International Cooperation of the GRC

Development cooperation
Project examples from across the world
Development cooperation at the German Red Cross

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Publishing information

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Pictures, graphics and maps

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Introduction

Beside its long-standing involvement in international disaster relief, the German Red Cross (GRC) has also been actively engaged in long-term development cooperation for many years, mostly in the least developed countries of the world. After a disaster, the GRC does all it can to enable those affected rebuild a future for themselves, both in the short and the long term. According to the concept of Linking Relief, Rehabilitation and Development (LRRD), emergency aid is followed up with rehabilitation programmes which in turn lead to development cooperation (DC). In many African, Asian and Latin American countries, however, the GRC also works in places far away from disaster scenes, first of all to help vulnerable people, often in rural areas, improve their living conditions, in an active effort to boost the millennium development goals (MDGs) set by the United Nations.

All these activities are undertaken by the GRC as part of the universal Red Cross and Red Crescent Movement, whose components are the International Committee of the Red Cross (ICRC), the International Federation of Red Cross and Red Crescent Societies (Federation), and presently 186 recognized National Red Cross or Red Crescent Societies. The Movement has an international legal basis in the Geneva Conventions and their Additional Protocols, with the ICRC especially mandated by the international community to act as guardian of international humanitarian law.

The four main sectors of international GRC cooperation including its development programmes are:

• **Disaster risk reduction and adaptation to climate change**
  Risk analyses, activities designed to reduce disaster risks and prepare for future disasters as well as community-based early warning, with special consideration given to future natural hazards.

• **Health**
  Basic health care, HIV/AIDS prevention, preventive health care and first aid, prevention and control of epidemics, and promotion of voluntary non remunerated blood donation programmes.

• **Water and hygiene**
  Drinking and service water supply, installation of latrines and hygiene education.

• **Further contributions to poverty reduction**
  Food security, income-generating activities, projects for children and youth.

Wherever the GRC works, it always has a partner on site, which is the local National Red Cross or Red Crescent Society. Well established in their respective home countries, these partner National Societies, are experienced and have, for years, been acting on issues similar to those addressed by the GRC. When implementing DC projects with a sister society, the GRC pursues two goals:

1. to assist the most vulnerable sections of the population (first and foremost women and children) in a partner country in improving their living conditions and achieving sustainable local development
2. to support civil society in partner countries by contributing to the respective sister societies’ structural development, so as to enable them to deliver effective aid to their own community in need as and when required (capacity building).
The GRC’s DC policy is based on **three pillars** (as pictured above). The first pillar consists of the fundamental principles of the Red Cross and Red Crescent Movement. All action taken in cooperation with sister societies and communities in developing countries is guided by these principles.

The strategies and policies of the Federation for specific programmes such as health, HIV/AIDS, water and sanitation or hygiene, as well as the principles and rules for disaster management, constitute the second pillar of all international GRC activities.

The third pillar is made of skills in disaster management, health care, social work and voluntary work, which the GRC primarily developed for its role as National Red Cross Society as such auxiliary to the public authorities in the humanitarian services of its home government. These competencies also feed into its international work.

**Cooperation with any partner** from the Red Cross and Red Crescent Movement is further based on a specific request of a sister society to meet a real need felt among the intended beneficiaries of the requested cooperation. While offering to share know-how and skills in its core sectors, the GRC strives to align project identification with a partner on the latter’s strategy and planning.

In DC, the GRC mostly operates on a bilateral basis, i.e., in direct cooperation with sister societies. Multilateral or consortia-sponsored projects funded by several components of the Red Cross and Red Crescent Movement are another option. In order to enhance synergies within German DC, the GRC is also open to cooperation with other German DC agencies and organisations, provided that the relevant sister society agrees.

The GRC’s main **sponsors** in the field of DC are the Ministry of Economic Cooperation and Development (BMZ) and the European Union, particularly their DG Development – Europe Aid.

