Explanatory note to
the IFRC Strategic Framework on Gender and Diversity Issues

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International Federation
of Red Cross and Red Crescent Societies

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Cover photo: Edhy Musarwan, 40 years old husband, Cut Rina, 39 year-old wife, Ervanza, 12 year-old son, Erdan, 10 year-old son, Diva Flavia, 4 year-old daughter. The house was built by the International Organization of Migration and funded by the American Red Cross. The father is a carpenter. American Red Cross.

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The International Federation of Red Cross and Red Crescent Societies (IFRC) is the world's largest volunteer-based humanitarian network, reaching 150 million people each year through our 187 member National Societies. Together, we act before, during and after disasters and health emergencies to meet the needs and improve the lives of vulnerable people. We do so with impartiality as to nationality, race, gender, religious beliefs, class and political opinions.

Guided by *Strategy 2020* – our collective plan of action to tackle the major humanitarian and development challenges of this decade – we are committed to 'saving lives and changing minds'.

Our strength lies in our volunteer network, our community-based expertise and our independence and neutrality. We work to improve humanitarian standards, as partners in development and in response to disasters. We persuade decision-makers to act at all times in the interests of vulnerable people. The result: we enable healthy and safe communities, reduce vulnerabilities, strengthen resilience and foster a culture of peace around the world.

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Terms and definitions

Gender refers to the social differences between females and males throughout the life cycle that are learned and, though deeply rooted in every culture, are changeable over time and have wide variations both within and between cultures. 'Gender' determines the roles, power and resources for females and males in any culture.[1]

Diversity means acceptance and respect for all forms of difference. This includes, but is not limited to, differences in: gender, sexual orientation, age, disability, HIV status, socio-economic status, religion, nationality and ethnic origin (including minority and migrant groups). Gender interacts with other aspects of diversity as there is an important interrelationship between discrimination on the basis of gender and discrimination on the basis of other forms of diversity.

Gender analysis looks at the relationships between females and males. It examines their roles, their access to and control of resources, and the constraints they face in relation to each other.

Gender balance refers to proportional levels of representation of women and men at all organizational levels – i.e., Red Cross Red Crescent beneficiaries, staff, volunteers and programming levels (teams of staff, delegates and volunteers). This is different to gender parity which refers to equal (quantitative – i.e., 50–50) representation of women and men.

Gender equality exists when both women and men are able to: share equally the distribution of power and influence; have equal opportunities, rights and obligations in the public and private spheres, including in terms of work or income generation; have equal access to education and capacity-building opportunities; have equal possibility to develop their full potential; have equal access to resources and services within families, communities and societies at large; and are treated equally in laws and policies. It does not mean that women and men are the same, but that their rights, responsibilities and opportunities do not depend on their sex. Efforts to expand gender equality in IFRC programming should be based on commitment to the realization of human rights, including non-discrimination and freedom from violence.[2]

Gender inequality takes many forms and is rooted in unequal power relations where gender interacts with other aspects of diversity such as ethnicity, age, class, sexual orientation, HIV/AIDS status, and disabilities. Gender discrimination and gender-based violence are rooted in gender inequality.

Gender equity refers to fairness of treatment for women and men according to their respective needs. It is a needs-based approach rather than rights based. This may include equal treatment, or treatment that is different but considered equivalent.[3]

Gender-based violence (GBV) refers to any act that results in, or is likely to result in, physical, sexual or psychological harm or suffering on the basis of gender, including threats of such acts, force or arbitrary deprivation of liberty, whether occurring in public or private life. It can include sexual violence, domestic violence, trafficking, harmful practices such as female genital mutilation,

1 *IASC. Women, Girls, Boys and Men – Different Needs and Opportunities: Gender Handbook in Humanitarian Action.2006.*

2 *Adapted from UNAIDS/PCB (20)/07.11, 27 April 2007.*

3 *Ibid.*

forced or early marriage, forced prostitution, sexual harassment and sexual exploitation, to name but a few.[4] GBV is a key manifestation of gender inequality and differential power relationships.[5]

The term GBV is frequently confused with violence against women. While gender-based violence primarily and disproportionately affects women and girls, it is also directed towards Lesbian, Gay, Bisexual and Transgendered (LGBT) people and men who do not act according to dominant masculine gender roles. Therefore, men and boys are subject to it also.[6]

GBV is one of the forms of interpersonal violence identified in the IFRC Strategy on Violence Prevention, Mitigation and Response 2010–2020 i.e., violence that occurs between individuals who know each other, and can take place in homes, schools, workplaces and institutions. Examples include child abuse, bullying and harassment, family violence, and abuse of the elderly.[7]

Gender mainstreaming is the process of assessing the implications for women and men of any planned action, including legislation, policies or programmes, in any area and at all levels. It is a strategy for making women's as well as men's concerns and experiences an important aspect in the design, implementation, monitoring and evaluation of policies and programmes in all political, economic and societal spheres so that women and men benefit equally and inequality is not continued. The ultimate goal is to achieve gender equality.[8]

Gender-sensitivity/awareness is the ability to recognize different perceptions and interests arising from different social location and gender roles. Gender sensitivity is considered the beginning stage of gender awareness. Gender awareness is more analytical, more critical and more 'questioning' of gender disparities; it is the ability to identify problems arising from gender inequality and discrimination, even if these are not very evident on the surface or are 'hidden' (i.e., not part of the general or commonly accepted explanation of what and where the problem lies).[9]

Gender-targeted programming consists of setting up stand-alone programmes dedicated to a specific gender issue – e.g., increasing women's access to education or economic resources; combating discrimination against LGBT people; building the resilience of households headed by single female or male parents; and reducing intimate-partner violence, female foeticide, or internal discrimination by women towards women, girls towards girls, men towards men, boys towards boys, etc.

Sex is the term used to describe the biological characteristics that define humans as either female or male. These sets of biological characteristics are not always mutually exclusive, as there are some individuals who possess both female and male characteristics.[10]

Transgendered person refers to an individual who has a gender identity that is different from his or her sex at birth. Transgender people may be female to male (male appearance) or male to female (female appearance).[11]

4 *Irish Joint Consortium on Gender-based Violence. Gender-based Violence: a failure to protect, p.3, 2005.*

5 IFRC Strategy on Violence Prevention, Mitigation and Response 2010-2020, *2011.*

6 *OCHA.* Discussion paper 2: The nature, scope and motivation for sexual violence against men and boys in armed conflict. *OCHA. June 2008.*

7 IFRC Strategy on Violence Prevention, Mitigation and Response 2010-2020, *2011.*

8 *UN ECOSOC, E/1997/L.30, §4. www.un.org/womenwatch/osagi/pdf/ECOSOCAC1997.2.PDF*

9 *www.coa.gov.ph/gad/articles/gender101_022006-01.htm*

10 *IFRC.* A Practical Guide to Gender-sensitive Approaches for Disaster Management, *Asia Pacific Zone, p.3, 2010.*

11 *UNAIDS,* UNAIDS Terminology Guidelines, *p.28, 2010.*

Abbreviations and acronyms

AIDS	Acquired Human Immuno-Deficiency Syndrome
CBHFA	Community-Based Health and First Aid
GBV	Gender-Based Violence
HIV	Human Immuno-deficiency Virus
ICRC	International Committee of the Red Cross and Red Crescent
IFRC	International Federation of Red Cross and Red Crescent Societies
LGBT	Lesbian, Gay, Bisexual, Transgendered
OCHA	United Nations Office for the Coordination of Humanitarian Affairs
PASSA	Participatory Approach for Safe Shelter Awareness
PHAST	Participatory Hygiene and Sanitation Transformation
VCA	Vulnerability and Capacity Assessment
YABC	Youth as Agents of Behavioural Change

This explanatory note to the IFRC Strategic Framework on Gender and Diversity Issues aims to foster deeper understanding of the strategic framework by placing it in historical and institutional context, showing in detail the linkages to *Strategy 2020* and by providing relevant examples and case studies from within and outside the Movement. While the explanatory note puts more emphasis on gender, it needs to be read to be covering all aspects of diversity. It is the result of a participatory drafting process carried out by the IFRC Secretariat (Principles and Values department) and a network of 46 National Societies (5 from Africa, 19 from Americas, 6 from Asia-Pacific, 8 from Europe and 8 from MENA). This document is also available on FedNet.

1. Basis of the IFRC Strategic Framework

1.1 The Fundamental Principles of the International Red Cross and Red Crescent Movement, and IFRC Policies and Strategies

The strategic framework is based on the Fundamental Principles of the International Red Cross and Red Crescent Movement and their underpinning humanitarian values. It supports and reinforces the implementation of the following policy and strategic instruments of the IFRC:

Vision of the IFRC

"To inspire, encourage, facilitate, and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world."[12]

Strategy 2020 of the IFRC (2009)

"In functioning according to our fundamental principles and humanitarian values, the composition and work of National Societies reflects the diversity of their catchment populations including representation from vulnerable groups. We strive for equality at all levels in our organization and in all our work, ensuring that there is no gender-based or other discrimination in the allocation of resources and benefits, nor in participation and access to services and decision-making roles."[13]

IFRC Gender Policy (1999)

"The main goal of the policy is an active promotion of gender balance within the IFRC", in particular to involve more women in the decision-making processes at all levels. The balanced representation of women and men, or reflecting gender diversity, is seen as important to ensure access to all beneficiary groups – women, girls, men and boys– in addition to ensuring equity within the organization. The

12 *Defined by the IFRC Constitution, Article 4, version 2007.*

13 *For other gender-specific references see pp. 8, 13, 15, 18, 23, 31.*

policy prioritizes the "mainstreaming of gender perspectives into programming at all levels over gender-targeted programmes", although National Societies may also implement projects to assist special groups of women or men, if local situations so require.[14]

IFRC Pledge 2093 on Gender (2012–2015), 31st International Conference of the Red Cross and Red Crescent, 2011

"The Red Cross Red Crescent/the IFRC hereby pledges to:

- implement the IFRC Gender Strategy
- systematically integrate a gender perspective into all policy work
- advocate for policies and legislation that tackle stigma and discrimination on the basis of gender
- create conditions favourable for gender balance at all levels in governance, management and staff and for gender-balanced representation in statutory bodies and meetings, where possible
- integrate a gender dimension when revising statutes
- promote and encourage work to understand a gender perspective in international humanitarian law."

