OVERVIEW REPORT
of the 32nd International Conference of the Red Cross and Red Crescent

Power of humanity
33rd International Conference of the Red Cross and Red Crescent
9-12 December 2019, Geneva
Executive summary

The International Conference of the Red Cross and Red Crescent (International Conference) meets every four years to reflect and take decisions on pressing humanitarian issues. It is a unique global forum where States, as High Contracting Parties to the Geneva Conventions, undertake joint commitments with the components of the International Red Cross and Red Crescent Movement (Movement) and key humanitarian partners.

Resolution 10 on the Power of Humanity adopted at the 32nd International Conference requests the International Committee of the Red Cross (ICRC) and the International Federation of Red Cross and Red Crescent Societies (IFRC) to report to the 33rd International Conference on the follow-up actions undertaken by International Conference members to implement the resolutions and pledges of the 32nd International Conference. This report on the outcomes of the 32nd International Conference seeks to give a human face to the impact of the discussions held and the commitments made and to draw inspiration for further action. It does not purport to be a detailed account of all the activities carried out in implementation of the 32nd International Conference outcomes, but rather a snapshot of key achievements and challenges.

Introduction and background

The world is confronted with a hugely complex humanitarian operating environment: new emergencies are unfolding alongside protracted conflicts; violence and instability are both causes and consequences of armed conflict and suffering; and natural disasters, environmental issues, urbanization, migration and socio-economic crises exacerbate existing vulnerabilities for many communities and individuals. The world needs and expects the Movement to work more effectively to protect and assist people affected by or vulnerable to crises and to work towards reducing humanitarian needs.

The International Conference is a unique forum bringing together the world’s largest humanitarian network and nearly every State. It is a major event on the humanitarian calendar every four years and an important global forum which has been taking place for the past 150 years to enhance and inspire humanitarian debates among governments, policy-makers and the components of the Movement. Moreover, it is a platform where National Red Cross and Red Crescent Societies (National Societies) and governments come together to identify joint solutions to the challenges facing the humanitarian world today.

The 32nd International Conference, which took place in December 2015, gathered representatives of 169 States Parties to the Geneva Conventions, 185 National Societies, the IFRC, the ICRC and 102 partner organizations. It marked the 50th anniversary of the Fundamental Principles of the Movement, which served as an overarching theme of the Conference. In addition, this unique international humanitarian forum addressed the following themes:

1. Preventing and responding to violence through the power of humanity, including protection and assistance to victims and vulnerable groups and violence prevention
2. Safeguarding safety and access to humanitarian assistance and services, including addressing persistent threats to the affected population, humanitarian staff and volunteers
3. Reducing disaster risks and strengthening resilience.

The 32nd International Conference adopted ten resolutions, five of which provided for voluntary reporting. All the resolutions and their background reports can be viewed on the International Conference website at https://rcrcconference.org/.

Methodology and structure of the report

This report was undertaken using two main methodologies:

1. Conference members were invited to report on their implementation progress and complete various online surveys on the International Conference website (www.rcrcconference.org). All reports submitted are publicly visible on the International Conference website.
2. Bilateral interviews and discussions were undertaken with selected National Societies and IFRC and ICRC staff to gather further information in addition to the reporting provided online via the International Conference website.
The report seeks to showcase the way in which the conference participants have succeeded in implementing global resolutions with local-level achievements. A brief summary of the implementation of the two specific resolutions on international humanitarian law (IHL) is also included, as provided by the ICRC.

The report is structured as follows:

1. Summary of efforts to implement Resolution 1 – Strengthening international humanitarian law protecting persons deprived of their liberty, and Resolution 2 – Strengthening compliance with international humanitarian law
2. Resolution 3 – Sexual and gender-based violence: Joint action on prevention and response
3. Resolution 4 – Health Care in Danger: Continuing to protect the delivery of health care together
4. Resolution 5 – The safety and security of humanitarian volunteers
5. Resolution 6 – Strengthening legal frameworks for disaster response, risk reduction and first aid
6. Resolution 7 – Strengthening the International Red Cross and Red Crescent Movement response to growing humanitarian needs
7. From pledges to action: Success stories and implementation of International Conference pledges.

It should be noted that the list of key achievements in each chapter is not exhaustive. Each chapter highlights selected key achievements under different sub-topics and portrays specific human-interest stories in order to illustrate the real-world impacts of International Conference commitments.

The co-organizers of the International Conference (the ICRC and the IFRC) wish to express their sincere thanks to all the National Societies and States who have provided valuable information on the implementation of their conference commitments and responded thoroughly to the surveys.
Strengthening and implementing international humanitarian law

The International Conference is a premier global forum that enhances and inspires humanitarian debates among States and Movement components. One of the main objectives of the International Conference, intrinsic to its very nature, is to promote respect for and contribute to the development of IHL. Below is a short recap of the progress made on the implementation of Resolutions 1 and 2 adopted at the 32nd International Conference.

Pursuant to Resolution 1 – Strengthening international humanitarian law protecting persons deprived of their liberty, in 2016–2017, the ICRC organized regional group meetings, written exchanges of views, an open-ended consultation, informal meetings and a formal meeting of States. Following the mandate provided in the resolution, these meetings aimed to determine “the modalities of further work in order to ensure its State-led, collaborative and non-politicized nature in accordance with this Resolution”. However, it was not possible to reach agreement on such modalities during the formal meeting of States in 2017. Following further consultation and in light of the widely diverging views of States, the ICRC concluded that it would not convene another formal meeting for the purpose of reaching consensus on working modalities under Resolution 1. Further details on this work are available in the Progress Report on Resolution 1, submitted by the ICRC to the 33rd International Conference.

In accordance with Resolution 2 – Strengthening compliance with international humanitarian law, from 2016 to 2018, Switzerland and the ICRC organized and co-facilitated five Formal Meetings as part of the intergovernmental process on strengthening respect for IHL. Each Formal Meeting was attended by over 100 delegations from States Parties to the Geneva Conventions and was preceded by an informal meeting and an open-ended consultation open to all States, facilitated by Switzerland and the ICRC. A sixth and final Formal Meeting was held on 15 March 2019 to conclude the intergovernmental process. An overview of the proceedings of the intergovernmental process on strengthening respect for IHL is presented in the Factual Report prepared by the ICRC and Switzerland. This Factual Report has been submitted to the 33rd International Conference and is available on the websites of the ICRC and the Swiss Federal Department of Foreign Affairs. Further details on the implementation of Resolution 2 are available therein.

Resolution 3 – Sexual and gender-based violence: Joint action on prevention and response

Sexual and gender-based violence (SGBV) in armed conflicts, disasters and other emergencies has devastating (and often invisible) consequences for victims, their families and their wider communities. The human cost of sexual and gender-based violence can include severe and long-term effects not only on a victim's physical health, but also on their mental health. Victims are often driven into isolation due to shame and stigma or fear of rejection and reprisals. This often leaves victims with no means of subsistence. Raising awareness and preventing SGBV, protecting the victims and providing comprehensive responses to their needs is a critical humanitarian concern.