However, the GRC also relies on donations, especially for long-term funding of international programmes.
Project implementation

The GRC assists partners in designing programmes and projects on site by sending them delegates and consultants who make the necessary preparations jointly with the local sister society and the intended beneficiaries. All DC projects are implemented by the national Red Cross or Red Crescent Society on site, which operates the project structures and shares the responsibility for all follow-up action, in other terms for ensuring sustainability after the end of a project.

A sister society’s project team usually consists of a local project coordinator, local technical staff for administrative and practical aspects of project implementation, and local volunteers, who are involved in all project activities. This places the responsibility for project implementation with a local structure right from the start.

The GRC provides technical guidance and knowledge transfer throughout all project phases and thus guarantees the quality of project implementation under technical and practical aspects. This is an essential condition for the long-term success of every DC activity. GRC delegates receive support for their role, primarily from their respective country desk at National GRC Headquarters in Berlin, and as far as possible also from the GRC field office responsible for their respective region.

The GRC enhances the sustainability of project activities by developing an exit strategy for each project. To this effect, both National Societies involved jointly draw up a plan of action to ensure that positive effects will continue to be felt long after the end of a project. An exit strategy usually includes activities to develop capacities and technical skills among local partners and their beneficiaries as well as targeted fundraising done by the sister society with a view to financing follow-up projects.

DC projects of the GRC are evaluated by internal and external consultants, under terms which vary from case to case. Annual lessons-learned and planning workshops with the partner and the other parties involved in a project are standard and considered essential to ensure continuous adjustment and improvement of ongoing activities. A final evaluation takes place at the end of every DC project. GRC member branches which provide technical or financial contributions or both to the implementation of long-term activities in selected projects intervene on site in consultation and coordination with National GRC Headquarters in Berlin.

The GRC operates with tools and methods introduced by the Federation as standard for the Red Cross and Red Crescent Movement. These include, for instance, analyses of the situation of intended beneficiaries, project cycle management used as a management tool, and analyses of health and hygiene conditions at community level. The Federation’s methods are based on the participation of everyone concerned, partners and intended beneficiaries, as a matter of principle. Accordingly, the GRC also uses participatory methods when acting as an advisor to a sister society.

The GRC is currently working in more than 50 countries of Africa, Asia, Latin America, the Middle East and Europe. The present brochure presents some concrete examples of GRC projects in the sectors of disaster risk reduction, health, water, sanitation and hygiene as well as poverty reduction.
GRC development cooperation -
some project examples

Disaster risk reduction and structural development

Indonesia

Establishment of emergency control centres to improve local disaster preparedness

Area: Sumatra, Bengkulu
Duration: 24 months (2 years)
Budget: 340,000 EUR
Funding: Resources of the GRC (donations)
Partner: Indonesian Red Cross

Project goals
Indonesia is prone to a variety of natural hazards including earthquakes, volcanic eruptions and tsunamis. The main goal of this project was to mitigate the impact of disasters on the local population by strengthening civil society structures. To this effect, the GRC and the Indonesian Red Cross jointly established seven emergency control centres in as many locations of Bengkulu province in Sumatra. Running in parallel with the establishment of the centres was the provision of training and support for community-based emergency intervention teams of the Indonesian Red Cross.

Project implementation
The control centres were equipped with radios which enable operators to communicate with other civil defence institutions even under emergency conditions. Continuous contact with the national civil defence authority of Indonesia in charge of warning the population of any danger is key to successful disaster preparedness in this country. The control centre operators collect information relevant for their area and evaluate it both with a view to acute emergency interventions and further planning for disaster risk reduction.

The concept and line of action of this project were closely coordinated with the local partners. As an important civil society actor in the country, the Indonesian Red Cross played the leading part in implementing this project, which was also supported by Indonesia’s radio amateur club, while GRC contributions included the establishment of the control centres and logistic capacity building to facilitate timely provision of supplies in emergencies.

