
	Submit the National Society draft DP policy to the Board for approval.	National Society DP policy/plan approved.	A National Society DP policy/plan.	First quarter 2002	DFID
	Organize a workshop with the government of Rwanda and the stakeholders to further the process for a national governmental DP policy.	Report of the workshop.	The RRC Board of Directors negotiates a formal agreement with the government defining the role of the Rwandan Red Cross in the national disaster— mitigation policy and framework.	First quarter 2002	DFID
2. To promote food security in the three "high-risk" provinces by establishing a	Examine the data collected and the follow-up activities conducted by other organizations to avoid overlap.	Report available in November 2001.	Information is avail- able on the activi- ties of other institu- tions.	Mid- November	DFID
community-based early warning system.	In each of the three provinces (prefectures) designate two provincial focal points for disaster- preparedness activities.	The list of focal points is available; contacts have been made.	Six provincial focal points have been appointed.	November	DFID

Objective	Activities	Indicators	Outcome	Timeframe	Financia support
	Procure and install 4 fax machines in Gisenyi, Kibungo and Gikongoro district regional sections and at the headquarters coordination office.	Procurement requests, means available.	The four faxes have been bought and installed and are operational.	November	DFID
	Procure and distribute three motorcycles and 30 bicycles in Gisenyi, Kibungo and Gikongoro provinces (1 motorcycle and 10 bicycles per province).	Procurement requests; means available.	Improved means of transport for data collection in the provinces.	December 2001 - January 2002	DFID
	Procure and install a computer for the person in charge of the disaster- preparedness programme at headquarters.	Procurement request; means available.	Enhanced data pro- cessing and prepa- ration of reports.	December 2001	DFID
	Prepare a reporting system for the section committees and focal points reporting regularly to Kigali.	The system is available and accepted by National Society senior management.	System prepared for December 2001.	December 2001	DFID
	Training: hold a two-day workshop to train provincial focal points and regional coordinators in the system's use and basic reporting skills:	Report of the workshop.	The six focal paints and the coordina- tors are trained in the system's use starting in January 2001.	January 2002	DFID
			The information is regularly received from the field.		
	Collect and analyse data on the means of subsistence and household economics in Kibuye, Kibungo and Gikongoro provinces and draw up internal reports.	The information is available for dissemination, Monthly reports to the person in charge of DP.	Early warning indi- cators.	Ongoing as of February 2002	DFID
	Bimonthly bulletin drawn up by the person in charge of DP in Kigali. Information to be transmitted to all key players (Red Cross Movement, government, UN system, NGOs) and to all sections in a monthly publication.	Publication of regular bulletins	Publication of a bi-monthly bulletin.	February- May 2002	DFID

Objective	Activities	Indicators	Outcome	Timeframe	Financic support
3. To mitigate the effects of a disaster in a vulnerable community in Gikongoro province	VCA training for 25 employees and volunteers.	Report on the training.	25 employees and volunteers are able to apply VCA techniques.	November 2001	DFID
by means of a community-based disaster- management project (risk reduction measures).	Train 20 community volunteers (Karaba, Gikongora district) and conduct a VCA to identify the risk level in the community.	Report on the training. Report on the VCA implementation.	Assistance to the vulnerable community is planned on the basis of the VCA results.	December 2001 - January 2002	DFID
	Prepare a risk-reduction project on the basis of the VCA results.	The project proposal is available.	Project proposal.	March-April 2002	DFID
4. To conduct a nationwide VCA and draw up emergency disaster response plans.	Conduct or undertake a VCA (using existing questionnaires) to identify high-risk areas and produce emergency plans for foreseeable disasters.	VCA report.	A risk map of Rwanda has been prepared.	December 2001- January 2002	DFID
	On the basis of the VCA results, draw up emergency plans in the event of floods/landslides, political disturbances/ population movements (displaced persons, refugees) in co-operation with other partners. Incorporate the National Society's plans and those of other partners.	National and regional emergency plans in the event of floods/landslides and political unrest/population movements have been produced.	Each of the four regions has its own emergency plan. Links have been established between two RRC national emergency plans and existing UN agencies, government, ICRC or NGO plans.	February- May 2002	DFID
	Draw up an operational handbook/guidelines.	The handbook is available and has been distributed to volunteers.	Operational handbook/ guidelines.	January- April 2002	DFID
	Cooperate and form a network with the ICRC, the Federation, the government, UN agencies and other NGOs.	Monthly reports on the number of organizations visited and minutes of meetings.	Good working relations with partners.	Ongoing until end May 2002	DFID
	Conduct three regional advanced courses on DP (3 days per region) for 160 volunteers.	Reports on the training.	Qualified volunteers and employees make up regional response teams.	February- March 2002	DFID