Success in increasing public awareness about SGBV has been accompanied by significant progress in a number of areas. A considerable amount of work has been carried out and progress made since 2015 by States and National Societies, together with the IFRC and the ICRC, in strengthening SGBV prevention and response. Knowledge and awareness of SGBV in armed conflict, disasters and other situations of violence has increased significantly across the board. Important steps have been taken to strengthen regional frameworks and national implementation. Tools and training materials have been developed and rolled out for government officials, the military, the police and the judiciary as well as for Movement staff and volunteers in order to disseminate information and raise awareness about the need to prevent and respond to SGBV across the globe.
Selected key achievements

Policy and legislative changes

- Three important documents were adopted. In 2018, the ICRC adopted its first Strategy on Sexual Violence (2018–2022) and the IFRC its Policy on Prevention and Response to Sexual Exploitation and Abuse. In January 2019, the ICRC adopted the Code of Conduct Policies –Prevention of and Response to Sexual Misconduct, Fraud and Corruption, which covers sexual exploitation and abuse. Some dedicated human resources for SGBV and Prevention of Sexual Exploitation and Abuse (PSEA) have been put in place at ICRC and IFRC Secretariat headquarters and field structures.
- Through its Disaster Law Programme, the IFRC Secretariat works globally with National Societies to include prevention of and response to SGBV in disaster laws and policies. In 2017, a global study was conducted and country case studies were undertaken in Ecuador, Nepal and Zimbabwe in collaboration with the National Societies of the respective countries.
- States have invested considerable efforts in working on legal and policy frameworks. Several States have worked with and supported United Nations (UN) Security Council Resolution 1325 on Women, Peace and Security.
- In particular, the Czech Republic reviewed its national laws concerning the criminalization of SGBV during armed conflict or in the aftermath of disasters and other emergencies.

Prevention activities

- The Movement has the added value of working closely with and understanding weapon bearers, which enables collaboration on preventing sexual violence in conflict. Through bilateral and confidential dialogue, based on analysis of the context, the ICRC sought to help weapon bearers and other key stakeholders to identify patterns of violations and to adopt and implement relevant measures to address these harms.
- Community-based violence prevention activities have been a major focus for a number of National Societies. They include raising awareness of what SGBV is through radio shows, school awareness campaigns and going door-to-door to speak with communities. The Lao Red Cross, the Nepal Red Cross Society and the Burundi Red Cross are some of the National Societies who are carrying out pioneering activities in this field.

Response activities

- The ICRC has a multidisciplinary and holistic response to sexual violence in armed conflict. It strives to ensure that survivors have access to all necessary services, that communities and individuals strengthen their resilience and that future occurrences are prevented as far as possible. The ICRC has worked to integrate this approach throughout its operations with a particular focus on 14 priority contexts.
- A number of National Societies provide psychosocial support services to victims and survivors of SGBV. The Danish Red Cross and the German Red Cross, for example, have been providing such services in their migration response operations.
Capacity building

- Despite limited resources, the Movement has come a long way in its SGBV work, to a large extent because of good internal coordination and collaboration. The Global RCRC SGBV Working Group, established in the run-up to the 32nd International Conference and including the ICRC, the IFRC Secretariat and National Societies, has been essential in developing training materials, tools and Movement-wide guidelines and indicators for monitoring, jointly organizing training and sharing good practices.

- In collaboration with the Geneva Centre for Education and Research in Humanitarian Action, both the ICRC and the IFRC Secretariat have developed materials and training activities on SGBV. The ICRC has offered seminars internally on sexual violence during armed conflicts and emergencies and provided in-depth briefings for more than 20 of its delegations.

- The IFRC Secretariat has developed a number of reports, tools and training activities. Among the most notable are the Minimum Standards for Protection, Gender and Inclusion in all sectors of emergency work, and the Joint Action for Prevention and Response to Sexual and Gender-based Violence: Training Curriculum and Supporting Documentation.

- Since 2015, the Australian Red Cross has supported the deployment of five protection, gender and inclusion (PGI) specialist delegates to Nepal, the Philippines, Lebanon and Europe and funds three other PGI delegates in Bangladesh and Indonesia. Currently, the Australian Red Cross has 15 specialist PGI delegates on the deployment roster.

- The Armenian Red Cross Society has provided training on SGBV to 500 displaced persons and refugees and 350 representatives from other organizations, and 110 young people have participated in the winter and summer schools on gender equality and SGBV.

- The Nepal Red Cross has trained more than 5,000 personnel in PGI, carried out research on existing national laws and policies on SGBV and completed 754 violence prevention community sessions benefitting a total of 11,362 Nepalese people (2,789 male and 8,573 female.).

- The United Kingdom (UK) has trained over 17,000 military and police officers on sexual violence, and its team of experts has been deployed over 85 times.

- The South Sudan Red Cross Society has completed 1,561 awareness sessions on SGBV, reaching 83,067 people (56,319 female and 26,748 male) and conducted a series of training sessions (SGBV, clinical management of rape, case management and psychosocial support services).

Nepal Red Cross female staff and volunteers held discussions to identify the specific post-disaster needs of women and persons with disabilities. The targeted cash grant provided by the Nepal Red Cross has allowed Renuka to establish a small business making clothes in her home, building on her existing skills and helping her to recover from the disaster so that she can gain greater economic security and support herself. In Renuka's own words:

“This support – to women like me – has strengthened us and boosted our confidence; it has improved my life after the earthquake and allowed me to make a living and also provide a service to the community.”
— Renuka, 54 from Nepal

“I am happy to have received this training as I will now be able to handle survivors and other patients with care. I remember once attending to a survivor who became pregnant as a result of rape and did not want to disclose this to her family for fear of being the cause of inter-clan clashes as she knew the perpetrator very well. When I tried to gather more information, she was not willing to talk, so I got annoyed and sent her away to be attended to by a midwife. Now I am confident that I will be able to serve them well and with compassion.”
— Health-care worker in South Sudan.
Main challenges

- The resolution adopted at the 32nd International Conference and the Movement’s commitment to prevent and respond to SGBV should be further disseminated. Limited understanding of SGBV as a widespread problem that is exacerbated in armed conflicts, disasters and other emergency situations remains a challenge.
- Ensuring a complementary Movement approach to the implementation of the resolution and actions around SGBV prevention, mitigation and response also remains challenging, and efforts in this respect must be strengthened.
- There is a need to increase the number of volunteers with sufficient training in gender-sensitive and non-accusatory behaviour and survivor-centred approaches.
- Most existing SGBV resources focus on armed conflicts, disasters and emergencies in developing contexts. This means there are limited tools to guide best practice approaches in emergencies in more developed contexts.
- The demand for training and capacity building is still very high. Some National Societies are unaware of the existing training materials, and National Societies who have heard about existing training activities and materials are frustrated about the limited resources and expertise and the lack of availability of materials in the languages needed.
Resolution 4 – Health Care in Danger: Continuing to protect the delivery of health care together

Health Care in Danger (HCiD) is an initiative of the ICRC and the wider Movement aimed at addressing the issue of violence against patients, health workers and medical facilities and transports and ensuring safe access to and delivery of health care in armed conflict and other emergencies. Launched in 2011, this work extends over three distinct but interconnected areas: the operationalization of practical measures to protect health care from violence and attacks, the mobilization of global and local communities of concern and the generation of evidence to steer and evaluate these efforts.

Between 2015 and 2017, the ICRC documented 1,261 violent incidents against health care in 16 countries experiencing armed conflict or other emergencies. Doctors, nurses, ambulance drivers, paramedics, hospitals, health centres and even the wounded and sick have all come under attack in such situations. This violence disrupts the health-care system when people need it most. Entire communities are cut off from vital services, such as maternity care, child care and vaccinations. Violence against health-care workers, facilities and vehicles is therefore a humanitarian issue with widespread and long-term effects.