Project results
The GRC and the Indonesian Red Cross successfully set up seven emergency control centres, which guarantee the effectiveness of early warning in the communities they cover. One of the emergency control centres is located at the Red Cross branch headquarters of Bengkulu province, while the six others are located in particularly vulnerable districts scattered across the province. Beside construction work and technical setups, training for local staff and volunteers constituted another vital project component. The Indonesian Red Cross volunteers now man the control centres on a 24/7 basis, ready to organise effective service, make realistic assessments of local risks and take appropriate action in response to future disasters.
Poland

Strengthening national disaster preparedness

Area: Poland (countrywide)
Duration: 48 months (4 years)
Budget: 500,000 EUR
Funding: Resources of the GRC (donations)
Partner: Polish Red Cross

Project goals
In the light of extensive experience with major disasters such as the severe floods that struck Poland repeatedly during recent years, the Polish Red Cross made it a priority to develop its operational capacity and skills for rescue interventions as well as assistance programmes in favour of people affected by disaster. As an important institution of civil society in Poland, the Polish Red Cross implemented a GRC-sponsored four-year project to strengthen rescue teams and support teams for national and international disaster management. The project aims to set up within the Polish Red Cross a well-organised emergency response and disaster preparedness system including regional and local disaster management centres. This will enable the Polish Red Cross to respond to disasters more efficiently and provide more effective emergency relief.

Project implementation
While the GRC provides financial support and training, the Polish Red Cross is implementing this project in a fairly independent manner. Around 650 Polish Red Cross trainers and volunteers are being trained in first aid, health care and drinking water treatment for deployment in Poland. Some participants attend additional courses to prepare for international humanitarian Red Cross assignments.

As a first step, the project partners renovated a training centre at Zgierz (near Lodz). They also completed and updated the material available for training purposes. This centre now hosts training courses for volunteers and provides regional rescue teams with more modern equipment and training for emergency interventions. The training programmes are in line with official requirements of the Polish ministry of health. The rescue department at national Polish Red Cross headquarters is ensuring quality control for the training.

Project results
Rescue and assistance teams of the Polish Red Cross have been strengthened all over the country through this project, enabling them to operate throughout Polish territory. The project constitutes an effective contribution to Polish disaster management at home and abroad. The Polish Red Cross has strengthened its role as a civil society actor in disaster preparedness and is now in a better position to assist within the national system.
Bangladesh

Cyclone disaster risk reduction

Area: Coastal areas bordering on the Gulf of Bengal
Duration: 60 months (5 years)
Budget: 1,500,000 EUR
Funding: Europe Aid (EU) and resources of European sister societies
Partner: Bangladesh Red Crescent Society

The people of Bangladesh are particularly hard hit by climate change.

Project goals
In nine cyclone-prone districts on the coast of Bangladesh, 86 communities, and especially their women and children, have been empowered to better prepare for extreme natural events such as tropical cyclones. The aim of the project was to improve their capacity to protect their own lives and those of their relatives more effectively and cope with the impact of cyclones more swiftly, as the frequency and strength of tropical storms is set to increase with climate change.

Project implementation
Based on many years of experience in disaster preparedness schemes, this project was conceived by four National Societies (British Red Cross, Swedish Red Cross, Bangladesh Red Crescent and GRC). During the first four years, the EU contributed 75% to the funding, and an international team steered the project activities. On site, Red Crescent staff and volunteers helped to implement this project.

Project results
Red Cross/Crescent activities under this project reached more than 34,000 households with 200,000 people including around 65% children and youths under age eighteen. During an external evaluation of the project, it was found that

1. Eighty-six communities now have operational and well-trained disaster preparedness committees and are thus better prepared for disasters such as those caused by climate-induced extreme events.
2. The number of relief volunteers has risen, particularly among the women, and their skill to reduce risks at household level has increased.
3. Women and children in these 86 communities know what to do in the event of a cyclone alert and are able to better protect themselves and their possessions.

A total of 17,000 school children, 34,000 women and more than 2,000 volunteer members of disaster preparedness committees were trained in first aid as well as early warning and evacuation schemes. As climate hazards increase, timely warning becomes vital, enabling people to better adapt to facing new threats. A second phase of the project aims at ensuring the water supply in cyclone shelters.
**Peru**

Adapting to climatic changes

**Area:** River valley of the Río Tumbes  
**Duration:** 12 months (1 year)  
**Budget:** 160,000 EUR  
**Funding:** German Foreign Office and resources of the GRC (donations)  
**Partner:** Peruvian Red Cross Society

Project implementation

Through training, communities were made aware of present and future climate hazards and were taught to identify potential risks existing in their area and find ways of protecting themselves accordingly.