IFRC Strategy on Violence Prevention, Mitigation and Response 2010–2020 (2011)

The *IFRC Strategy on Violence* covers GBV as a form of interpersonal violence. "Strategic Direction 4: Mitigation of social determinants of violence such as poverty, gender inequality, alcohol and substance misuse and abuse, and stress-related violence are addressed through targeted initiatives to support community functioning after disasters or crises."[15]

Youth Declaration (2009)

"We, the youth of the International Red Cross and Red Crescent Movement, commit ourselves to: embrace equal leadership opportunities for young women and young men;

We call on our National Societies to:

- declare that discrimination of any kind is unacceptable in our Movement, including discrimination based on gender and sexual orientation; and
- commit to achieving gender equality, especially in leadership; and
- renounce violence, promote non-discrimination and respect for diversity, and a culture of peace in the world."[16]

IFRC Pledge on Non-discrimination and Respect for Diversity, 28th International Conference of the Red Cross and Red Crescent 2003

The pledge commits the IFRC to contribute to the reduction of all forms of violence, discrimination and lack of respect for diversity. This includes promoting action to increase diversity among staff and volunteers, integrating respect for diversity and the promotion of non-discrimination into health, particularly HIV/AIDS, and disaster-response programmes, and focusing programme activity on groups that are marginalized.[17]

14 *IFRC Gender Policy. 1999.*

15 IFRC Strategy on Violence Prevention, Mitigation and Response 2010-2020*, 2011. See also* IFRC Pledge on Violence Prevention*, 31st International Conference of the Red Cross and Red Crescent 2011.*

16 *www.ifrc.org/Global/Publications/youth/170700-Youth_declaration-EN.pdf*

17 *Non-discrimination and respect for diversity: a pledge by the International Federation, 28th International Conference of the Red Cross and Red Crescent, 2003.*

1.2 External Frameworks and Experience

International conventions and resolutions

The following international and globally recognized conventions and resolutions are also a common reference for all of the IFRC's gender and diversity work:

- 1979 Convention on the Elimination of All Forms of Discrimination Against Women
- 1993 UN Declaration on the Elimination of Violence Against Women
- 1994 Programme of Action of the International Conference on Population and Development
- 1995 Declaration and Platform for Action of the Fourth World Conference on Women
- 2000 UN Security Council Resolution 1325 – Women, Peace and Security
- 2000 Millennium Declaration and Development Goals (MDGs). MDG 3 explicitly promotes gender equality and the empowerment of women.
- 2008 UN Security Council Resolution 1820 on Sexual Violence

In recent years, there has been a shift from needs-based (equity) approaches towards those which are rights based (equality) to address gender and diversity issues by humanitarian organizations, both within and outside of the IFRC. Equity remains important: if our humanitarian and developmental work is not informed by, and able to respond to, the different forms of vulnerability and need of different groups, then it runs the risk of excluding or discriminating against these groups. However, while equitable approaches to humanitarian and developmental assistance can improve the distribution of its benefits to those disadvantaged due to their gender or other characteristics, they rarely contribute to reducing the unequal power relations – and, therefore, access to resources and opportunities – of these groups.

This contributes to perpetuating vulnerability and humanitarian protection risks. For example, research has found that women are disproportionately vulnerable to the effects of natural disasters and climate change where their rights and socio-economic status are not equal to those of men, and where they have less voice and influence than men in shaping policies and prioritizing how resources to prevent or reduce adverse disaster- and climate-related impacts are used. In contrast, there is strong and mounting evidence that improving gender equality contributes to policy choices that lead to better environmental governance, whether through the increased representation and voice of women within their communities, in society at large, and at the political level, or by increased labour force participation.[18]

Ideas about masculinity – particularly those related to power within the household and broader society, ownership and control of resources, and the acceptability of violence against women – have a significant impact on the rights and well-being of women and girls. These gender-based norms and stereotypes also affect men and boys, and can have negative impacts on their health and well-being – e.g., when they cannot fulfil societal expectations of men being the main providers for their families or feel compelled to take very (unreasonably) high risks in protecting their families, property and communities from disaster impacts.[19] This form of gender-based discrimination against men and boys needs

18 *World Bank. 2011.* Gender and Climate Change: 3 Things You Should Know. *Washington DC: World Bank.*

19 *A Dimitrijevics (2007) in IFRC,* A practical guide to Gender-sensitive Approaches for Disaster Management, *Asia Pacific Zone, 2010, p 7.*

to be addressed too, while recognizing that gender inequality predominantly negatively impacts on women and girls.

Gender equality is important for men and boys too

The preliminary findings of the recent International Men and Gender Equality Survey, which involved over 8,000 men and 3,500 women participants in six countries (Brazil, Chile, Croatia, India, Mexico and Rwanda), illustrates the powerful influence of gender-based norms and attitudes on the health and well-being of women, girls, men and boys. Some of these include:

- Between 34 and 88 per cent of men surveyed suffered from stress or depression because of not having enough income or work. Men who experienced work-related stress were more likely to report depression, suicidal feelings, criminal arrests, and the use of violence against their partners.
- Men's rates of regular abuse of alcohol were high, varying from 23 to 69 per cent of those surveyed, with younger men and men with more inequitable gender attitudes more likely to regularly abuse alcohol.
- Men who reported more gender-equitable attitudes were more likely: to be happy; to talk to their partners about issues, stresses and decisions; and to have better sex lives.

Men in all countries surveyed, with the exception of one, were generally supportive of gender equality, with 87 to 90 per cent saying that "men do not lose out when women's rights are promoted".

Source: Barker, G., Contreras, J.M., Heilman, B., Singh, A.K., Verma, R.K. and Nascimento, M. Evolving Men: Initial Results from the International Men and Gender Equality Survey. *Washington, D.C.: International Center for Research on Women (ICRW) and Rio de Janeiro: Instituto Promundo. January 2011.*

So, achieving social justice or inclusiveness for women, girls, men and boys from all backgrounds has been found to be an equally important element of building the longer-term resilience of households and communities to disaster, health and other shocks. This requires measures to address the root causes of vulnerability or inequality and discrimination, as well as of the unequal distribution of power and unrealized rights that make socially marginalized women, girls and boys especially vulnerable to disasters, violence and other threats.

1.3 Lessons Learned by the IFRC

The IFRC Gender Policy was adopted in 1999 and reflects the main focus on gender equity of that period. The policy acknowledges the different roles and needs of women and men in society, how these are influenced by social and cultural factors, and the need for the actions taken by the IFRC and its National Societies to be gender sensitive. However, it does not call upon the IFRC Secretariat or National Society membership to actively oppose gender discrimination or to transform mindsets, attitudes and behaviours towards improving equality between women and men. Past evaluations and case studies carried out by the IFRC Secretariat and National Societies have shown the limited effectiveness of this approach and, in contrast, the positive impacts of a gender-equality approach on overall humanitarian outcomes.

A review of the impact of the gender policy was commissioned by the IFRC Secretariat's gender taskforce in 2007 (Gender Policy Review). The Gender Policy Review further confirmed such findings and strongly recommended that the IFRC and National Societies move towards an equality approach to gender, utilizing both gender mainstreaming and targeted systematic approaches where appropriate to specific zones and regions.

The Gender Policy Review also highlighted that the majority of IFRC and National Society emergency and development programming continues to be planned and implemented without adequate attention to gender. The review recommended the development of a global gender strategy and performance monitoring framework, along with supporting institutional measures. The *IFRC Pledge 2093 on Gender (2012–2015)* has subsequently proposed evaluation criteria for the IFRC Secretariat and National Societies.

Gender and diversity direction 15:

The IFRC and National Societies' statutes and internal regulations are updated in accordance with the evaluation criteria of the *IFRC Pledge 2093 on Gender* of the 31st International Conference of the Red Cross and Red Crescent (2011).

IFRC Pledge 2093 on gender (2012-2015): evaluation criteria

- At least 60 per cent of the National Societies sign up to the pledge.
- The *IFRC Gender Strategy*, including the performance framework, is implemented by at least 50 per cent of the National Societies.
- Regular updates of National Societies' statutes and internal regulations include the goal of achieving gender balance at all governance and management levels, including general staff, members and volunteers by the year 2020
- IFRC and National Society policies adopted between 2012 and 2015 and subsequent work have a focus on gender-related issues.
- Gender-based commitments are systematically included in annual IFRC and National Society programme work plans and budgets, reports and tools, with regular monitoring of achievements.
- There is evidence of improved gender balance within statutory bodies and at statutory meetings.

Source: IFRC Pledge 2093 on Gender (2012–2015), 31st International Conference of the Red Cross and Red Crescent, 2011

2. Why is gender and diversity important to the IFRC's work?

2.1 To reduce the human, economic and development impacts of gender inequality

At the global level, progress towards achieving gender equality has been made in the areas of life expectancy, the education of girls and participation of women in the labour force.[20] However, there are still some countries, and groups of women within these countries, that have not shared in this progress. This is especially the case for women who face other forms of exclusion such as poverty, ethnicity or disability; men in this situation are also disadvantaged, but exclusion based on both gender and diversity grounds often places women in an even worse position than these men as they can experience 'double discrimination'.[21] There are other areas where gender gaps have continued worldwide. These include inequalities in health, economic opportunity, and participation in decision-making in the household, the community and in politics.[22]

Human impact

Gender inequality in many societies means that girls are disadvantaged from birth. Particularly where resources are scarce, they are likely to receive less food, healthcare and education compared to that of their brothers. Even as gender gaps in educational enrolment are decreasing internationally, they remain significant for poor people and for those disadvantaged by other circumstances – e.g., remoteness, ethnicity, caste, race or disability.[23] Health inequity remains one of the main consequences of gender inequality: unequal power relations often prevent women from accessing health services and having control over their own health and that of their children. In contrast, gender norms about masculinity may prevent men from seeking medical assistance, particularly in areas like mental or reproductive health. People who are LGBT experience many social barriers to accessing health and other services too.