Selected key achievements

Consolidating and improving field practice and national response

Practical measures have been implemented by the Movement components, in cooperation with other relevant stakeholders around the world, with the aim of addressing different aspects of violence against health care:

- Improving the systems and mechanisms in place to collect information about incidents of violence against health care (e.g. Colombia, Spain)
- Improving respect for the protection of health care by weapon bearers (e.g. Lebanon, NATO, the Philippines)
- Increasing skills for the prevention and management of violence by health-care personnel through relevant training (e.g. Peru, Brazil)
- Improving security for medical transport through training and the implementation of context-specific operating procedures (e.g. Libya, Syria, Pakistan, El Salvador)
- Improving the security and preparedness of health facilities (e.g. Pakistan, Lebanon, Palestine, South Sudan)
- Enhancing the respect of the general public for health services (e.g. South Sudan, the Central African Republic, Iraq, Libya).
- Research on patterns of violence against health care in partnership with national public health experts (e.g. Pakistan, Nigeria, Brazil)
- In Nigeria, the bill on the compulsory treatment of gunshot victims was passed by Parliament in 2016 and assented to by the President in 2017. The bill establishes the right of every person with a gunshot wound to be treated and guarantees access to immediate and adequate treatment. The disclosure of confidential medical information constitutes a criminal offence and is punishable by imprisonment or a fine.
Mobilization of global and local communities of concern

- Efforts have been made to ensure that responding to violence against health care remains high on the international agenda, as reflected by the adoption of UN Security Council Resolution 2286 on the protection of civilians and the Resolution of the World Health Assembly on the Global strategy on human resources for health: Workforce 2030.
- Closer cooperation between the Movement, health authorities and professional health-care organizations (community of concern) at the global level has been translated into context-specific initiatives addressing violence against health care at the national and local level, e.g. the adoption of an interinstitutional cooperation agreement between ambulance and pre-hospital care providers in El Salvador.
- The topic of Health Care Delivery in Armed Conflict was included in papers on the Promotion and Implementation of International Humanitarian Law, prepared by the British Red Cross and the ICRC for consideration at both the Commonwealth Law Ministers Meeting (16–19 October 2017) and the Commonwealth Senior Officials of Law Ministries Meeting (1–3 October 2018).
- The first cooperation initiative between the Belgian Red Cross and the medical component of Belgium's Defence Forces took place in November 2018. It involved the Belgian Red Cross providing an IHL module, including a section on the rights and responsibilities of medical personnel and the challenges faced in the protection of medical personnel, for several groups of commissioned and non-commissioned officers of the medical component of the Belgian armed forces.
- The Alliance for Health Security Cooperation is a platform for cooperation co-chaired by Finland and Australia. It aims to facilitate the mobilization of technical and financial resources and knowledge exchange among countries, international organizations, financial institutions and non-governmental organizations (NGOs) and the discussion of topics such as the health workforce and the role of communities in all hazards. There are currently 73 members in this network.
- Switzerland and Canada established an informal group of States, with the ICRC, the World Health Organization (WHO) and Médecins Sans Frontières (MSF) as observers, on the topic of implementation of UN Security Council Resolution 2286 on protection of the wounded and sick, medical personnel and humanitarian personnel in armed conflict. This group aims to build momentum in this area following the adoption of Resolution 2286, including through the exchange of best practice and information on this subject.
- HCID regional meetings were organized by the ICRC and brought together Movement components and community-of-concern partners, with the purpose of sharing challenges and good practice. These meetings were held in Asia and the Middle East in 2019. Further meetings will follow in the Africa and Americas regions during 2020.

Raising public awareness on violence against health care

- Since 2015, the Movement has prioritized national and local campaigns aimed at raising public awareness to complement other measures. The focus of these campaigns has evolved to include promoting behavioural change, as in the case of Pakistan, Iraq, Lebanon and El Salvador.
- In May 2018, a global awareness-raising video clip was released by the ICRC highlighting the difficulties faced by a father trying to get health care for his injured daughter, after the hospital had been bombed. As at July 2019, it had been viewed some 235,000 times on YouTube. Many National Societies have contributed to this number of views.
Glimpses of hope: Engaging with the community on violence against health care in the Central African Republic

The ICRC launched a new, intensive Health Care in Danger campaign in May 2018. The big push for this campaign was sparked by a serious security incident on 1 May 2018 at Bangui Community Hospital, where an ICRC surgical team was based. A crowd of several hundred people – some armed – stormed the hospital looking for patients who had been brought in earlier that day after an attack on the Notre-Dame de Fatima church. The health workers should have been able to perform their duties in safety, but the crowd put everyone at risk, including the patients, the ICRC team and the entire hospital staff. One person accompanying a patient was killed.

As a result of the incident at the hospital, the ICRC teamed up with the Ministry of Health and other medical providers, such as MSF. It is not easy to convince people – from the general public to weapon bearers – that everyone who is wounded or sick must be treated based on need alone, without discrimination or regard for whose side they are on. Many people do not understand this principle properly, and some do not trust the motives and intentions of organizations who offer medical services. The main objective of the campaign was therefore to raise awareness of the critical role that health-care services – including medical facilities, staff, vehicles and patients – play during periods of armed conflict and of the importance of ensuring that the delivery of these services is not hindered. The campaign approached influential people and organizations in the community, such as women's and youth organizations, community and religious leaders, the representatives of Bangui neighbourhoods and a group of eight legislators. The ICRC also redoubled its awareness-raising efforts with weapon bearers and conducted sessions with young people who had erected the barriers.

El Salvador: Safeguarding health care despite invisible barriers

El Salvador is affected by high levels of armed violence that, as well as having high social and economic costs, are also seriously affecting health-care services, whether delivered by the Salvadorean Red Cross Society or by the public or private sector. To respond to this situation, the National Society brought together representatives of different health-care providers in the country, who initiated the development of an interinstitutional agreement for the coordination and safe delivery of emergency pre-hospital care. The agreement, signed on 30 May 2016 and subsequently adopted as a law, provides a set of rules and regulations for health institutions to improve coordination and minimize security risks. Another practical result of this process was the development of an incident reporting tool, which was also spearheaded by the Salvadorean Red Cross.

Iraq: National campaign to increase respect for health staff

In November 2018, the ICRC, in collaboration with the Ministry of Health, telecoms companies and major TV channels, among others, launched a multifaceted public campaign on Health Care in Danger. The campaign, which utilized both traditional (e.g. cinemas) and social media, was aimed at increasing respect for health-care personnel among the general public. Several videos with prominent public figures (TV anchor, footballer, actress, etc.) helped get the message across. The campaign prompted a series of high-level policy decisions by the Iraqi Ministry of Health aimed at improving respect for and access to health care in the country.

Norway: Working together to better protect health care

The Norwegian Red Cross is one of the National Societies that has extensively supported sister National Societies in the Americas (e.g. in Colombia, Honduras and El Salvador), in the Middle East and North Africa (e.g. in Libya, Lebanon and Iraq) and in Asia (e.g. Afghanistan) in developing practical measures to respond to violence affecting health-care providers in these countries. A variety of measures was implemented at the local and regional levels, including promotion of the manual of the medical mission in Colombia, development of practical guidelines for health-care personnel in Honduras and development of risk analysis and the Code of Conduct for health services of the Libyan Red Crescent. Thanks to this cooperation, National Societies from the Americas and the Middle East and North Africa regions met to exchange their practices for ensuring the security of ambulance services and patients using them. Peer cooperation between the National Societies in the Americas paved the way for the organization of regional meetings with the participation of the Ministries of Health of the relevant countries. The Norwegian Red Cross has also been leading Community Action for Ambulance and Pre-hospital Care Providers in risk situations open to practitioners from all over the world. The experience
of working with National Societies overseas has also enabled the Norwegian Red Cross to bring some of these experiences back to Norway and share them with relevant actors within the health-care sector.

**Italy: Violence against health care is also happening here**

In February 2019, the Italian Red Cross launched a high-visibility campaign on the protection of health care. A multimedia campaign under the motto *Non sono un bersaglio* (I am not a target) aimed to highlight the violence affecting health-care services across Italy with an ambitious plan to reach all health-care establishments across the country with its materials. The Italian Red Cross used the campaign as a platform to simultaneously highlight the plight of health-care workers in conflict-affected countries.