Priority was further given to the formation of local emergency committees who were trained in general aspects of disaster preparedness. The committees comprise representatives of local authorities and civil society members. This is to safeguard the interests of different sections of the community.

A third project component consisted in training school teachers who then integrated climate change and disaster preparedness into their curricula. The project builds on multiplier effects to be achieved by school children sharing this new knowledge with families and friends.

Project results

Thanks to the project, most members of the communities covered by the project are now well aware of the threats posed by existing natural hazards and particularly by climatic hazards. The people also know about local schemes worked out for their protection, and all communities in the project area have trained emergency committees able to deliver emergency aid. It is planned to further develop and strengthen these structures within follow-up projects.
Sudan

Primary health care for displaced people in Darfur

Area: Abu Shock Camp near El-Fasher, and Mellit, Darfur
Duration: 24 months (2 years)
Budget: 1,000,000 EUR
Funding: Humanitarian Aid of the EU (ECHO)
Partner: Sudanese Red Crescent Society

Darfur affected by the conflict. This contributes to reduction of mortality and morbidity rates. Moreover, the project includes a feeding programme component for malnourished children designed to reduce the loss of lives among this particularly vulnerable group.

Project implementation
The project is run jointly by the GRC, the Sudanese Red Crescent as our partner, and the local ministry of health. The GRC supports one basic health post in the Abu Shock camp for internally displaced people (IDP) near El Fasher and four more on the outskirts of Mellit, by providing drugs, medical supplies and equipment as well as training for their staff.

In Mellit, volunteers visit households to identify malnourished children for referral to the health posts, where they are given supplementary food and their mothers receive advice on mother and child health issues.

Project results
The medical records of the project show that the displaced people do now have improved access to basic health care, and famished children have indeed benefited from the feeding programme.

The continuation of this project and a possible handover to the ministry of health depend very much on the availability of further funding and the development of the Darfur conflict.
GRC development cooperation - some project examples

Health care

Angola

Prevention against HIV infection and support to people affected by the HIV/AIDS pandemic

Area: Cunene province
Duration: 48 months (4 years)
Budget: 998,000 EUR
Funding: Europe Aid (EU) and resources of the GRC (donations)
Partner: Angolan Red Cross

Project goals
The United Nations rated the humanitarian crisis after decades of civil war in Angola one of the worst in the world. The HIV/AIDS pandemic was identified as one of the most urgent problems as the infection rate surged when the borders were opened and many Angolan refugees returned home. Cunene province was hit hardest, and the aim of the project was to improve the lives of people who were directly or indirectly affected by HIV/AIDS.

Project implementation
The GRC’s operating partner on site was and still is the Angolan Red Cross, which works very closely together with community volunteers.

The project had a four-pronged approach:

1. Ensuring home care for 6,500 people living with HIV or AIDS (PLWHA) and support for 930 orphans and particularly vulnerable children
2. Spreading information on sexually transmitted diseases in the communities and strengthening the social status of women
3. Having the communities assume responsibility for their own health and encouraging PLWHA to support each other
4. Increasing the knowledge and skills of the Angolan Red Cross concerning the implementation of this type of project

Project results
In the communities targeted by the project in Cunene province, training in home care was given to community volunteers, including around 40% living with HIV, who also received equipment required for this service. Far more than 10,000 PLWHA can thus benefit from home care. In addition, the project reached more than 900 orphans and destitute children and provided items needed for their schooling. An information and education campaign with roughly 8,000 events and the distribution of over a million condoms and information brochures reached more than 250,000 people who are now well aware of the complex subject of HIV/AIDS.