20 *The World Bank,* Gender equality and Development 2012. *World Development report.*
21 *OECD*
22 *Ibid.*
23 *Ibid.*

Women's abilities to own, control and dispose of property is less than that of men – sometimes due to legal barriers, but more often as a result of discrimination.[24] This means that women are often disadvantaged in controlling household assets and expanding their economic opportunities.

Statistics: human impact

- The majority of people with HIV in sub-Saharan Africa and certain countries in the Caribbean are women, and globally HIV/AIDS is the leading cause of death among women of reproductive age.[25]
- International studies show that around 20 per cent of women and 5 to 10 per cent of men report having been victims of sexual violence as children.[26] Two-thirds of the 75 million children worldwide denied the chance of schooling in 2007 were girls.[27]
- Female and male children who live in poorer households and rural areas, and whose mothers have had lower levels of education, are at a higher risk of dying before the age of five.[28]

Economic impact

Although women have entered the labor force in large numbers across much of the developing world in the past 25 years, this increased participation has not translated into equal employment opportunities or equal earnings for women and men. In almost all countries, women are more likely than men to engage in low-productivity activities and work in unpaid family employment or within the informal labour sector. As a result of these differences in where women and men work, gender gaps in earnings and productivity continue across all forms of economic activity – in agriculture, paid employment and in entrepreneurship.[29]

Research has shown that by getting rid of the barriers that discriminate against women productivity could be increased by as much as 25 per cent in some countries. Women now represent more than 40 per cent of the global labour force, 43 per cent of the agricultural workforce and more than half of the world's university students. For an economy to be functioning at its potential, women's skills and talents should be engaged in activities that make the best use of those abilities.[30]

Gender inequality, when it manifests as GBV and discrimination, can degrade local and national economies through direct costs to services such as health, justice, education, public safety and social services like child welfare, treatment and rehabilitation. The long-term indirect costs can include special education needs, mental health problems, substance abuse, teenage pregnancy, welfare services, homelessness, addictions and criminal behaviour. These costs may also include assumed costs of lost productivity associated with injury, imprisonment, unemployment, stress leave, or death.

24 *Ibid.*

25 *IFRC,* Eliminating Health Inequities- Every woman and every child counts, *p. 17.*

26 *WHO.* Fact sheet no. 239: Violence Against Women. *Geneva: WHO. September 2011.*

27 *IFRC. World Disaster Report 2011.* Focus on Hunger and Malnutrition. *Available at: www.ifrc.org*

28 *IFRC/The Partnership for Maternal, Newborn and Child Health (PMNCH).* Eliminating Health Inequities- Every woman and every child counts. *Geneva: IFRC, p.19, 2011.*

29 *The World Bank,* Gender Equality and Development 2012. *World Development report.*

30 *Ibid.*

Statistics: economic impact

- Seventy per cent of the world's 1.3 billion poor who live on 1 US dollar or less per day are women.[31]
- Data for 16 countries in five developing regions indicates that female-headed households are less likely to own and to farm land. On average, farms operated by women have lower yields than those operated by men, even for women and men in the same households and for women and men cultivating the same crops.[32]
- In the US, total costs of intimate partner violence exceed 5.8 billion US dollars each year, with 4.1 billion US dollars for direct medical and mental healthcare services and 0.9 billion US dollars for lost productivity.[33]

Development/resilience-building impact

Investments in gender equality contribute directly to reducing vulnerability to disasters and enhancing access to health and education. These investments also yield some of the highest developmental returns such as reduced maternal mortality, better educated and healthier children, higher household incomes and stronger economic growth – all of which collectively help in developing safer and more resilient communities.

Statistics: development impact

- Gender equality in education makes significant contributions to a nation's economic growth and poverty reduction as well as to reduced malnutrition, fertility and child mortality.[35] A country failing to meet gender education targets would suffer a deficit in per-capita income of 0.1 to 0.3 percentage points.[36]
- According to the Food and Agricultural Organisation's latest estimates, 925 million people are currently undernourished. Closing the gender gap in agricultural yields could bring that number down by as much as 100 to 150 million people.[37]
- Of 8·2 million fewer deaths in children younger than five years in the last 40 years, half could be due to increased educational attainment in women of reproductive age. For every one-year increase in the average education of women of reproductive age, a country experienced a 9.5 per cent decrease in child deaths.[38]

2.2 To get better results from our humanitarian operations and development programmes

Gender and diversity are key considerations in ensuring that the full scope of our efforts as humanitarian actors actually reaches the most vulnerable people with the greatest needs and that sustainable community resilience is built.

The relationships between women and men are powerful forces in every society. The way these relationships are defined creates differences in the roles and responsibilities of women and men. It can also lead to inequalities in their

31 *ILO. Facts on Women at Work. Undated.*

32 *World Bank.* Gender Equality and Development 2012. *World Development report.*

33 *WHO.* The economic dimensions of interpersonal violence, *p. 21, 2004.*

34 *AusAid.* Gender equality in Australia's aid program – why and how. *Government of Australia. 2007.*

35 Making Change Happen: Actions Necessary to Accelerate the Achievement of all Millennium Development Goals.

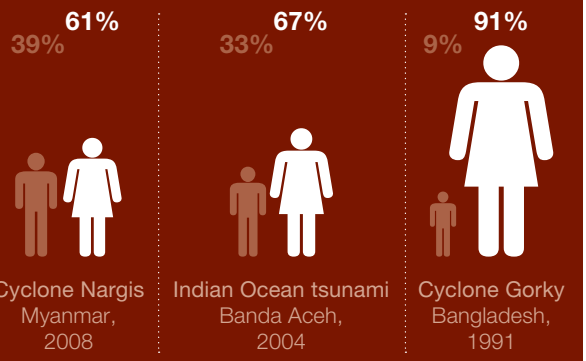
36 *Abu-Ghaida, Dina and Klasen, Stephan.* The Costs of Missing the Millennium Development Goals on Gender Equity, *Institute for the Study of Labor Discussion Paper 1031, 2004.*

37 *FAO.* The State of Food and Agriculture 2010–2011, *Rome, 2011.*

38 *Gakidu, E. et al.,* The Lancet, *Volume 376, Issue 9745. September 2010.*

access to, and control over, resources (i.e., who inherits land or can get credit from the bank) and decision-making powers (i.e., who has a voice and is an active member of community councils and committees). The combined effect of these differences and inequalities means that women and girls and men and boys face different types and levels of exposure and vulnerability to the risks and impacts of health issues, disasters, climate change, and violence. Gender-based behaviours and stereotypes about what women and men can and cannot do, or should and should not do, can further contribute to gender-based discrimination, sometimes with devastating consequences. Women and men may face additional discrimination based on race, ethnicity, age, language, disability, sexuality, class or religion, further increasing their vulnerability.

Percentage of women killed, compared to men, as a result of major disasters across Asia:



Source: World Bank. Gender and Disaster Risk Management. Guidance Note 1: Making Women's Voices Count: Addressing Gender Issues in Disaster Risk Management in East Asia and the Pacific. Washington D.C.: World Bank 2011.

Usually, women have additional disadvantages because of their gender compared to that of men. These disadvantages are greater within some communities and cultures, especially when women are single, divorced, widowed or childless. At the same time, gender-based behaviours and stereotypes can also have negative effects on men and boys. For example, the majority of the victims of Hurricane Mitch in El Salvador and Guatemala in 1998 were men, as a result of societal concepts of masculinity that forced men to feel they had to take very high risks in protecting their families, property and communities.[39]

There are costs associated with ignoring the gender and diversity aspects of programming. For instance, women can be discouraged from utilizing healthcare services when healthcare providers either intentionally or unconsciously provide care that embarrasses, humiliates or fails to respect women.[40] Research further indicates that gender-blind responses to disasters can reinforce, perpetuate and increase existing gender inequalities, making bad situations worse for women and other vulnerable groups; such approaches also reduce the benefits of disaster-risk-management interventions.[41]

The experience of the IFRC and our National Societies, as well as of other humanitarian organizations, has shown the importance of understanding the different needs, vulnerabilities and capabilities of different gender, age and socio-economic groups in the places where we are working and applying this knowledge to our decision-making processes. Such analysis helps to ensure that our programming responses are appropriate, whether humanitarian or developmental, and that they do not discriminate against people or reinforce existing inequalities; it also highlights the skills and capabilities that women and men can bring to the process of building community resilience. For example, gender and diversity-sensitive multi-sector village-level assessments carried out by the Myanmar Red Cross following Cyclone Nargis (in 2008) found that landless female labourers were having particular difficulty finding employment to meet the immediate basic needs of their families. The Myanmar Red Cross, supported by the IFRC, was able to adjust the design of a post-disaster public works programme to facilitate the participation of these women, including addressing their childcare needs.[42]

39 *Dimitrijevics, A. in IFRC,* A Practical Guide to Gender-sensitive Approaches for Disaster Management*, p.7, 2007.*

40 *IFRC/The Partnership for Maternal, Newborn and Child Health (PMNCH).* Eliminating Health Inequities - Every Woman and Child Counts*. Geneva: IFRC, p.23.*

41 *World Bank.* Gender and Disaster Risk Management Guidance Note 1, Making Women Count: Addressing Gender Issues in Disaster Risk Management in East Asia and the Pacific. *Washington D.C.: World Bank, 2011.*

42 *IFRC.* A Practical Guide to Gender-sensitive Approaches for Disaster Management. *Kuala Lumpur: IFRC Asia Pacific Zone, 2010.*

Gender analysis: what is it and why is it important to our work?