**Main challenges**

- Translating commitments expressed by different stakeholders at the global level into more concrete and tangible initiatives at the national level remains challenging.
- A need remains for cross-sector collaboration to ensure that initiatives are coherent, sustainable and practical enough to work. In addition, in most cases, no single group has enough influence to promote the necessary changes. Broader coalitions, whether formal or informal in nature, are needed.
- Bringing together various domestic initiatives under a common national plan of action to prevent and address violence against health care remains challenging.
Resolution 5 – The safety and security of humanitarian volunteers

The worldwide humanitarian response is largely attributable to the devotion and courage of our Movement staff and volunteers, many of whom willingly risk their own physical and psychological well-being in order to help others. The role of local volunteers in complex environments has been steadily increasing in recent years, and at the same time hundreds of humanitarian workers are killed, wounded and kidnapped every year. There is never a full guarantee of safety and security when providing humanitarian assistance and protection in inherently challenging and dangerous contexts. However, actions and measures to improve the safety and security of humanitarian volunteers help reduce or mitigate the risks they may face. According to the Aid Worker Security Database, there was a 30% rise in fatalities in 2017 as compared to the previous year. A total of 139 aid workers were killed and 174 were kidnapped or injured in serious attacks in 2017. More than 500 National Society staff and volunteers have been killed in the line of duty since 1994. From 2016 to 2018, a reported 60 staff and volunteers of National Societies were killed while on duty.

Progress has been made since 2015 by States, National Societies, the IFRC and the ICRC to address the safety and security of humanitarian volunteers. The work carried out can be summarized under four themes: 1) determination to protect, where notable progress has been made in providing volunteers with psychosocial support; 2) enhancing knowledge, where increased efforts and progress have been made in advancing research, deepening knowledge and creating evidence to inform current and future activities related to the safety, security and well-being of volunteers; 3) enhancing understanding, where an alliance of National Societies for volunteering development was launched in 2017, focused on identifying, sharing and replicating promising volunteering practices; and 4) ensuring the safety and well-being of volunteers, where insurance and equivalent safety nets were promoted. Some National Societies have managed to put in place local solutions to ensure their volunteers receive compensation in the event of accident or death.

Selected key achievements

Psychosocial support (PSS) for volunteers

- Several National Societies have taken crucial action to provide their volunteers with PSS. In the different responses to Ebola in the Democratic Republic of the Congo (DRC), Guinea, Liberia, Sierra Leone and Burundi and in the response to the Easter Sunday attacks in Sri Lanka, efforts and progress have been made to provide volunteers with access to psychological first aid and psychosocial support.

- The Sudanese Red Crescent established a PSS system with the support of the IFRC's Reference Centre for Psychosocial Support and the National Societies in Denmark and Sweden.

- The Swedish Red Cross established phased training for volunteers, combining e-learning, physical learning opportunities, external referral mechanisms and internal follow-up to systemize and institutionalize PSS for volunteers.

- A pop-up innovation lab on psychosocial support for volunteers was organized by the Volunteering in Conflicts and Emergencies (ViCE) Initiative. Volunteers are key humanitarian actors in conflicts and emergencies, but we know very little about their experiences and needs, the challenges they face and what can be done to support them. This gap in understanding means we are poorly equipped to protect, promote and recognize volunteers working in conflict and emergency contexts. ViCE aims to address this gap. The initiative was hosted by the IFRC Reference Centre for Psychosocial Support in 2018. Participants were drawn from the National Societies in Canada, Lebanon, Mali, Philippines, Sweden and Ukraine as well as Northumbria University (UK) and Trinity College (Ireland). The participants developed solutions to issues related to access by volunteers to PSS and created an increased understanding and awareness of the question.

Policy and legislative changes

- Several National Societies have been instrumental in their countries in facilitating the emergence of legal, social, economic and cultural environments that can facilitate safe and secure volunteering experiences. The Kenya Red Cross Society has recently worked with the government, UN Volunteers (UNV) and other volunteer-involving organizations in Kenya and has founded the Volunteer-Involving Organizations Society. As a government-recognized organization, they have worked to influence the government to improve volunteering policy and laws in the country.
**Safer Access Framework (SAF)**

- Since the launch of the Safer Access Framework guide for National Societies, much has been accomplished both at ICRC headquarters and in the field. In all, over 50 awareness, assessment and planning workshops were conducted and plans of action for National Societies developed, a pool of more than 30 SAF workshop facilitators from the different Movement components was created and peer-to-peer National Society exchange platforms were established, involving round-table discussions, webinars and peer-exchange visits.
- The VIce Initiative, led by the Swedish Red Cross and the Centre for International Development at Northumbria University (UK), worked with National Societies in Afghanistan, Honduras, Myanmar, South Sudan, Sudan and Ukraine to gather data on the experiences of local volunteers in conflicts and humanitarian crises.

**Volunteering Plan of Action**

- The IFRC developed a Volunteering Plan of Action to be driven by an alliance of National Societies across all five regions. The Plan of Action is facilitating mechanisms to ensure the safety and well-being of volunteers. A significant element of the Volunteering Plan of Action was the development of a Federation-wide Volunteer Charter, which was adopted at the General Assembly in 2017.
- The “Stay safe” volunteer security e-learning course has been completed by around 150,000 staff and volunteers from more than 150 National Societies in the past few years.

**Afghan Red Crescent Society**

Abdul Fatah is a 27-year-old volunteer with the Afghan Red Crescent Society. Abdul worked for the National Society as a volunteer from 2013 to 2018 and, thereafter, as a disaster management officer. He finds volunteering a very satisfying experience. According to Abdul, he and his colleagues face a lot of difficult situations in their daily work. He recalls a recent incident:

“In 2019, the branch driver and I collected a dead body and travelled from Ghazni city to Qarabagh district, which was our destination. When we arrived in Qarabagh, the armed Group arrested me and asked the driver to take the dead body to another district which we were prohibited from entering. They then warned the driver that, until the dead body was taken to the destination that they had specified, I would be kept in custody. I was held for twelve hours and was beaten and threatened with death. They released me around midnight after our driver delivered the dead body to the destination which they had specified. These situations are difficult to manage in an emotional sense. Fortunately, however, before this incident, I had received psychosocial support training. I attempted to manage my stress by taking deep breaths, minimizing the problem in my mind and talking to the armed Group and explaining to them who the Afghan Red Crescent is, what activities we carry out and how we assist people in need”.

Abdul is very thankful for the PSS he received from the ICRC and the Danish Red Cross.

“After the incident, I received three more psychosocial support training sessions supported by the ICRC and the Danish Red Crescent. This will help me cope in the face of critical incidents such as this, especially the individual psychological first aid, peer-to-peer support, buddy system and stress management as self-care.

Before, when I had to go into the field to assist victims of the conflict, I had a fear of being mentally traumatized by the affected people and the dead bodies. Now, I have learned how to apply psychosocial support methods to care for myself and to support colleagues.”
Sri Lanka Red Cross Society

Thirty-seven-year-old Kandumany Vishvanath has been a volunteer with the Sri Lanka Red Cross for 15 years. He recalls what happened on Easter Sunday, 21 April 2019.

“I was at the Revival Christian Church about two kilometres away from the Zion Church, participating in Easter Sunday prayers when the blasts took place. Immediately after hearing news of the incident, I was called by my branch executive officer and rushed to the Zion Church. It was difficult to enter the church as dead bodies were being moved and the injured were being transported to hospitals. Seeing the chaos, I started helping others to transport all the victims to the hospital. After all the injured were en route to the hospitals, I myself rushed to the hospital to see how I could help there. As soon as I arrived, I was informed that a huge amount of blood products was needed. At that moment, I met Mr Jenivan who was with the victims, helping the medical staff. Mr Jenivan is in charge of the Youth Association in our Church, and I informed him that the hospital was in need of blood. Mr Jenivan acted immediately and, as a result of his quick thinking, a group of 25 of his friends came at once to donate blood. In addition, many others came forward in great numbers to donate blood in the days that followed. Mr Jenivan also assisted the authorities in identifying dead bodies and the injured to give information to the relatives of victims. A week later, Mr Jenivan joined the Sri Lanka Red Cross as a volunteer as supporting the victims during the incident had given him great satisfaction.”