The capacity of PLWHA and their families to provide for their own home care is to be strengthened further. Moreover, a follow-up phase of the project is to include a food security component.
GRC development cooperation - some project examples

Water and hygiene

Somalia

Clean water, better hygiene and greater awareness of environmental issues

Area: North West Somalia (Somaliland), Galbeed, Awdal and Togdheer regions
Duration: 24 months (2 years)
Budget: 465,000 EUR
Funding: German Development Ministry BMZ
Partner: Somali Red Crescent

Using a clay filter

Project goals
The collapse of the Somali central government in 1991 had many consequences including the disruption of the country’s agricultural infrastructure.

Widespread lack of access to clean drinking water and adequate wastewater disposal affect people's health, while environmental degradation increases their vulnerability to natural disasters and exacerbates their poverty.

The project therefore aims to ensure access to clean drinking water, raise the standards of personal hygiene and increase local awareness of environmental issues. This is expected to improve people’s living conditions, reduce poverty and contribute to the prevention of conflict in the communities of Somaliland.

Project implementation
On site, the project is being implemented by the Somali Red Crescent. Community members are encouraged to establish so-called water committees and then trained to sensitise people on appropriate water management. In parallel, hygiene trainings are organised and sanitary facilities (e.g. latrines) are built in the communities. To obtain clean drinking water, the project supports the making of clay filters in a local factory, with the aim to increase its production capacity.

Voluntary trainers are trained specifically to carry out awareness campaigns for environmental protection. Moreover, volunteers are mobilised to plant trees in order to protect existing water points from erosion.

Project results
In the rural areas covered by the project, the project has so far given 35,000 people access to a minimum of 20 litres clean drinking water per day and per person, with the communities taking care of water source management. Besides, drinking water quality has improved with the household use of clay filters, and people now have access to appropriate sanitary facilities. The communities are carrying out activities for environmental protection and disaster risk reduction on their own account.
GRC development cooperation - some project examples

Water and hygiene

Vietnam

Water supply in rural areas

Area: 4 rural provinces of North Vietnam
Duration: 54 months (4.5 years)
Budget: 1,220,000 EUR
Funding: Resources of the GRC (donations)
Partner: Vietnamese Red Cross

Another important aim is to develop national Red Cross structures in order to ensure the sustainability of project results.

Project implementation
The project concentrates on technically simple solutions for the construction of water filters, water supply systems and latrines. These can be built by local craftsmen and are easy to maintain. Community participation is essential. The communities taking part in the project assume the responsibility for maintaining the infrastructure provided under the project. No less important than technical support is hygiene education, which targets rural communities and particularly school children. Schools are adequate venues for this type of training, where children can learn how important it is to adopt simple habits, such as washing your hands with soap in order to prevent diseases.

Project results
More than 25,000 people, who had no access to clean water and sanitary facilities in the past, have improved their hygiene status since the project began. Access to drinking water was provided and hygiene education has increased their awareness and changed their attitudes. The villages are now cleaner than they were before the project started. At the same time, the incidence of diarrhoeal diseases, for instance, has dropped in the project area. School children were the focus of a new hygiene education programme which introduced playful learning opportunities to practise appropriate hygiene behaviour which will also keep their environment clean.

Filters provide access to clean drinking water in North Vietnam

Project goals
Although Vietnam’s economy has been developing fast since 1990, people in certain areas are still very poor, particularly in the North of the country. Most notably, ethnic minorities and rural dwellers often have no access to clean water and sanitation, as many places lack adequate toilets and sewage systems, with wastewater left to run directly into streams passing by the houses. The use of polluted water is causing a high prevalence of water-borne diseases. Hence the three goals of this project:
1. To supply particularly vulnerable households and schools with clean water
2. To install adequate sanitary facilities in households and schools
3. To bring about a change in the rural people’s attitudes through hygiene education in order to reduce morbidity caused by a lack of hygiene.
Lesotho

Food security for households affected by HIV/AIDS

Area: Berea and Leribe districtst
Duration: 22 months (1 year and 10 months)
Budget: 635,000 EUR
Funding: Europe Aid and resources of the GRC (donations)
Partner: Lesotho Red Cross Society

Project goals
More than half of Lesotho’s households live below the poverty line and produce no more than an average of 25% of the food they need for their sustenance. The HIV/AIDS pandemic has further reduced productivity and contributed to the deterioration of household economies. Since 2007, a surge in food prices has exacerbated the situation and brought food insecurity to alarming levels. As a consequence, this project aimed to ensure the food security of 1,500 families affected by HIV/AIDS in the districts of Berea and Leribe.

