



Yogita Rai, 15, shows her fellow students how to wash hands properly in Himali secondary school in Dharan, Nepal / photo: Päivi Ängeslevä

## **Annual Programme Report 2019**

### **MFA Programme grant 2018–2021**

# Annual Report 2019

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## Yhteenveto

Vuonna 2019 SPR:n kansainvälisen avustustoiminnan kokonaisvolyymi oli 28,6 miljoonaa euroa, josta kehitysyhteistyöhön käytettiin noin 38 %. UM-rahoitteinen ohjelma puolestaan kattoi noin 59 % eli vähän yli 6,5 miljoonaa euroa SPR:n pitkäkestoisesta tuesta sisaryhdistyksilleen. Ohjelman fokus pysyi aiempien vuosien tapaan maissa ja yhteisöissä, joilla on erityisen vahva riski jäädä kehityksestä jälkeen. Ohjelma toteutettiin 10 maassa Afrikassa ja 4 maassa Aasiassa, joista Kenia, Norsunluurannikko ja Zimbabwe kärsivät erityisistä yhteiskunnalliseen tilanteeseen ja luonnonkatastrofeihin liittyviin riskeihin vaikka eivät olekaan enää kaikkein vähiten keittyneiden maiden listalla. Uusina partnereina ohjelmaan lisättiin yksi maailman köyhimmistä maista, Niger kun taas yhteistyötä ohjelman puitteissa lopeteltiin suunnitellusti Kambodžhan ja Norsunluurannikon Punaisten Ristien kanssa. Kenian Punainen Risti puolestaan jatkaa SPR:n ohjelmatyön kumppanina kahden uuden, lisärahaa hakuun suunnitellun pilottiohjelman kanssa. Odotetusti ohjelma kohdentui edelleen suurimmaksi osaksi Afrikkaan (62 %), kun taas Aasian osuus on pysynyt vakaassa neljänneksessä (26 %).

Vuonna 2019 usea humanitaarinen kriisi vaikeutti ohjelman läpivientiä sisaryhdistyksen kanssa, joiden rooli kansallisesti on ensisijaisesti usein humanitaarinen. Afganistanin, Nigerin, Etiopian, Malawin, Zimbabwen, Kenian, Etelä-Sudanin, Burundin ja Somalian kansalliset yhdistykset avustivat vuoden aikana kansalaisiaan niin tulvien, kuivuuden, ruokaturvattomuuden, poliittisten levottomuuksien ja konfliktin seurauksista selviämässä. Erityisesti pitkäkestoinen kuivuus – ja alueelle iskenyt sykloonin Idai ja sitä seuranneet rankkasateet kurjastivat tilannetta laajoissa osissa Eteläistä Afrikkaa. Nepalissa kansalaisjärjestöjä koskevaan lainsäädännön uudistus puolestaan herätti lainopillisen kiistan kansallisen yhdistyksen statuksesta, mikä halvaannutti kansallisen yhdistyksen toimintaa vuoden aikana.

SPR:n poliittisessa toimintaympäristössä tapahtui vuonna 2019 suuri muutos Punaisen Ristin ja Punaisen Puolikuun yhdistysten hyväksyessä kansainvälisen liittonsa (IFRC) yleiskokouksessa liikkeelle uuden 10-vuotisstrategian. Strategia 2030 korostaa lokalisaationäkökulmasta erityisesti tarvetta rakentaa globaalia Punaisen Ristin liikkeen verkostoa vahvojen kansallisten yhdistysten varaan. Se ottaa myös vahvasti kantaa ilmasto- ja ympäristökriisiin ja katastrofien luonteiden muuttumiseen pitkäkestoisiksi, toistuviksi ja alueellisiksi sekä terveys- ja hyvinvointierojen kasvun maailmanlaajuisesti. Ilmastoasioiden lisäksi maahanmuutto, tasa-arvo- ja identiteetti- ja inklusiokysymykset nostetaan rohkeammin esiin kuin koskaan ennen.