The last psychosocial programme to be implemented by the Sri Lanka Red Cross was a post-conflict PSS programme that was financially and technically supported by the Danish Red Cross in 2009. Unfortunately, after 2009, the National Society no longer had the required technical know-how. As a result, during the past decade, psychosocial support was not prioritized in any of its major disaster responses. However, this all changed after the Easter Sunday bombings, which are considered a “collective trauma event”. The violence has directly affected countless bystanders and support workers in Colombo, Gampaha and Batticaloa, and it has indirectly affected the entire population of Sri Lanka, leaving a grave psychosocial impact across the social ecology. Having recognized the psychological toll of the event and the deficit in in-country technical knowledge, the Sri Lanka Red Cross took immediate action to build up the capacity of its staff and volunteers in the affected areas, seeking the support of a Regional Disaster Response Team (RDRT) with PSS expertise to train its volunteers. As a result, 60 volunteers, 20 in each affected district, were trained in providing psychological first aid (PFA), making referrals and organizing PSS activities in schools and communities. In addition, a technical advisor from the IFRC Reference Centre for Psychosocial Support, attached to the Danish Consulate, arrived in Sri
Lanka for a short visit to help survivors. She assisted in training and debriefing the volunteers. One of the key initiatives that the National Society incorporated into the programme was “care for caregivers”, under which volunteers are provided with PSS and periodic debriefing sessions are conducted in the field. In order to ensure the minimum required level of PSS knowledge, the Sri Lanka Red Cross trained its first aid trainers in PFA.

Mr Vishvanath says, “I am very happy to provide this service as most of the affected people are in need of it. We have come across victims unable to go to sleep, deeply affected by the loss of their loved ones, and some children unwilling to go to school. With the knowledge I gained during the training sessions, I feel confident that I am able to listen to the worries of the victims and guide them through the process.”

Main challenges

- It is of utmost importance to understand that volunteering is not resource-free; resources are very much needed to sustain the network.
- A baseline measurement of volunteer security and access should be recorded, and improvements measured to address the lack of volunteer data management skills and facilities.
- Limited availability of financial and human resources negatively impacts the safety and security of volunteers.
- In highly operational contexts, certain National Societies prioritize the operational response over the Safer Access Framework.
- Longer-term planning is required to carry out work under the SAF. Most of the processes should be linked through longer-term National Society organizational development work.
Resolution 6 – Strengthening legal frameworks for disaster response, risk reduction and first aid

Strong legal and normative frameworks for disaster response, risk reduction and first aid are indispensable tools for making communities safer, by organizing rapid relief and ensuring full and equitable recovery from disasters.

A lot of work has been completed during the past four years by National Societies and the IFRC to develop greater capacity and tools for work in disaster law, provide technical advice and tools to support States in the development and implementation of domestic laws, policies and/or procedures, provide legislative advocacy support to influence the outcomes of inter-governmental, inter-agency and academic fora, build greater visibility and partnerships and produce high-quality research that informs legislative advocacy.

Selected key achievements

- New policy instruments drawing on the recommendations of National Societies and the IFRC have been adopted in five countries (Costa Rica, Honduras, Indonesia, Panama and Samoa).
- Eighteen legal drafting procedures are currently being supported by the IFRC in Bhutan, Costa Rica, Dominica, Fiji, Laos, Malawi, Mongolia, Nepal, Panama, Peru, South Sudan, Sudan, Tokelau, Tonga, Tuvalu, Uganda and Vanuatu, as are the Andean Committee for Disaster Prevention and Response (CAPRADE) Guidelines, which are expected to be adopted in 2019 or 2020.
- Thirteen National Societies have better defined auxiliary roles in draft or new national laws and policies: Argentina, Bhutan, Indonesia, Kiribati, Laos, Malawi, Mongolia, Nepal, Samoa, South Sudan, Tonga, Uganda and Vanuatu.
- Twenty National Societies are engaged in legislative advocacy activities with the support of the IFRC Disaster Law Programme, including on international disaster response laws (IDRL) and disaster risk reduction (DRR).
- Over 1,850 people were trained in the auxiliary role, disaster law and legislative advocacy in 25 countries. In addition, 1,263 people completed the new online module on Law and Disaster Risk Reduction.
- Over 25 inter-governmental, inter-agency and academic fora actively engaged on legislative advocacy issues with IFRC and National Society influence. This includes the organization of two regional conferences “Legislating for Climate-Smart Disaster Risk Management” held in the Pacific and Latin America.
- In addition to progress at the national level, many regional organizations have utilized the IDRL Guidelines in developing or strengthening their regional frameworks and mechanisms for disaster management. The implementation of these regional frameworks is expected to result in continued progress at the national level, as States amend their rules and procedures to align with them.
Regional perspectives

Africa
- The African Union (AU) has been engaged in the development of a model IDRL law that can be adopted by member States and adapted to their national circumstances, in line with the AU's objectives under the African Union Humanitarian Policy Framework and the Common African Position (CAP) on Humanitarian Effectiveness. The theme of disaster law, including IDRL, has also been included in the AU Humanitarian Law and Policy Training curriculum since 2018.
- In a side event titled “Law and DRR” in the margins of the Afro-Arab DRR Platform in October 2018, participants discussed climate-smart disaster risk management laws and policies and their impact on improving the preparedness and climate change adaptation capacity communities can have. The “Tunis Declaration on accelerating the implementation of the Sendai Framework for Disaster Risk Reduction” and the "Joint Communiqué" recognized the importance of legal frameworks for DRR.
- At the sub-regional level, the Economic Community of West African States (ECOWAS) developed a Disaster Risk Management Handbook and training/capacity building exercises for member States. The Plan of Action of the ECOWAS Humanitarian Policy (2018–2022), which focuses on strengthening the legal framework for disaster management, and Strategic Objective 1 of the ECOWAS Humanitarian Policy also highlighted the importance of disaster law.

Americas
- In the Caribbean, a regional consultative meeting on "Options to Accelerate Progress in Resolving Regulatory Problems in International Disaster Response Operations" was held in 2016 under the auspices of the Caribbean Community (CARICOM) Caribbean Disaster Emergency Management Agency (CDEMA) and within the framework of its Technical Advisory Committee Assembly. Bringing together representatives from 18 governments, disaster management agencies, National Societies and the UN, it recognized the need to enhance the Regional Response Mechanism (RRM) by ensuring a stronger IDRL perspective.
- In 2017, an agreement and a landmark procedure were adopted to facilitate the shipment by land, transit and receipt of disaster relief across the region, representing a step further towards a more comprehensive legal and institutional framework for international disaster relief in Central America.
- In North America, Mexico, the United States of America and Canada, together with their respective National Societies, have participated in the North American Humanitarian Response Initiative (NAHRI) to improve the effectiveness of cross-border response to a potential catastrophic disaster in North America.
- In South America, the Andean Community initiated in 2018 the revision of its CAPRADE Guidelines on International Cooperation for Humanitarian Assistance among Andean countries (Manual CAPRADE para la Cooperación Humanitaria Internacional), using the recommendations set out in the IDRL Guidelines.

Asia Pacific
- Over the course of 2017, an initiative was undertaken in partnership with the Association of
Southeast Asian Nations (ASEAN) to examine the national implementation of the ASEAN Agreement on Disaster Management and Emergency Relief (AADMER) across the ten ASEAN member States. The research looks at domestic disaster preparedness and response laws and policies, and an online portal was created providing easy-to-access information.

Central Asia
- In 2017, the Center for Emergency Situations and Disaster Risk Reduction (CESDRR) in Central Asia moderated a two-day disaster law consultation meeting in Almaty, Kazakhstan. High-level representatives from the National Societies and the national authorities of four Central Asian republics (Kazakhstan, Kyrgyzstan, Tajikistan and Uzbekistan) came together to discuss disaster law developments and future plans.

Europe
- In 2019, the Evaluation of Humanitarian Logistics within EU Civil Protection and Humanitarian Action by the Directorate-General for European Civil Protection and Humanitarian Aid Operations (ECHO) referenced the IDRL Guidelines as a good tool for tackling the regulatory problems burdening international operations. The evaluation calls for a partnership with the IFRC Disaster Law Programme to assist affected governments in more effectively addressing the importation of humanitarian goods.