Objective	Activities	Indicators	Outcome	Timeframe	Financia
			- Claropolite		support
	Conduct 4 regional training courses on DP for 80 volunteers in provinces prone to conflict · Kibuye, Byumba, Butare and Ruhengeri (20 volunteers per province).	Reports on the training.			ICRC
	Exchange visits with neighbouring sections of the Uganda Red Cross Society (12 volunteers from Gisenyi, Ruhengeri and Umutara provinces visit Kisaro and Kabale districts in Uganda).	Report on the visit.	Heightened awareness of how to use emergency plans.	February 2002	DFID
	Emergency stocks and funds.	Basic stocks and funds are available to respond to seasonal disasters.	Rapid response.	Ongoing	PNS
	Construct a DP house in Gisenyi.	DP house built in Gisenyi.	Rapid response.	March- December 2002	Italian Re Cross and Singapore Red Cross Society

Annex 2

Example national VCA questionnaire

Sample questions on vulnerabilities

1. DROUGHT	YES	00	If yes, answer the following questions, if no, go directly to the next point.
Cause			
At what time of the year?			Number of families affected
Number of incidents Number of people hospitalized			Number of deaths registered
1. FAMINE	YES	00	If yes, answer the following questions, if no, go directly to the next point.
Cause			
At what time of the year? Number of incidents			Number of families affected
Number of people hospitalized			Number of deaths registered
ample questions on cap			
umore auesnons on cor			
	atmes.		
EALTH FACILITIES		NO	If you appropriate following questions
	YES	NO O	If yes, answer the following questions, if no, go directly to the next point
EALTH FACILITIES 1. Are there any health centres in your district?			if no, go directly to the next point
EALTH FACILITIES 1. Are there any health centres			
Are there any health centres in your district? How many? Location 1. Are there any hospitals		0	If yes, answer the following questions,
I. Are there any health centres in your district? How many? Location 1. Are there any hospitals in your district?	YES		If no, go directly to the next point Capacity If yes, answer the following questions, if no, go directly to the next point.
I. Are there any health centres in your district? How many? Location 1. Are there any hospitals	YES	0	If yes, answer the following questions,
1. Are there any health centres in your district? How many? Location 1. Are there any hospitals in your district? How many?	YES	0	If no, go directly to the next point Capacity If yes, answer the following questions, if no, go directly to the next point.
1. Are there any health centres in your district? How many? Location 1. Are there any hospitals in your district? How many?	YES	0	If no, go directly to the next point Capacity If yes, answer the following questions, if no, go directly to the next point.
1. Are there any health centres in your district? How many? Location 1. Are there any hospitals in your district? How many? Location ATER AND SANITATION 1. Are there sources of water	YES	0	If yes, answer the following questions, if no, go directly to the next point. Capacity If yes, answer the following questions, if no, go directly to the next point. Capacity If yes, answer the following questions,
1. Are there any health centres in your district? How many? Location 1. Are there any hospitals in your district? How many? Location ATER AND SANITATION	YES	0 >0 0	If no, go directly to the next point Capacity If yes, answer the following questions, if no, go directly to the next point. Capacity

The Fundamental Principles of the International Red Cross and Red Crescent Movement

Humanity

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

Impartiality

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

Neutrality

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

Independence

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

Voluntary Service

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

Unity

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

Universality

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



The International Federation of Red Cross and Red Crescent Societies promotes the humanitarian activities of National Societies among vulnerable people.

By coordinating international disaster relief and encouraging development support it seeks to prevent and alleviate human suffering.

The Federation, the National Societies and the International Committee of the Red Cross together constitute the International Red Cross and Red Crescent Movement.