Gender analysis examines the relationships between females and males. It examines their roles, their access to and control of resources and the constraints they face. A prerequisite for all assessments is to access all vulnerable groups, and through participatory dialogue, to assess different needs and capacities of women, girls, boys and men. This is done in focus groups -either separate or jointly. Such dialogue is the basis for collecting data disaggregated by sex and other grounds of diversity, and will enable the identification of marginalized groups and their different vulnerabilities. The dialogues with each group are the basis for designing targeted, relevant and objective actions with and for vulnerable communities.

A gender analysis should be integrated into needs assessments, sector assessments and situational analyses - both for emergency operations and longer term development initiatives in health, disaster risk reduction, and other areas of Red Cross Red Crescent work. Doing so facilitates a better understanding of what members of the population are vulnerable to or affected by during a particular or evolving set of circumstances, as well as a recognition of what they need and what they can do for themselves. Gender analysis skills require gender trained staff and volunteers, with the added benefit that IFRC staff and volunteers become more aware of gender and cultural diversity.

Experience has demonstrated that there is also a need to analyse the power relationships that influence gender-based roles, responsibilities and programming outcomes. Humanitarian advocacy on gender and diversity issues must be based on knowledge and evidence of what works most effectively in different socio-cultural situations. Men, along with women, must be actively consulted and involved to ensure the success of efforts to improve gender equality. This includes enlisting the support of men for actions to improve women's equality, as well as targeted actions to address male health, disaster and other social vulnerabilities.

Afghanistan: Effective Approaches to Local Gender Context

To address the unique challenges of maternal, child and newborn health in remote regions of Afghanistan, the Afghan Red Crescent developed an approach to community health that recognized local and cultural values. The Afghan Red Crescent began by recruiting and training two female master trainers at the National Society's headquarters in Kabul. The two women, who worked on the condition that they were accompanied by their male relatives, travelled to remote regions of the country and met with community leaders. The female master trainers discussed the benefits of involving women volunteers in health promotion and sought advice on recruiting women volunteers. Based on these conversations, the Afghan Red Crescent recruited and trained women in remote villages through a culturally sensitive approach. Female facilitators led the trainings and no male facilitators were allowed to enter. The female Red Crescent volunteers are making an important contribution to promoting women's health-seeking behaviour and access to services. They deliver key health messages to women living in villages, perform simple health interventions and refer women to health clinics for antenatal and prenatal care and family planning.

Source: IFRC/The Partnership for Maternal, Newborn and Child Health (PMNCH). Eliminating Health Inequities - Every Woman and Every Child Counts*. Geneva: IFRC, p.26, 2011.*

2.3 To contribute to achieving the aims of *Strategy 2020*

2.3.1 Save lives, protect livelihoods and strengthen recovery from disasters and crises (Strategic Aim 1)

Gender inequality affects all areas of disaster management, from response to recovery to risk reduction. At times of disasters, individual, family and community stress increases. There is a heightened sense of instability, insecurity and fear, a loss of autonomy, and dependency on others for assistance.[43] As a result, those who have been discriminated against and marginalized prior to a disaster or crisis situation have an even higher risk of experiencing to gender-based discrimination and GBV after a disaster. For example, transgendered people have been unable to access communal emergency shelters in some countries, exposing them to the risk of rape and other forms of abuse.[44] At the same time, disasters can provide an opportunity to rebuild more inclusive societies and improve gender equality as populations tend to be more open to such changes following a disaster.[45]

Gender and diversity direction 1:

Potential and actual issues of gender-based and diversity-based discrimination, as well as opportunities to promote equality, are identified and acted upon through all programmes, services and tools (covering the full management cycle from assessment to planning, monitoring, evaluation and reporting) of disaster/crisis preparedness, response and recovery programming.

A lack of understanding of the diversity and gender aspects of the disaster's impact can also delay the equitable distribution of relief and recovery assistance. In other words, impartiality (lack of prejudice) in recognizing and prioritizing needs among crises-affected populations requires data and a linking of that data to processes of decision-making and response. Without proper or disaggregated data and analysis of that data, one cannot estimate the scale or type of need required by the population.

Gender and diversity direction 2:

Specific mechanisms and actions to reduce the incidence and impact of gender- and diversity-based violence are systematically built into disaster/crisis preparedness, response and recovery programming. Risk factors and protective measures are highlighted in communications campaigns, beneficiary communication mechanisms and humanitarian diplomacy.

Response. *Strategy 2020* requires that all humanitarian assistance be sensitive to gender, age and other socio-economic considerations. The need to act fast when providing disaster relief can sometimes hide the equally important but less visible requirement for it to be given with careful planning and a sound understanding of the local situation to ensure it is appropriate and equitable. Women and minority groups frequently have less social, economic and political power and are not represented as well in formal leadership structures compared to those of men. However, these structures are often the first and main point of contact for relief personnel. Consulting with a socially and economically representative cross-section of affected women and men and those from other diverse backgrounds is essential for effective targeting, as is their participation in decision-making, even if it is only possible in a limited form in the early days of the emergency.

Some of the many barriers faced by women in emergency situations include overcrowded and inadequately designed camps, inappropriate and unsafe location of shelters, as well as a lack of access to adequate and useful forms of humanitarian relief.[46] Lessons learned from recent disasters and emergencies show that the limited access to women and girls in the aftermath of a disaster

43 *Australian Red Cross.* Violence and the Pacific Islands Evidence Summary 6: Emergency Situations. *2010.*

44 *IFRC.* A Practical Guide to Gender-sensitive Approaches for Disaster Management. *Kuala Lumpur: IFRC Asia Pacific Zone Office, 2010.*

45 *Mazuana, D., Benelli, P., Gupta, H. and Walker, P.* Improving Humanitarian Response in Emergencies. *Boston: Feinstein International Center. August 2011.*

46 *IFRC. World Disasters Report,* Focus on Discrimination, *2007.*

is linked to having few or no female volunteers within relief and recovery teams, due to cultural and social constraints. National Societies have begun volunteer recruitment and training programmes to attract more female volunteers for disaster preparedness (Bangladesh) and disaster response (Pakistan). Evaluations made by the IFRC Secretariat and National Societies' emergency health operations in Haiti showed that significant health inequities exist between women and men. Access to health services for women and girls was less than that of men, due mainly to a lack of, or costly, transport, as well as a fear of leaving their small children alone while seeking help.

In many countries the responsibilities of women as primary family caregivers, and as a result of their reproductive role, can lead to some specific post-disaster coping needs that are different to those of men. Women frequently step in to take care of children who may have been separated from their families or orphaned, together with caring for older or disabled household members. In developing countries, in a crisis situation it is estimated that one out of five women of child-bearing age is likely to be pregnant.[47] This demographic fact makes it vital for IFRC and National Society emergency health response actions to systematically address the needs of pregnant women. The consequences of a disaster during these critical times can include miscarriages, premature deliveries, stillbirths, complications, infertility, as well as high infant and maternal mortality.

Post-disaster, it is important to protect those at risk of GBV. Sensitive dialogue and analysis with local groups to identify those vulnerable to GBV is a first step, followed by activities to raise awareness and engage local authorities and communities in putting in place appropriate protection measures. Culturally-sensitive psychosocial support should also be provided to men, women and children affected by violence. In addition, counselling services are required by means of responding to cases of post-traumatic stress disorder and the normally increased rates of depression and substance abuse that follow disasters.[48] This is particularly the case for men, who are often missed in the provision of such support.

Additionally, during the 30th International Conference in 2007, a *Red Cross Red Crescent Pledge on Abuse of Power* was endorsed that recognizes the special responsibility of Red Cross Red Crescent personnel, as embodied in the fundamental principles, to create and maintain safe environments in our workplaces and for all those who we seek to assist. The pledge includes: a zero-tolerance approach towards sexual exploitation and abuse; promotion of safe environments for all vulnerable populations; promotion of awareness on the abuse of power and capacity building in preventative approaches; and collaboration with other organizations to eliminate abuse of power.[49]

Recovery. *Strategy 2020* calls for recovery to be carried out in such a way as to rebuild more inclusive societies and reduce vulnerability to future disasters. The key economic contributions by women to the survival of poor households are not always adequately understood or recognized by recovery planners, especially when these households are headed by women or when male family members have migrated to find work elsewhere. As women's contributions often occur within the informal sector, or in ancillary roles to male household members (e.g., caring for cash crops, running home-based businesses, etc.), their input is not always visible. Existing socio-cultural perceptions of men as being the main family breadwinners may reinforce this lack of visibility.

Consequently, livelihoods recovery programmes may focus mainly on men's needs and fail to provide or replace the assets necessary for women to resume their economic activities. Such programmes may provide inappropriate assets based

47 *UNFPA, "Supplies for childbirth can save lives". Available at: www.unfpa.org/public/supplies/pid/3638*

48 *Canadian Red Cross/IFRC.* Predictable, Preventable: Best Practices for Addressing Interpersonal and Self-Directed Violence During and After Disasters. *Red Cross, 2010. Ottawa: Canadian Red Cross. 2012*

49 *Reinforced by* Violence Prevention Pledge, *31st International Conference of the Red Cross and Red Crescent. "The International Federation pledges to mainstream violence prevention, mitigation and response across IFRC operations, programmes and services, including internal policies and procedures." 2011.*

on assumptions about women's roles and needs (e.g., sewing machines when the priority should be fish processing tools) or not record the losses of key assets of women like jewellery or gardening tools. For instance, in Tamil Nadu, India, the need of lower-caste women to have the use of catamarans for collecting edible shells went largely unrecognized after the Asian tsunami, while men's fishing boats were replaced in a number of affected communities.[50] Such actions can badly impact on the recovery of the entire household. In contrast, women can be provided with opportunities to learn new skills, such as construction trades, which has been successfully done in several countries in the Americas and in Asia. This has contributed to higher incomes for these women, as well as to greater community safety when combined with training in safe rebuilding techniques.