Middle East and North Africa
- The Gulf Cooperation Council (GCC) and the Qatar Red Crescent Society developed the GCC IDRL Manual, launched at a Disaster Law Expert Meeting held in Doha in 2016. This IDRL Manual, which had been in the making for several years, provides guidance on the facilitation and regulation of international humanitarian assistance to GCC member States.

Malawi Red Cross Society

Following the adoption of the IDRL Guidelines at the 30th International Conference, the Malawi Red Cross advocated with its government for a legislative mapping process to analyse its national legal framework for responding to disasters requiring international support.

In 2013, the National Society led an IDRL project, together with the Department of Disaster Management Affairs (DoDMA), bringing together the key governmental entities and humanitarian actors in the country to review its legal framework for international disaster response and look at the main challenges, gaps and strengths using the IDRL Guidelines as a benchmark. As a result of the project, a report on legal preparedness for regulatory issues in international disaster response was produced in 2015, which includes key recommendations to improve Malawi’s legal framework: [http://www.ifrc.org/docs/IDRL/MalawiIDRL%20Report%20Draft%20LR.pdf](http://www.ifrc.org/docs/IDRL/MalawiIDRL%20Report%20Draft%20LR.pdf).

In accordance with the 32nd International Conference resolution on disaster law, the National Society, as an expert on this subject in the country, offered to provide technical support to the government in implementing the IDRL report recommendations in order to enhance the legal framework in Malawi for the effective management of international assistance in major disasters. In this regard, the Office of the Vice President, through the DoDMA, requested the support of the National Society in 2018 to include the IDRL recommendations in the revised disaster risk management (DRM) bill. The National Society, jointly with the DoDMA, constituted a task force to review the IDRL report recommendations and revised the draft DRM bill which features an "international assistance" section under Part IX (Sections 73–78).

Operations Guidelines were developed to complement the DRM bill and form an integral part of it. They include a section (6.6) on International Disaster Risk Management Assistance (pages 53–59), into which the key IDRL recommendations have been incorporated.

As next steps, the National Society will support the Office of the President by engaging in advocacy with Parliament for the adoption of the bill. Once the bill has been passed, the National Society will support dissemination at all levels.

Prisca Waluza Chisala, Director of Programmes at the Malawi Red Cross, explains the importance of the bill:

“The bill has now been approved by the Cabinet and will be presented to the members of Parliament for discussion and adoption. This is a major turning...”
point in enhancing the legal framework in Malawi to deal effectively with international assistance in major disasters. In the event of a disaster, the country will be ready to face it with a proper legal framework for international assistance, the clearance of goods, etc.”

Fiji Red Cross Society

In 2017, the government of Fiji, the Fiji Red Cross and the IFRC signed a tripartite agreement to work together on the revision of the Disaster Management Law and National Disaster Management Plan for Fiji. Tropical Cyclone Winston highlighted many gaps in the institutional framework for DRM in Fiji. Since that time, the IFRC has been providing technical support, working alongside the government to run public and technical consultations on the new institutional framework (law and plan) for Fiji.

According to Fiji’s National Disaster Management Office (NDMO), the support of the IFRC and the Fiji Red Cross in its law review process has strengthened partnerships with faith-based organizations, private-sector banks, the business community and other government agencies. The NDMO is now more closely involved in search and rescue operations which fall within the remit of Fiji’s Maritime Safety Authority. The NDMO is also involved in the annual emergency exercise for the country’s Civil Aviation Authority and has identified a number of government agencies that require assistance in formulating evacuation plans, e.g. Immigration, Department of Environment and Ports Authority. The NDMO observes that its staff are now more familiar with relevant regional agreements and national laws and policies. The disaster law work of the National Society and the IFRC has also supported capacity building within the NDMO, strengthened cluster working arrangements at both national and sub-national level and strengthened coordination among NGOs and civil society organizations (CSOs).

Main challenges

- Political factors extraneous to the content of new disaster legislation and rules often block or delay acceptance.
- Investments in capacity building and training for public authorities and National Society staff often do not produce direct results for a long period of time.
- National Societies are not always comfortable with engaging in legislative advocacy and support for legislative changes or feel they lack the specific expertise required.
- National Societies are often very busy with operational priorities, and working on long-term legislative advocacy does not feature on their priority list.
- Lack of funding at global or regional level often prevents the IFRC from meeting requests for support on disaster law from governments and National Societies.
- The unwillingness of some governments to make laws that introduce compulsory first aid training, because it might increase driver’s license fees, is a barrier to furthering commitments under the resolution.
Resolution 7 – Strengthening the International Red Cross and Red Crescent Movement response to growing humanitarian needs

In a complex, turbulent and politicized humanitarian landscape, the Movement strives to prevent and alleviate human suffering. With humanity, impartiality, neutrality and independence as the bedrock of its work, the Movement consistently demonstrates the application of its Fundamental Principles on the ground.

Selected key achievements

Principles and Rules for Red Cross and Red Crescent Humanitarian Assistance
• The Principles and Rules for Red Cross and Red Crescent Humanitarian Assistance have been integrated into all IFRC disaster management training, e.g. emergency response unit (ERU), field assessment coordination team (FACT) and team leader training, and an e-learning module is available. Over 4,587 people have signed up for the e-learning course, and more than 2,538 have completed it. In 2016, 2017 and 2018, seven emergency team leader training courses and five FACT training courses were completed, and 159 new FACT members were included in the FACT roster.
• A total of 100 International Mobilization and Preparation for ACTion (IMPACT) training courses have taken place in the past four years in different locations around the world. IMPACT is a specialized, high-level training course for those to be deployed as delegates in the field for the Movement on long or short missions. The training is organized and facilitated by National Societies, the IFRC and the ICRC. The IMPACT course provides participants with increased knowledge of the different contexts in which the components of the Movement work and the tools available to respond to different emergencies.

Strengthening Movement Coordination and Cooperation (SMCC)
• Movement coordination continues to work well at country, regional and global levels in cases of new emergencies or spikes in protracted crises. For example, large-scale operations in Indonesia (earthquakes and tsunamis) and Mozambique (cyclones) integrated elements of technical and operational complementarity between Movement partners, while a fully joint approach was pursued for the Ebola outbreak in the DRC that spread from zones not affected by armed conflict to zones that were. Recent operations in Cameroon (population movements), Ethiopia (population movements), Afghanistan (drought and flash floods) and Syria were also crafted in a well-coordinated manner, and good coordination continues in situations of protracted armed conflicts, such as those in Yemen and Ukraine.
• For the first time, a Movement coordination officer (MCO) was deployed as part of the response to cyclones Idai and Kenneth in Mozambique. The purpose of the position is to serve the common interests of the Movement in large-scale emergencies, providing support in helping to build an environment that is conducive to efficient and timely coordination of the Movement’s activities.
• In 2018 and 2019, the One International Appeal (OIA) mechanism (according to which one international component of the Movement carries out a funding campaign on behalf of both) was launched for the DRC Ebola outbreak, and there have been several coordinated campaigns (but with separate funding tools), including for Bangladesh, Ethiopia and Mozambique and for Venezuela/Colombia and the region in response to population movements.