Project implementation
By organising seed fairs, introducing a seed catalogue and disseminating seed propagation techniques, this project helped ensure beneficiaries’ access to agricultural resources. Their agricultural production was enhanced through improved cultivation methods adapted to their specific needs. In parallel, local farmers were encouraged to form self-help groups. With the Lesotho Red Cross acting as implementing partner on site, the project started supporting community-based voluntary associations which give advice to farmers and consist of elected community members and self-help groups.

Project results
Seed fairs now take place in both districts, and families affected by HIV/AIDS can buy seeds and organic fertiliser for the planting season under a voucher scheme. The Red Cross has trained 140 volunteers on farming for food security and started providing active support and advice to the beneficiary families. With seeds and gardening tools procured by the project, 20 gardens were laid out by children’s clubs. These clubs are run by 300 aids orphans who have been trained by agricultural advisers and are now growing vegetables for their own consumption.

Food production in farms and gardens has increased, enabling the beneficiaries to diversify their diet, which will improve their health status in the long term. The new seed propagation techniques enhance the self-sufficiency of families living on agriculture, strengthening their economic status in the long run and thus enabling them to overcome food insecurity.
GRC development cooperation - some project examples

Poverty reduction

Palestinian territories

Community-based development programme
Area: West Bank and Gaza
Duration: 42 months (3.5 years)
Budget: 1,300,000 EUR
Funding: Europe Aid and resources of the GRC (donations)
Partner: Palestinian Red Crescent Society

Project goals
This project is based on a preceding health project which supported the creation of 75 so-called Safe Motherhood Committees (SMHC) by the Palestinian Red Crescent. The SMHCs consist of female community volunteers living in the 75 participating communities.

The project aims to improve the living conditions of the Palestinian population in these 75 communities located in the West Bank or the Gaza Strip.

A dual approach was designed to spread knowledge about issues relevant for health and to implement micro projects aimed at developing social infrastructure, which will also contribute to poverty reduction.

Project implementation
The project consists of two components: The first priority is continuous training programmes for the Safe Motherhood Committees in charge of health promotion in the communities. These trainings are facilitated by technical staff of the Palestinian Red Crescent. The topics are chosen by the committee members who disseminate the resulting messages on an independent basis. The second project component is about developing and implementing micro projects to achieve direct improvements in local living conditions and build social services in the communities, for instance by establishing women’s meeting points and childcare facilities. Through this assistance the Red Crescent empowers women to plan and run micro projects on their own account.

Project results
The Palestinian communities covered by the project have succeeded in increasing their awareness of health-related issues thanks to the information and education campaigns of the Safe Motherhood Committees. Enabling people to reduce health hazards is particularly important in areas with widespread poverty. Scores of micro projects were successfully set up by local community members who now provide social services, which are an important basis for further efforts to overcome poverty. Most of all, the project has strengthened the role of women as active members of the community. The Safe Motherhood Committees have become dynamic civil society actors in Gaza and the West Bank.

Women’s groups are trained to set up micro projects

Motherhood Committees in charge of health promotion in the communities. These trainings are facilitated by technical staff of the Palestinian Red Crescent. The topics are chosen by the committee members who disseminate the resulting messages on an independent basis. The second project component is about developing and implementing micro projects to achieve direct improvements in local living conditions and build social services in the communities, for instance by establishing women’s meeting points and childcare facilities. Through this assistance the Red Crescent empowers women to plan and run micro projects on their own account.

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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 only to relieve suffering of individuals, being guided solely by their needs, and to give priority to the most urgent cases of distress.

Neutrality
In order to continue to enjoy the confidence of all, the Red Cross may not take sides in hostilities or engage at any time 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 one 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.