Women's dual production and domestic responsibilities can be a further barrier to participation in livelihoods-related activities, whether aimed at disaster risk reduction or recovery. This is due to high workloads (especially for female-headed households), timing clashes of training or income-generating activities with responsibilities such as meal preparation, or worksites that do not provide childcare facilities.

Case Study: Addressing Women's Time Poverty in a Public Works Programme

Following Cyclone Nargis in Myanmar in 2008, the Myanmar Red Cross Society (MRCS) and the IFRC put in place a cash-for-work project for the most vulnerable affected households. Village-level multi-sectoral recovery assessments revealed that these groups included: single-male and female-headed households; those aged 55 or older and in need of employment; households with eight or more dependents; the disabled; landless casual labourers; and labour-dependent families.

It became clear during preparatory community meetings that the selected female beneficiaries, especially those with large families and those who were heads of households, found it difficult to participate in a full day of work due to their responsibilities at the household level in looking after family members. In response, the MRCS provided childcare facilities on site, as well as taking measures to promote women's participation at worksites on a case-by-case basis. Wage payments were made directly to the women and not to other family members, to ensure they had direct access to the funds to meet household needs.

Source: IFRC. A Practical Guide to Gender-sensitive Approaches for Disaster Management*, 2010.*

Disasters can also have major effects on the roles of women and men. For instance, women are frequently forced to step into the gaps left by men as wage-earners or providers if they are injured or killed.[51] However, livelihoods recovery programming that is focused on male household heads can bypass these women. On the other hand, households which have lost their adult female members may not have the skills to cook, to care for young children or to do household chores; men may need support to learn these skills or to avoid a post-disaster increase in marriages to underage girls. Common (or stereotypical) assumptions about women and men's roles can make these forms of gender-based vulnerability invisible.

It is also vital that women and men from all social and economic groupings in disaster-affected communities actively participate in the design and location of reconstructed housing and communal infrastructure. In post-tsunami Sri Lanka, for instance, women had no say in the design of most of the temporary housing. As a result, dwellings were built that lacked adequate kitchen facilities. The absence of safe cooking areas led to smoke and fire hazards, and some houses burned down.[52]

50 *C Pincha in IFRC,* A practical guide to Gender-sensitive Approaches for Disaster Management*, p.26, 2008.*

51 *IASC. Gender Handbook:* The Basics on Gender in Emergencies.

52 *IFRC.* A Practical Guide to Gender-sensitive Approaches for Disaster Management.*p.25, 2010*

Disaster preparedness. Women, girls and boys are 14 times more likely to die during a disaster than men.[53] A combination of gender-based socio-cultural constraints, physiological differences and other factors contributes to this situation. For instance, women and children usually have less physical strength than men. Women and girls may have restricted mobility and/or have to wear restrictive clothing, or may not be taught skills such as climbing or swimming, which hinder self-rescue.[54] However, men have died in greater numbers than women in some disasters (e.g., flash floods) largely due to their expected roles in search and rescue. Increased gender sensitivity in IFRC programming requires efforts to analyse these various risk factors and find culturally appropriate ways to address them to increase the safety for all genders and age groups.

Careful attention must also be paid to ensuring the full participation of women, girls, men and boys from the different socio-economic or cultural groups in the design and implementation of disaster-preparedness systems. For instance, in Indonesia, the American and Indonesian Red Cross Societies found that many women and children could not reach designated safe places on time during emergency evacuation drills conducted in Acehnese communities. The community-level evacuation systems being established had been designed by, and tested on, men alone. A gender review revealed this fault; the approach was then revised to include both women and men, and a better result was achieved.[55]

2.3.2 Enable healthy and safe living (Strategic Aim 2)

Gender and diversity direction 3:

Access to primary healthcare services is improved for vulnerable women, girls, men and boys – especially those related to sexual and reproductive health, HIV/AIDS, and maternal and newborn children's health.

Health. *Strategy 2020* supports improved healthcare for the most vulnerable people, including making health services more accessible and sensitive to both gender and age. Many of the world's most vulnerable women and children die needlessly because of unequal access to information, prevention, treatment and services to meet their most basic needs. Gender inequality lies at the heart of health inequities. The IFRC recommends taking a holistic approach in eliminating health inequalities which focuses on ensuring easy access to healthcare and to reliable, evidence-based and accurate information on health. It also involves the promotion of gender equality by empowering women and girls, and encouraging the support of men and boys.[56]

Access to primary healthcare services for all genders and those from other diverse backgrounds, without discrimination, is essential, particularly those related to sexual and reproductive health and HIV/AIDS. There are laws and public policies that prevent ready access to health services, such as regulations that require spousal permission to access reproductive health services or those that limit availability of life-saving treatment for pregnancy-related complications. Cultural and social stigma associated with sex, sexuality, rape and HIV and AIDS may also prevent women, girls and LGBT people from seeking or receiving medical services. This is especially true in the case of girls when expected not to be sexually active yet and therefore assumed not to need sexual health services. It is also the case for men who have sex with men[57] – they are 19 times more likely to contract HIV/AIDS than the general population (33 times more likely in the Americas).[58]

Taking gender and diversity issues into account is important when working to improve the access of all to health services, such as making female health practitioners available in situations where male-female interaction is restricted

53 *UNDP,* Gender and Disasters*, October 2012, p.2.*

54 *IFRC.* A Practical Guide to Gender-sensitive Approaches for Disaster Management*, p.7, 2010.*

55 *Ibid.*

56 *IFRC.* Eliminating health inequities – every woman and every child counts*, 2011.*

57 *Male persons who engage in sexual activity with members of the same sex, regardless of how they identify themselves; many men choose not to (or cannot for other reasons) accept sexual identities of homosexual or bisexual but engage in sexual relations with other men.*

58 *Baral, S. et al.* Elevated Risk for HIV infection among men who have sex with men in low- and middle-income countries 2000-2006: a systematic review. *PLoS Med; 4(12): e339. doi:10.1371/journal.pmed.0040339. 2010*

or providing mobile health clinics for female-headed households and families with disabled or older family members. Accessibility can be a problem for men too. For example, where social norms of masculinity expect men 'to be strong', men's psychosocial (mental health) needs often go untreated because of cultural norms; this may inhibit men from expressing pain, fear or their own perceived inability to fulfil their traditional roles as family providers. In addition, many caregiving systems are more directed towards female service providers ('feminized caregiving systems') which can disadvantage men, who often don't speak to women about their problems. The *World report on violence and health* found that there were three male suicides worldwide for every female suicide.[59] Cultural accessibility also includes delivering prevention, treatment, care and support in languages spoken and understood by all patients.

The Impact of Gender Stereotypes on HIV/AIDS Caregiving in Sub-Saharan Africa

Gender segregation of occupations, which typically assigns caring and nurturing jobs to women and technical and managerial jobs to men, has been recognized as a major source of global inequality with implications for the development of robust health workforces. In sub-Saharan Africa, gender inequalities are particularly high in HIV/AIDS caregiving (90 per cent of which is provided in the home), where women and girls make up the informal and mostly unpaid workforce. Men and boys' entry into HIV/AIDS caregiving in greater numbers would both increase the equity and sustainability of national and community-level HIV/AIDS caregiving and avoid health workforce shortages; however, this is hindered by stereotypes and beliefs about what is considered to be appropriate work for women and men.(1) The activities of the Southern African Red Cross Society involve men in HIV/AIDS home-based care through the recruitment of male care facilitators, as well as in the Prevention of Mother to Child Transmission. (2)

Sources: (1) "Occupational segregation, gender essentialism and male primacy as major barriers to equity in HIV/AIDS caregiving: Findings from Lesotho" in International Journal for Equity in Health, *10:24, 2011; and (2) Statement by Markku Niskala, Secretary General, on the occasion of International Women's Day, in Geneva, 2008.*

Gender and diversity direction 4:

Obstacles to, and opportunities for, building the resilience of women, girls, men, and boys and diverse groups are identified and incorporated into the assessment, planning, implementation, and monitoring and evaluation stages of disaster risk reduction and climate change adaptation programming (e.g. community-based disaster preparedness, mitigation activities, livelihoods or other activities).

Secure land tenure and control over resources contribute towards the welfare of women and their entire family. Statistics reveal that in countries where women lack any right to own land, there is, on average, 60 per cent more malnourished children. In situations where women lack any access to bank credit the number of malnourished children is as high as 85 per cent above average.[60] Ensuring equal male-female access to land ownership directly contributes to reducing poverty, HIV/AIDS and violence.[61] National Societies can use humanitarian diplomacy to promote more equitable land titling and property rights. Some post-disaster reconstruction projects of National Societies have supported governments to issue land titles in both women and men's names.

Disaster risk reduction and climate change adaptation. *Strategy 2020* focuses on comprehensive community action to eliminate or reduce disaster risks and strengthen coping skills. It recognizes that the exposure and vulnerability of women, men and children is different and each requires that special attention be paid to their specific needs and coping mechanisms.

Women are often not adequately involved in the selection, design and implementation of community-based disaster risk reduction and climate change activities: most often these take the form of public works to protect against environmental hazards. Even though women's views may be sought in a vulnerability and

59 *Krug, E., Dahlbert, L., Mercy, J., Zwi, A. and Lozano, R. (Eds.), 2002.* World report on violence and health. *Geneva: WHO.*

60 *OECD.* At issue. Gender inequality and the MDGs: What are the Missing Dimensions? *September 2010.*

61 *Grown, C., Gupta, G.R., Kes, A.* Taking action: achieving gender equality and empowering women, *p. 9. Millennium Project. 2005.*

capacity assessment (VCA) or other participatory planning exercise, a gender analysis of this information is not often carried out to inform programme design nor are their priorities given as much weight as those of men. This frequently reflects the low participation rates of women in local decision-making bodies or their lower status in society. The end result is that important opportunities are lost in developing their resilience to disaster and climate impacts, which can contribute to overall household vulnerability.