Movement logo
• The Movement logo was adopted in 2015 by the Movement and recognized by States at the 32nd International Conference. There are occasions when the Movement needs to speak with one voice and/or fundraise collectively on behalf of affected people, especially during major humanitarian emergencies of global concern. This logo enables the Movement to do so (however, the logo has not yet been used for fundraising initiatives).
• The Movement logo has mainly been used for communication purposes (Red Cross Red Crescent magazine, World Red Cross and Red Crescent Day, Health Care in Danger) and representation purposes (displayed on materials for the Movement’s statutory meetings and for Movement-coordinated participation in events involving National Societies, the ICRC and the IFRC).
• To date, there have been 52 requests to use the Movement logo, of which 22 were approved.
**DRC Ebola response: A pragmatic approach to coordination**

In the DRC, robust communication and a commitment to coordination among the Red Cross Society of the DRC, the IFRC, the ICRC and other Movement partners are essential enablers for the complex collective response to the Ebola outbreak in North Kivu and Ituri provinces. Intensive work at country, regional and headquarters levels has led to complementary functionality and trust on a level rarely seen before. This is an encouraging outcome as the outbreak, in an extremely volatile conflict zone, posed additional challenges for coordination. In this context, it was agreed that the ICRC would act as the operational and security lead while the IFRC would assume the technical lead in the Ebola response in support of the DRC Red Cross. This unprecedented structure was supported by the continued use of an IFRC-led One International Appeal fundraising mechanism – which had originated in an area of DRC not affected by armed conflict – in which Ebola-related ICRC activities were then included.

**The Danish Red Cross and the initiative on Efficiency, Impact and Localization (EIL)**

The Danish Red Cross has contributed to strengthening the bilateral coordination of National Societies by actively participating in and even leading workstreams in the initiative on Efficiency, Impact and Localization of the International Coordination Group (ICG), an informal network of National Societies within the Movement.

**Switzerland's increased support to the Red Cross and Red Crescent and to the International Conference in particular**

Strengthening the Movement response is a priority for Switzerland. The Movement's relevance and strengths and the capacities of the National Societies are supported by advocating for various projects and contributing to them. Switzerland has considerably increased its support to the 33rd International Conference in 2019 in terms of expertise as well as financially. This has enabled the efficient preparation of the conference, closer involvement by National Societies and the use of modern means of communication to reach out to young people.

Switzerland's support to strengthen the capacities of National Societies was implemented through the National Society Investment Alliance (NSIA) Fund. Since 2019, National Societies have been able to benefit from financial support from the NSIA, which is jointly managed by the IFRC and the ICRC. Switzerland is the main donor to the NSIA Fund and has doubled its contribution to the IFRC Disaster Relief Emergency Fund (DREF), a mechanism that helps National Societies to react immediately to emergency needs after a natural disaster.
From pledges to action: Success stories and implementation of International Conference pledges

Pledges are one of the most creative and flexible outcomes of the International Conference. They are an important tool, giving International Conference members and observers the freedom and creativity to make concrete, measurable and action-oriented voluntary commitments on issues of priority for their local, national and regional contexts – or even at the global level. The voluntary nature of pledges allows for more flexibility and adaptability than resolutions do. As a powerful humanitarian diplomacy tool for initiating or advancing dialogue and cooperation among International Conference participants, pledges can lead to concrete action in the interests of the most vulnerable.

A significant amount of work has been conducted by conference participants on the implementation of their pledges, and numerous inspiring stories from around the world were shared and submitted through the International Conference website. The stories featured in this section cover themes other than those of the resolutions outlined in the previous sections of this report and were chosen to provide the reader with an understanding of the voluntary commitments made by conference participants and how they have been translated into action. More reports on pledges are available on the International Conference website.

Pledge: “Youth Engagement for a Better World”
This pledge aimed to create meaningful and sustainable youth engagement in order to strengthen community resilience and support the achievement of the Sustainable Development Goals. It supported the notion that well-educated, empowered and enabled children, adolescents and young adults capable of assessing needs and addressing challenges facing the communities they live in are central to creating a better world.

Sara, one of the volunteers with Danish Red Cross Youth (DRCY), is an inspiration. At the age of 13, Sara was diagnosed with severe depression. In 2018, when she was hospitalized at the age of 20 for this condition, her mother could not cope with the situation. Thus, having to leave home proved to be the turning point in her life, which was dominated by mental diagnoses, medication and homelessness. Luckily, Sara received support from the hospital staff and, once she was out, she joined the DRCY as a volunteer – a role she embraced in order to become the person she yearned to be in a place where she could be an inspiration to others who might be going through difficulties in life, just as she had. Sara currently volunteers at a homework café for children and young people in Copenhagen, supporting their academic and social development. She is also in the process of developing new approaches for the DRCY to increase their support to young people living with mental health conditions. Moreover, Sara has played a major role in the DRCY campaign Geg er ikke min sygdom (My illness doesn’t define me), in which she seeks to challenge the taboos around young people with severe mental conditions. Sara's story has reached more than 500,000 people through various channels, such as performances, radio programmes, TV appearances and podcasts, thanks to her dedication and activism as a Danish Red Cross volunteer.

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The Swiss Red Cross (SRC) Centre of Competence organizes the Young Leaders Forum for all elected youth representatives within SRC member organizations, which aims to promote an exchange of knowledge and best practices and support young leaders in their role as youth representatives. Since 2018, the Young Leaders Forum has met regularly with the Governing Board of the SRC to discuss the youth situation. At the SRC General Assembly in 2019, representatives from the Young Leaders Forum seized the opportunity to express their demands in relation to the SRC's Strategy 2030. They also introduced the winning projects of the first Credit Swiss Youth Award. This award was created to encourage young people to be innovative and assume responsibility in their engagement. The project is remarkable as it promotes genuine social integration and breaks down prejudices and stereotypes.

Pledge: “Building community resilience and contributing to sustainable development by Partners for Resilience”
This pledge highlights the important role of communities when anticipating, preparing for and responding to disasters, and the need to strengthen community resilience. When disasters occur, it is community members, volunteers and local organizations who are the first to respond, regardless of
Through their network of more than 40 local civil society partners in ten countries, they have worked to strengthen the resilience of vulnerable communities by focusing on capacities to pursue dialogues on disaster risk reduction, notably with the inclusion of climate risk management and ecosystem management and restoration, brought together in what Partners for Resilience refers to as “Integrated Risk Management”. These strengthened capacities have been applied in engaging with stakeholders (governments as well as other CSOs and international organizations) to involve them in risk-informed policies, investments and practices. Targeted dialogues have been pursued not only at national level, but also regionally (since many risks materialize across borders, involving multiple countries) and even globally. More specifically, the prominent role of ecosystem management and restoration is a new approach within the Red Cross for working on strengthening community resilience. The uptake of this approach posed challenges for many National Societies and relied to a large extent on expert knowledge from other partners – as was the intention of the alliance. Furthermore, the programme constituted a shift from (exclusively) community-oriented interventions to the use of dialogue to influence policies, investments and practices. This implies a stronger focus on humanitarian diplomacy within the Red Cross and Red Crescent to enable it to better position itself vis-à-vis different stakeholders and their interests while upholding the organization's Fundamental Principles, notably independency and neutrality.

**Pledge: “Productive Protective System” in Haiti**

The “Productive Protective System” is a method newly introduced in Haiti to reduce the population's exposure and vulnerability, which includes the integration of socio-permaculture concepts through measures that directly target the living environment. This system is based on *Terra Preta* hill garden technology and includes other components, such as raised gardens, edible fences, vertical gardens, climbing plants and animal breeding. The plants used are banana, vine, Malabar spinach, leaf cabbage, sugar cane, small fruits, etc. which are almost exclusively perennials. They are managed according to organic models and require only minor maintenance until harvest. Animal protein production (e.g. rabbits in cages) closes the natural cycle of chemical elements. If fully applied, the system results in a shift from simple vegetable gardening to permaculture nano farming. In addition to the nutritional, ecological and economic benefits, the system offers a protection component by integrating local risk mitigation measures (e.g. soil bioengineering). For detailed information, watch the video “Productive Protective System of the Swiss Red Cross”. The combination of production and protection triggers a greater interest in sustainability among the local population. It creates a similar level of ownership and replication as the ongoing soil conservation and organic agriculture measures. The two main disadvantages mentioned by the communities are the need for higher reflective and technical skills for application and the fruiting time which greatly exceeds that of other simple vegetable gardens.