Women's education levels, socio-cultural values about appropriate roles for women, mobility and other factors can also act as barriers to their effective participation in disaster risk reduction and climate change programming. They can find it particularly difficult to gain access to training and capacity building support, such as extension advice on drought- or flood-resistant crops or ways to diversify their household income sources, both key to strengthening resilience to future current and future risks.[62] This has also been the case for poor, male farmers in some countries, where those farmers who are better off have traditionally been the targets of such support. Again, this highlights the importance of analysing the social (diversity) and gender situation to ensure programmes are designed so that they are accessible to, and benefit, all members of the community.

Gender and diversity direction 10:

Gender- and diversity-sensitive approaches and learning materials are included in all staff and volunteer capacity-building initiatives at national, branch and community levels.

Some National Societies and other organizations have avoided or reduced these gender issues by: training their staff and volunteers in gender analysis; creating targets for female participation in programme decision-making bodies; requiring at least one priority activity of women be supported; and developing action plans and performance indicators for gender-sensitive outcomes.

Gender and diversity direction 5:

Opportunities are created within communities, both specifically and as an element of broader developmental programmes and humanitarian operations, for learning and dialogue to promote gender equality and respect for diversity and to prevent gender- and diversity-based discrimination. This includes engagement with community, indigenous or religious leaders to build support for actions to transform gender relations and promote equality.

2.3.3 Promote social inclusion and a culture of non-violence and peace (Strategic Aim 3)

Strategy 2020 incorporates a strong focus on striving towards equality at all levels of the IFRC and, in our work, to ensure there is no discrimination on the basis of gender or diversity. This involves making sure that the composition and working of National Societies reflects the diversity of their catchment populations, including representation from vulnerable groups. It also entails the equitable allocation of programming benefits and access to services, as well as participation by women, men and diverse groups in decision-making roles. In addition, the Strategy on Violence identifies specific strategic directions to promote social inclusion and a culture of non-violence and peace (Nos. 9 to 11).

In terms of internal equality, past studies have shown that there has been an under-representation of women among IFRC staff, especially at the senior level, and among volunteers in some countries. A survey of National Societies found that only 36 per cent of secretaries general and only 23 per cent of presidents were female.[63] There is a need to create an enabling environment for the career progression and promotion of talented women at all levels, for instance, taking into account their specific needs as family caretakers.[64] As an example, the Bangladesh Red Crescent has developed effective strategies for recruiting female volunteers over many years through measures such as:

62 *Dimitrijevics, A. 2007 in IFRC, 2010.* A Practical Guide to Gender-sensitive Approaches for Disaster Management.

63 *IFRC. Workshop Report: Promoting Gender Equality and a Culture of Non-Violence and Peace, 18th Session of the IFRC General Assembly, p.1, 23-25 November 2011. See also: Gender recommendations from the Humanitarian Principles and Diplomacy Advisory Body to the Governing Board, GB/15/1, June 2012.*

64 *Ibid.*

targeting advocacy for female recruitment at influential groups like parents, spouses and community leaders; promoting female staff and volunteers as role models; designing flexible work schedules that include women-friendly time-slots; arranging transportation for fieldwork; providing support for childcare; and creating a safe and supportive work environment.[65]

Gender and diversity direction 9:

The different needs, constraints and motivations for volunteering among women and men are analysed and actions identified to ensure gender and diversity balance among volunteers, and equal access to opportunities.

To ensure balanced representation by gender and diversity – and therefore greater internal understanding and sensitivity towards gender and social inequality in the communities in which we work – it requires senior management commitment, internal organizational needs assessment, strategic planning and fair workplace practices. For example, in 2007, the IFRC Secretariat developed a staff Code of Conduct[66] and Anti-Harassment Guidelines[67] that prohibit all forms of discriminatory behaviour and abuses of authority in its workplaces. In addition to internal procedures established to enforce the Code of Conduct, an independent specialist private-sector firm – Safecall – was engaged to provide a 24-hour confidential complaint filing service. Some National Societies have adopted the IFRC Secretariat's code and guidelines also, while others have developed their own anti-discrimination and anti-harassment mechanisms in line with local legislation or policies. The Sexual Harassment Policy developed by the Fiji Red Cross in 2006, with accompanying complaints and investigation procedures, was subsequently adopted (with adaptations) by several Fijian commercial employers.[68]

The experience of the IFRC and a number of our National Societies is that the promotion of social inclusion, including specific measures to combat the gender and social inequality that leads to discrimination and GBV, requires changing attitudes, mindsets and ways of working, both internally and within the communities and governments whom we seek to support.[69] Otherwise, the incomplete implementation of the Gender Policy seen to date will continue. The Youth as Agents of Behavioural Change (YABC) initiative is an example of an approach that is challenging socially determined gender roles effectively; it is also enabling young women and men to actually understand and apply the fundamental principles to their work with families and communities using practical influencing strategies.[70] Similar methods can be created for experience sharing, peer support and the development of influencing strategies on social (diversity) and gender equality across a range of disciplines and regions.

65 *IFRC.* A Practical Guide to Gender-sensitive Approaches for Disaster Management*, p.44, 2010.*

66 *Mandatory for all IFRC secretariat staff (Geneva-based, delegates and local staff), consultants, volunteers, interns, staff-on-loan as well as individuals working under the IFRC name and legal status.*

67 *To ensure a harassment-free working environment for all staff, the guidelines reiterate the IFRC Secretariat's zero-tolerance policy pertaining to any form of harassment. In defining different forms of harassment, it clearly states, "Harassment in a general sense may take various forms, such as abuse of authority harassment, sexual harassment and psychological harassment. The third example includes bullying, badgering, pestering, intimidating, maliciously teasing others due to race, gender, religion, disability, age, national or ethnic identity, sexual orientation, family status and the like." The guidelines also provide practical advice on how to analyse, report and resolve incidents.*

68 *Burton, C.* Australian Red Cross Thematic Evaluation Gender Integration in Disaster Preparedness Programs in Asia and the Pacific: Fiji Case Study. *Melbourne: Australian Red Cross, 2009.*

69 The Red Cross Red Crescent approach to promoting a culture of non-violence and peace*, IFRC, 2011,* Pledge on skills and values-based education*, 31st International Conference of the Red Cross and Red Crescent, 2011.*

70 *IFRC.* Youth as Agents of Behavioural Change – Change Yourself and Act*. Geneva: IFRC, November 2011.*

Reducing Gender Inequality Through Skills and Values-based Education

Skills and values-based education is a key tool for personal and societal transformation. Promoting respect for diversity at an early age by engaging with children and youth in various activities can help to reduce future discrimination based on gender. This can have far-reaching impacts by helping, more generally, to change common or perceived gender roles, thereby creating greater and more equal opportunities. It can also help to reduce GBV, of which gender inequality is a root cause. The importance of skills and values-based education has been recognized in the Skills and Values-based Education Pledge passed at the 31st International Conference of the Red Cross and Red Crescent in 2011. Interpersonal skills essential to further a culture of non-violence and peace built on equal gender relations are: active listening, critical thinking, dropping bias and judgement, non-violent communication, personal resilience and collaborative negotiation and mediation. The YABC toolkit contains more than 30 non-cognitive exercises to develop and practise these 'soft' role-modelling skills, which is key to ensuring the translation into practice of the Fundamental Principles of the International Red Cross and Red Crescent Movement and inspiring a change of mindsets, attitudes and behaviours in the community

Source: IFRC. The Red Cross Red Crescent Approach to Promoting a Culture of Non-violence and Peace. Geneva: IFRC, pp.8&9, 2011. November 2011. Pledge on skills and values-based education, 31st International Conference of the Red Cross and Red Crescent, 2011. Youth as Agents of Behavioural Change - Change Yourself and Act. Geneva: IFRC, 2011.

Gender and diversity direction 6:

Programmes are implemented to promote non-stereotypical (open-minded) attitudes towards gender and diversity and to develop interpersonal skills such as critical thinking, non-violent communication and mediation.

At the national level, the role of National Societies as a humanitarian support to their governments puts us in a good position to enter into dialogue with the authorities and influence decision-making on gender and diversity equality issues, e.g., "to ratify and or implement international conventions, such as the Convention on the Elimination of All Forms of Discrimination Against Women", as recommended by workshop participants at the 18th IFRC General Assembly in 2011.[71] Advocacy needs to also include the sharing of evidence regarding the impacts of gender and social inequality and developing initiatives to reduce or eliminate inequality.

Migration and Gender: A Need for Awareness-Raising and Education

The IFRC's 2009 Policy on Migration highlights the particular forms of social exclusion and vulnerability experienced by migrants and calls on the IFRC Secretariat and National Societies to combine immediate humanitarian action for migrants in urgent need with longer-term assistance and empowerment. Until recently, migration was mainly regarded as a male phenomenon. Today, though, women account for almost half of the world's migrant population. Both female and male migrants have diverse experiences and differing vulnerabilities, but migration holds more dangers for women than men. They are more vulnerable to physical, sexual and verbal abuse when travelling and more likely to fall prey to human traffickers for the sex industry. An estimated 80 per cent of the 500,000 to two million people trafficked annually are women and girls, with most traded illegally into the commercial sex industry, including forced prostitution and slavery. Nevertheless, in some cases, men are also the target of trafficking; since the focus is usually on women, these men can find themselves in even more risky situations. Men and boys account for up to 44 per cent globally of those subjected to forced economic exploitation. Many live in slave-like conditions in construction, agriculture and industrial work.

Sources: Belser, P., de Cock, M. and Mehranm F. ILO Minimum Estimate of Forced Labour in the World. Geneva: ILO, p.4, 2005; IOM, undated. Gender and Migration Factsheet. Geneva: IOM, pp 2-3; United States Department of State, June 2005. Trafficking in Persons Report. Washington D.C.: US Department of State.

71 *Ibid.*

There is extensive evidence from both inside and outside of the IFRC that increasing the representation of women and diverse groups in decision-making to levels proportionate to their presence in the local population improves the relevance, appropriateness, effectiveness and sustainability of programming. However, this will only occur if the representatives receive training and support to build their skills and confidence to play such roles and raise awareness among community leaders to foster their support. The setting of gender and diversity targets and quotas has also been found to be instrumental in achieving such change.[72]

Gender-based violence (GBV). *Strategy 2020* identifies violence as a consequence of social inequality and discrimination, including against women and girls because of their gender. The complementary *Strategy on Violence* frames GBV as a form of interpersonal violence and incorporates its prevention, mitigation and response within its strategic directions (Nos. 2 and 4).

GBV has been described as a global pandemic. Women, girls, men, boys and LGBT people all experience it. GBV can include physical, sexual, psychological and economic abuse, and it cuts across boundaries of age, race, culture, wealth and geography. It has many forms — from the most universally prevalent types of domestic and sexual violence, to sex trafficking, harmful practices, abuse during pregnancy, so-called 'honour killings' and other types of femicide (the killing of women). Violence against women and girls is the most widespread form of GBV. Globally, up to six out of every ten women experience physical and/or sexual violence in their lifetimes. The most common form is physical violence inflicted by an intimate partner.[73] Several worldwide surveys suggest that half of all women who die from homicide are killed by their current or former husbands or partners.[74]

Violence against women and girls has far-reaching consequences, harming families and communities. For women and girls 16 to 44 years old, violence is a major cause of death and disability. A World Bank study on 10 selected risk factors facing women and girls in this age group found rape and domestic violence to be more dangerous than cancer, motor vehicle accidents, war and malaria. A survey among 1,366 South African women showed that those who were beaten by their partners were 48 per cent more likely to be infected with HIV/AIDS than women who were not. GBV not only violates human rights, but also hinders productivity and challenges economic growth in terms of time lost and the cost of medical services.[75]

Violence, sexual harassment and abuse of women and female or male children typically increase after a crisis. Shocks resulting in the collapse of protective civil and administrative systems, increased individual and community stress, individuals relying on harmful coping mechanisms such as alcohol and drugs, and crowded and insecure environments, present opportunities for people to misuse their power. For example, increased violence against women was noted in reports from the Philippines after the eruption of Mount Pinatubo, in Central and North America after Hurricane Mitch and in several countries after the 2004 Indian Ocean Tsunami.[76] Such risks are often overlooked by officials due to social or cultural reluctance to address them.

There is increasing international awareness of the prevalence and consequences of GBV against men and boys. The 2010 *International Men and Gender Equality Survey* in six countries found that, as boys, 20 to 85 per cent of men had experienced psychological violence, 26 to 67 per cent of men had experienced physical violence, and one to 21 per cent had experienced sexual violence.[77] Violence is also among the leading causes of death for men in Latin America and the Caribbean.[78] Male survivors of sexual violence are even less likely than

72 *Thakur, S.G., Arnold, C. and Johnson, T.* Gender and Social Protection. *Paris: OECD, 2009.*

73 *UN Women website on Violence against Women, June 2012.*

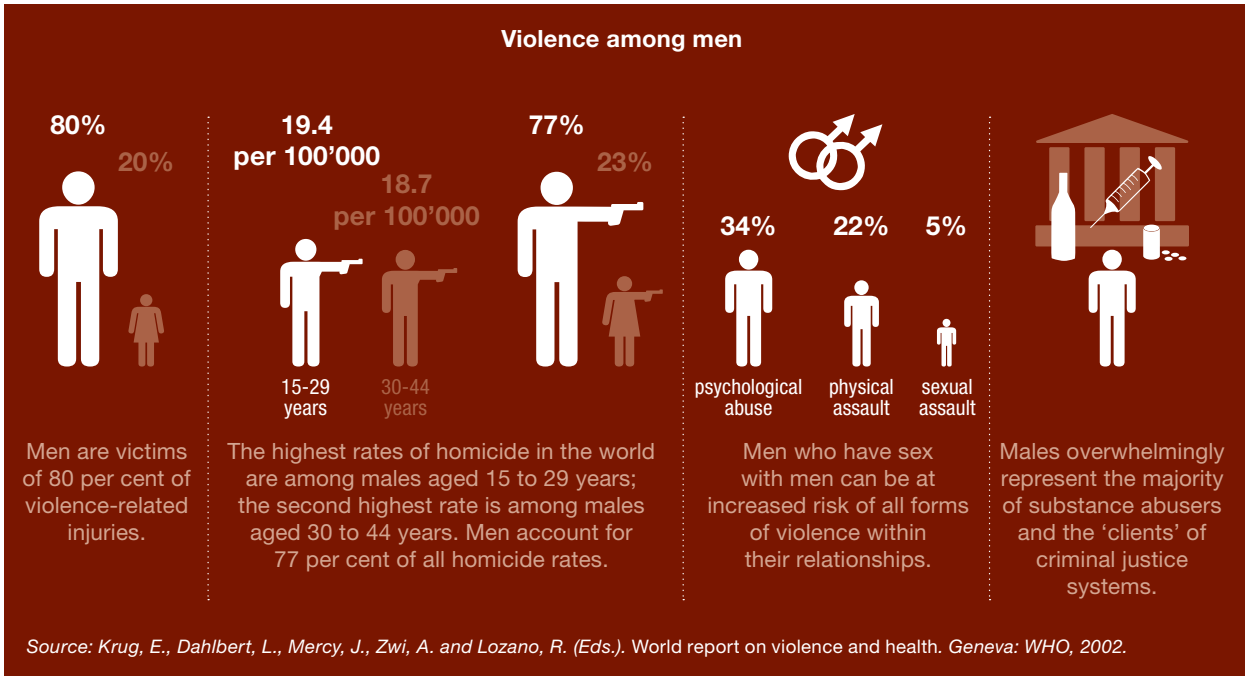
74 *UN. United Nations Secretary General's Campaign to End Violence Against Women website, 2012.*

75 *Ibid.*

76 *UN-IASC.* Protecting Persons Affected by Natural Disasters: UN/IASC Operational Guidelines on Human Rights and Natural Disaster. *Geneva: UN-IASC, 2006.*

77 *Contreras, M., Heilman, B., Barker. G. et al.* Bridges to Adulthood: Understanding the Lifelong Influence of Men's Childhood Experience of Violence Analyzing Data from the International Men and Gender Equality Survey. *Washington D.C.: International Center for Research on Women and Rio de Janeiro: Instituto Promundo. April 2012.*

78 *World Bank. Gender-based Violence website, 2012.*



women and girls to report assaults; like women and girls, male survivors of adult or childhood sexual violence can display a wide range of severe physical and psychological consequences of their experiences. However, most doctors, counsellors and humanitarian workers are not trained to look for signs of sexual abuse in males or may not see men as being vulnerable to sexual violence in the first place.[79]

Men's own experiences of violence as children can be a key factor in their continuation of GBV as adults (i.e., psychological, physical, sexual violence or witnessing their mothers being beaten by their partners). Adult men who were victims or witnesses of domestic violence as children are likely to come to accept violence as a conflict-resolving tactic not only in intimate partnerships but also in their other relationships. Experiences of violence as children can also significantly influence how men relate to their partners and children and whether they show more or less gender-equitable attitudes (e.g., to household decision-making roles). Additionally, these men are more likely to experience low self-esteem and depression.

On the other hand, parents' educational achievement, fathers' participation in domestic duties or childcare, and equitable decision-making in the childhood home can all reduce the likelihood of violence.[80] In Honduras, where family health is mainly seen as the sole responsibility of women, the Red Cross Society, with support from the Canadian Red Cross, developed an innovative initiative called 'Redes' (Spanish for 'networks'), which promotes men's participation in maternal, newborn and child health. Taking part in pregnancy, birth and postpartum activities has enabled men to challenge their own views on gender roles, engage in active fatherhood and to positively influence attitudes and behaviours within the community.[81]

Young males are one of the groups most affected by urban violence, and at risk of co-option into crime. Inadequate male role models and gender stereotypes often promote risk-taking behaviours such as high-speed driving, alcohol and substance abuse, and involvement in criminal activities and gangs. In addition, while imprisoned, young males can be (systematically) raped, or forced into sex slavery, without any reaction or assistance from government or society.

79 *Sexual Violence Research Initiative, undated.* Briefing Paper: Care and Support of Male Survivors of Conflict-Related Sexual Violence. *Place of publication/ publisher not stated.*

80 *Contreras, M., Heilman, B., Barker, G. et al.* Bridges to Adulthood: Understanding the Lifelong Influence of Men's Childhood Experience of Violence Analyzing Data from the International Men and Gender Equality Survey. *Washington D.C.: International Center for Research on Women and Rio de Janeiro: Instituto Promundo. April 2012.*

81 *IFRC.* The road to resilience: bridging relief and development for a more sustainable future, *discussion paper. , June 2012. See also: opening address by Dr Katrien Beeckman, Head, Principles and Values Department, International Federation of Red Cross and Red Crescent Societies,* 1st International Conference on Family-Based Prevention and Positive Parenting, *8 June 2012.*

Many states and societies also try to pressure individuals to conform with socially or culturally dominant norms about what constitutes appropriate sexual behaviour and orientation. This may be done through social exclusion and rejection, acts of physical violence and/or by the legal system. For instance, in some countries, homosexual activity is punishable by law, which will prevent men (and women) from disclosing their sexual orientation and accessing health services or support. The policing of sexuality remains a major force behind continuing gender inequality and GBV.[82]

Case Study: Empowering Communities to Fight Against GBV in Malawi

The Dzaleka refugee camp in Malawi is the temporary home of over 10,000 refugees, the majority of whom come from Burundi, the Democratic Republic of the Congo and Rwanda. Life in the camp is difficult. Some men turn to violence, and women and children in the camp are vulnerable to physical and sexual abuse. As Janette Honore, a volunteer with the anti-gender-based violence committee, explains, "A girl may need soap and lotion. Instead of just helping her, the men want sexual favours." Because violence against women is a critical health issue and a violation of human rights, the Malawi Red Cross empowers refugees in the camp to take control of GBV in their communities. The Malawi Red Cross raises awareness of GBV among refugees and equips them with the knowledge and skills to respond to it. The Red Cross distributes leaflets and key messages, and trains volunteers to conduct GBV education in the language spoken in the camp. In addition, it helps resolve GBV by means of mediation, psychosocial counselling and income-generating activities for victims. If necessary, it also provides support for victims seeking justice through the formal legal system. Sergeant Christopher Sibale sees the success of the Malawi Red Cross by the increase in the number of reported cases. Before, people were "victimized and disdained", but now they come forward. Awareness activities have "really had an impact".