**Pledge: “Resilience building in a changing risk landscape”**

**Forecast-based financing**

Recognizing that climate change, rapid and unplanned urbanization, population growth, disasters and food and water insecurity place more people at risk from crises and that disaster impacts including droughts, floods and extreme temperatures are increasing and hit people in the least developed countries and in fragile contexts hardest, the Danish government has supported the Danish Red Cross in its efforts to explore options for identifying and developing an innovative humanitarian financing mechanism that provides for a gradual release of humanitarian funds as forecasts show an increasing likelihood of disaster (forecast-based financing).

The Danish government supports the Danish Red Cross's initiatives to further develop forecast-based financing (FbF) and has agreed to allow a larger part of government funds to be disbursed based on FbF. The Danish Red Cross participates in global dialogue platforms on FbF and has developed and promoted the FbF approach in five additional countries (Malawi, Mali, Nepal, Sudan and Zimbabwe), with a view to documenting and demonstrating the results of forecast-based action compared to late response. Throughout 2019, the Danish Red Cross has supported selected Red Cross partners (Malawi, Mali and Zimbabwe) in developing Early Action Protocols for submission to the IFRC's Disaster Relief Emergency Fund. In partnership with the German Red Cross and the Red Cross Red Crescent Climate Centre, the Danish Red Cross supports FbF research work in collaboration with the University of Copenhagen.
In 2017, Denmark contributed with early funding to enable early action to be taken to avert hunger crises in the Horn of Africa. In consultation with the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), Denmark and the other Nordic countries are exploring innovative financing options, and the Danish Ministry of Foreign Affairs is currently considering how to support these new initiatives.

**Pledge: “Reproductive, Maternal, Newborn and Child Health in Humanitarian Emergencies”**

Consistent with Canada’s Reproductive, Maternal, Newborn and Child Health (RMNCH) commitments, acknowledging the key contributions of the Movement to the health and survival of women and children, especially those living in fragile contexts, and recognizing that the majority of maternal and child deaths globally occur in developing countries affected by disasters and conflicts, the government of Canada and the Canadian Red Cross have pledged to take concrete steps to increase maternal and child survival. The key areas of work include strengthening the capacities of health systems to deliver high-quality RMNCH services, supporting evidence-based decision-making by ministries of health and other policy-makers by strengthening health management information systems (HMISs), developing the skills of Red Cross and Red Crescent volunteers to promote preventive and caregiving practices in order to improve communities’ health, self-reliance and resilience to shocks and enhancing the ability of health-care workers to access mothers and children affected by humanitarian crises by advocating for the safety and security of patients and health-care providers.

Developing the skills of Red Cross and Red Crescent volunteers to promote preventive and caregiving practices in order to improve communities’ health, self-reliance and resilience to shocks has been a key area of work for the Canadian Red Cross. Through its Expanded Humanitarian Assistance Programme within the Syria II project, 11,943 people have received nutritional treatment (1,822 cases of severe acute malnutrition and 10,121 cases of moderate acute malnutrition). In addition, 149,293 people (65,586 male and 83,707 female) have been reached through health messaging on RMNCH. Furthermore, 2,750 vulnerable pregnant women have received full delivery assistance, and 137,158 people, mostly women and children, have benefited from free medicines.

**Pledge: “Social Cohesion”**

The Australian government and the Australian Red Cross have pledged to promote understanding, non-violence and respect for cultural, linguistic and religious diversity in the Australian community, including by providing educational activities which foster humanitarian values and, where possible, building partnerships to promote dialogue and inclusion. They have also pledged to enhance social cohesion by supporting practical actions to prevent or address discrimination and racism towards migrants and other people and groups from different cultural, linguistic and religious backgrounds in Australia.

The Australian government recently released Multicultural Australia – United, Strong, Successful, the government’s public statement renewing its commitment to multicultural Australia and setting priorities and three strategic directions for the coming years. One of the strategic directions is “continuing to build harmonious and socially cohesive communities”. Australia’s indigenous communities are among the world’s oldest continuing cultures. Aboriginal and Torres Strait Islander peoples include many cultural groups and over 250 language groups. The Australian government recognizes the disadvantages and discrimination faced by Aboriginal and Torres Strait Islander peoples. To address this, it has committed to working in partnership with these peoples. The government, indigenous leaders, organizations and communities have agreed to work together to refresh the Closing the Gap agenda, emphasizing that a partnership, a collaborative approach, is needed. The Australian government is taking broad measures to achieve an inclusive and culturally sensitive society for Aboriginal and Torres Strait Islander peoples, who are consulted at the highest levels of government, through the Prime Minister’s Indigenous Advisory Council and through support for regular workshops involving the Indigenous leaders of the Redfern Alliance. At the local level, a regional network is in place to ensure that Aboriginal and Torres Strait Islander communities across the country can work with the government to develop local solutions.

**Pledge: “Engagement for the orientation of horizontal humanitarian cooperation”**

The Brazilian government pledged to continue engagement for the orientation of horizontal humanitarian cooperation in accordance with the principles of socio-economic and environmental sustainability in order to consolidate the complementarity between emergency and structuring dimensions. This action aimed to favour the sharing of social technologies to accelerate growth for the creation of local-scale resilience.
Since 2015, Brazil has been strengthening the horizontal nature of the Brazilian humanitarian cooperation system. The Brazilian Agency for Cooperation (ABC) coordinates and performs secretariat functions for the Interministerial Working Group (IWG) on International Humanitarian Cooperation, the national platform responsible for developing conceptual frameworks and operational structures to enhance international humanitarian cooperation. The proportion of ministries participating in the IWG has risen from 52% to 77%. This increase is the result of a shift from one-off emergency response activities to the structuring of long-term initiatives designed to improve preparedness and promote resilience. Brazilian international humanitarian cooperation has progressively assumed a multidimensional character, involving a wide range of national agencies that bring diverse inputs to the policies and actions put in place by the Brazilian government. This evolution in Brazilian cooperation can be clearly appreciated in the response to cyclones Idai and Kenneth in Mozambique. Through the IWG, the Brazilian government made maps created from satellite images available to the Mozambican government and to the United Nations to help guide search and rescue activities. It also sent a search and rescue team to assist the Mozambican authorities.

**Pledge: “Strengthened cooperation to scale up availability and access to support for migrants in Sweden”**

The refugee situation of the past few years has made it even more evident that access to protection and humanitarian assistance is essential to effectively address the needs and increased vulnerabilities of migrants in Sweden. The Swedish Red Cross, as an auxiliary to the government in the humanitarian field, and the Swedish government agreed to increase cooperation in order to scale up the availability of and access to support for migrants. Cooperation between the public authorities and the Swedish Red Cross was enhanced for the delivery of support services to migrants in the areas of reception, asylum, Restoring Family Links, psychosocial support, integration, immigration detention and return. Swedish Red Cross operations included more activities, such as local volunteer activities in reception centres, the delivery of Restoring Family Links services, legal advisory services, detention and return activities, rehabilitation and trauma treatment and health services for asylum seekers and other migrants. The government contributed to facilitating the National Society’s operations by providing annual funding. In view of the large number of unaccompanied minors arriving in Sweden and remaining in the country in difficult conditions due to doubts about their status, the Swedish Red Cross focused particularly on this vulnerable group in 2018 and 2019. The National Society has reached out to many unaccompanied minors, providing psychosocial support and core activities such as those mentioned above. Cooperation has been strengthened with the relevant authorities in general and with the Migration Board in particular, with which an agreement has been signed to develop Swedish Red Cross protection work in detention centres.

**Looking forward**

The International Conference marks an important date on the humanitarian calendar and in the four-year cycle of the Movement’s statutory meetings. The relevance of the Conference depends on the conference members’ willingness and capacity to implement the decisions adopted and translate them into concrete actions on the ground. So far, there has been both progress and challenges in doing this, as outlined in this report. Much of the work mentioned here will continue through to the next International Conference in 2019 and beyond. Given these increasingly complex, fluid and challenging times, it will be essential for States and the components of the Movement to continue working together to alleviate human suffering and build a better world.