Source: IFRC/PNMCH. Eliminating Health Inequities – Every Woman and Child Counts. *Geneva: IFRC, p.18. , 2011.*

Gender inequality and gender-based discrimination are key contributing factors to GBV. In order to build community safety, it is essential to create opportunities within communities for learning and dialogue to promote gender equality and to prevent gender-based discrimination and GBV. Addressing discrimination and violence against women, girls, men, boys and LGBT people often requires tackling harmful cultural practices and gender-based stereotypes using community-based participatory approaches. A number of methods to address GBV have been adopted by National Societies across the world, including the YABC initiative.

Gender and diversity direction 7:

Opportunities are created to promote the equal sharing of power and participation in political, economic and other decision-making processes for women, girls, men, boys and those from other diverse backgrounds.

Gender and diversity direction 12:

Public policies and practices that exclude and alienate groups based on gender and other forms of diversity are identified, and policies and legislation that address gender- and diversity-based stigma, discrimination and violence are advocated and promoted.

Advocacy as well as educational and social mobilization activities are needed at all levels. This includes constructive dialogue with governments about harmful or enabling policies or legislation. An example is the membership of the Irish Red Cross in a National Consultative Group on Ireland's National Action Plan to implement *UN Security Council Resolution 1325 on Women, Peace and Security* which promotes more sustainable and representative conflict resolution and peace building through greater inclusiveness and participation by women.

82 *The Yogyakarta Principles on the Application of International Human Rights Law in relation to Sexual Orientation and Gender Identity (2007) highlights the primary obligation of States to implement human rights for LGBT people.*

3. Conceptual framework

3.1 Gender and diversity within the framework of the Fundamental Principles of the International Red Cross and Red Crescent Movement and *Strategy 2020*

A focus on both the needs and rights of disadvantaged vulnerable groups is compatible with, and reinforces, the Fundamental Principles of the Red Cross and Red Crescent Movement – in particular the principles of impartiality, humanity and unity – and their core humanitarian values, especially non-discrimination and respect for diversity.

The fundamental principle of **impartiality** prohibits discrimination, officially defined by the Red Cross Red Crescent's Council of Delegates in 2005 as: "Any kind of adverse distinction or segregation targeting certain individuals for the sole reason that they belong to a particular category," such as gender, race, ethnicity, religion, sexuality or class.[83] Gender, as a category of discrimination, was first specifically described in the IFRC's *Strategy 2010*. In addition, in its requirement to make decisions based on objective rules without taking sides for reasons of interest or affinity, impartiality requires each individual to drop bias and prejudice.

The fundamental principle of **unity** calls for 'multi-dynamism' or openness to all, so as to reflect the diversity of the population, in terms of gender, geographic or ethnic origin, religious origin, age, and other characteristics.[84] This is also considered essential to the integrity of the Red Cross Red Crescent Movement's modus operandi (approach) and status as impartial to safeguard access to the vulnerable. The overarching fundamental principle of **humanity** requires the IFRC to alleviate and prevent human suffering. This includes specific measures both to reach the disadvantaged and constructive advocacy on behalf of the vulnerable to raise their interests and concerns in key

83 *The Red Cross Red Crescent Council of Delegates is a statutory meeting that takes place every two years involving the entire International Red Cross and Red Crescent Movement (currently comprised of 188 National Societies, the IFRC and the ICRC.*

84 *Pictet, Jean. The Fundamental Principles of the International Red Cross and Red Crescent Movement, Commentary, Geneva, 1979.*

decision-making forums. While care must be taken to ensure that advocacy for certain groups of vulnerable people and responsiveness to their situations does not become misinterpreted as taking sides, and contrary to the fundamental principle of **neutrality**, neutrality should not also be used as an excuse for lack of action.

Gender and diversity direction 13:

Accountability mechanisms are put in place in relation to gender and diversity issues within the IFRC. In particular, it is intended for key elements of this strategic framework, including standards for addressing discrimination and gender-based violence in humanitarian action, to be incorporated into the development of any future IFRC accountability framework.

For all of these reasons, along with the broader evolution of the humanitarian context over time, the IFRC takes the approach of being a **needs-based organization informed by rights**. In practical terms, this means that the IFRC combines equity measures with the promotion of respect for the specific human rights of disadvantaged people in our work, in line with our overall approach to constructive humanitarian diplomacy.

This approach is reflected throughout our *Strategy 2020*, particularly Strategic Aim 3: "to promote social inclusion and a culture of non-violence and peace." It specifically calls for the IFRC Secretariat and National Societies to ensure there is no gender-based or other discrimination in the allocation of resources and benefits (equity), nor in participation in decision-making roles (equality). It also calls on National Societies to advocate with their governments to ratify human rights conventions and engage in social mobilisation and educational initiatives to change mindsets, attitudes and behaviours.

Strategy 2020: Approach to Equality

- We actively counter social prejudice, and encourage tolerance and respect for the many different perspectives that are to be expected in a diverse world.
- We work proactively in a number of ways to change social attitudes.
- We tackle stigma and discrimination through the way that we carry out all our work. This includes the design of our disaster management, health and social services to ensure that they tackle prejudice and harmful attitudes and practices through education, advocacy and social mobilization

Source: IFRC Strategy 2020*, 2009.*

3.2 Strategic approach to gender and diversity

The IFRC Strategic Framework on Gender and Diversity Issues incorporates measures to enhance gender equality and respect for diversity within the IFRC itself as an organization and in the work we do, in accordance with our fundamental principles, policies and current strategic directions.

Gender and diversity direction 8:

National Society gender and diversity focal points are in place and IFRC regional gender and diversity networks are created.

Its operationalization is centred around three outcomes: (1) incorporation of gender and diversity into programmes, services and tools; (2) improvement of gender and diversity composition at all organizational levels; and (3) reduction of gender- and diversity based inequality, discrimination and violence through

the active promotion of fundamental principles and humanitarian values. (See IFRC Strategic Framework for Gender and Diversity Issues, pages 6 and 7)

Three Overall Gender and Diversity Outcomes

- **Outcome 1:** Systematic incorporation of gender and diversity in all programmes, services and tools (covering the full management cycle from assessment to planning, monitoring, evaluation and reporting).
- **Outcome 2:** Improved gender and diversity composition at all levels (governance, management, staff and volunteers).
- **Outcome 3:** Reduced gender- and diversity-based inequality, discrimination, and violence through the active promotion of fundamental principles and humanitarian values

The IFRC views gender and diversity as closely linked factors in inequitable and discriminatory behaviour and practices. These factors can interrelate and, by doing so, reinforce negative impact. For instance, a disabled girl from an ethnic minority is likely to be subject to multiple grounds of discrimination (gender, physical or mental impairment and ethnicity). Therefore, the strategic framework focuses on taking mutually beneficial and reinforcing actions in both areas.

Gender is often incorrectly used as a synonym (word meaning the same as another) to refer to issues exclusively related to women, when men and those who identify themselves as being LGBT can also suffer from gender discrimination and GBV. The IFRC Strategic Framework on Gender and Diversity Issues is inclusive and takes into account "all those who are vulnerable to inequality, harm and loss of basic rights" because of their gender: women, girls, men, boys and those who self-identify as LGBT.

Gender and diversity direction 11:

Decision-makers and opinion-leaders are persuaded – through proactive engagement and dialogue by IFRC Secretariat, governance and all National Society leaders – to act, at all times, in the interests of vulnerable people by protecting their equal rights and ensuring their equal access to humanitarian services. This includes addressing the specific needs of women, girls, men, boys, people who are lesbian, gay, transsexual or bisexual (LGTB) and those from other diverse backgrounds.

Gender and diversity direction 14:

A coordinated approach throughout the IFRC to carry out resource mobilization for gender and diversity activities is in place. Funds are allocated to support the gender- and diversity-specific assessment, planning, implementation, reporting and evaluation initiatives within programmes.

The strategic framework emphasizes the importance of increased and more effective engagement in humanitarian diplomacy on gender and diversity issues, including making greater use of evidence-based approaches and targeted actions to educate and build the support of male community leaders and members for gender equality and initiatives to end GBV.

Like *Strategy 2020*, this strategic framework also recognizes that we must first 'start with ourselves',[85] acting as role models for gender equality and respect for diversity. This means that the IFRC Secretariat and National Societies will take measures to ensure that our staff and volunteer profiles reflect the balance of gender and diversity within our catchment populations, including representation from vulnerable groups. We will also act to ensure that there is no gender-based or other discrimination in the ways in which we work with our staff, volunteers and beneficiaries nor in the ways in which we plan and deliver our humanitarian and developmental assistance.

85 *IFRC.* Strategy 2020*, pp. 17&18, 2010.*

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

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

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

Neutrality In order to enjoy the confidence of all, the Movement may not take sides in hostilities or engage 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 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.

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