Sisällöllisesti ohjelma jatkoi temaattista keskittymistään terveyteen (johon sisältyy olennaisesti puhdas vesi ja hyvä sanitaatio) ja katastrofivalmiuteen. Hitaasti kehittyviin katastrofeihin kuuluu ohjelmassa myös syklinen kuivuus sekä ilmastomuutoksen vaikutukset, joiden myötä kestävien elinkeinojen vahvistaminen on viime aikoina tullut myös osaksi ohjelman toimintavalikkoa. Myös varhaisen varoituksen ja vasteen (*early warning, early action*) järjestelmien kehittäminen ja osana sitä säätietojen hyödyntäminen on noussut viime vuosina ohjelman uusiksi tulosalueiksi. Vuonna 2019 ohjelma otti aimo harppauksen eteenpäin läpileikkaavien tavoitteiden vahvistamisesta ohjelmassa erityisesti Afrikan osalta. Drivereina tässä toimi paitsi lisärahoituksen antamat mahdollisuudet, myös DEMOKSEN suorittama SPR:n 2018-2020 ohjelman oppiva arviointi, joka keskittyi nimenomaan ruotimaan Punaisen Ristin työn lisäarvoa UM:n nykyisille painopistealueilla. Lisärahoituksen vaikutus ja uudistetut tulostavoitteet kirjattiin vuoden 2020 vuosisuunnitelmaan, mutta jo vuonna 2019 ohjelma pyrki aktiivisesti vahvistamaan eri komponenteissaan vammaisinklusiota, ilmastomuutoksen seurauksiin sopeutumista, naisten ja tyttöjen pääsyä seksuaali- ja lisääntymisterveyspalveluiden pariin sekä Punaisen Ristin kapasiteettia toimia vaikeasti saavutettavien alueiden ja ihmisryhmien parissa. Erityisiä onnistumisia tällä saralla koettiin mm. Etelä-Sudanissa, Sierra Leonessa ja Somaliassa, jossa naisten ympärileikkauksen vastaisen työn etenemisessä sekä Keniassa, Nigerissä ja Myanmarissa seksuaali- ja lisääntymisterveyspalveluiden ulottamisessa nuoriin naisiin. Myös vammaisinklusiioon kiinnitettiin erityistä huomiota linkittämällä kansallisia yhdistyksiä paikallisiin vammaisyhdistyksiin Abiloksen tuella mm. Etiopiassa.

Ohjelman toinen pääasiallinen tulostavoitealue, SPR:n tuki sisaryhdistysten järjestökehitykselle nostettiin myös tukevammin keskiöön vuoden 2019 ohjelmatyössä sekä uudistetussa ohjelman tuloskehikossa. Useat partnerit, kuten Somalian Punainen Puolikuu, Afganistanin Punainen Puolikuu sekä Kenian, Etiopian ja Etelä-Sudanin Punaiset Ristit etenivät odotetusti omien järjestökehityssuunnitelmien kanssa, mutta talousvaikeuksista kärsivät erityisesti Burundin, Sierra Leonen ja Zimbabwen Punaiset Ristit. Kestävän talouspohjan kehittäminen (*financial sustainability*) päätettiin nostaa yhdeksi SPR:n järjestökehitystuen lippulaivaksi vuonna 2019 ja paljon työtä tehtiin niin Suomessa kuin yhteisillä foorumeilla Genevessä käsitteen avaamiseksi ja toimintamallin luomiseksi tasapainoisen talouden tukemiseksi eri yhdistyksissä.

# 1. Programme progress in 2019

## 1.1. Implementation overview

The total volume of Finnish Red Cross (FRC) international assistance in 2019 was EUR 28.6 million. Humanitarian assistance was provided with 17.6 million euros and development aid with 11 million euros, the main sources of funding being the Ministry for Foreign Affairs of Finland (MFA), Europe Aid and private companies and donors. The MFA Programme’s annual expenditure in 2019 covered 59 % of the 11 million euros spent on long-term programmes by FRC in 2019. A key added value of the Finnish Red Cross for Finnish development cooperation is in working in protracted conflicts or crises with a combination of development and humanitarian aid. In 2019, the countries to which the FRC allocated both MFA development and humanitarian funding included Afghanistan, Ethiopia, Niger, Somalia and South Sudan.

Major humanitarian efforts of the Finnish Red Cross in 2019 included the deployment of a field hospital for the Cyclone Idai operation in Mozambique and addressing the protracted food security crisis in Southern Africa with cash and food

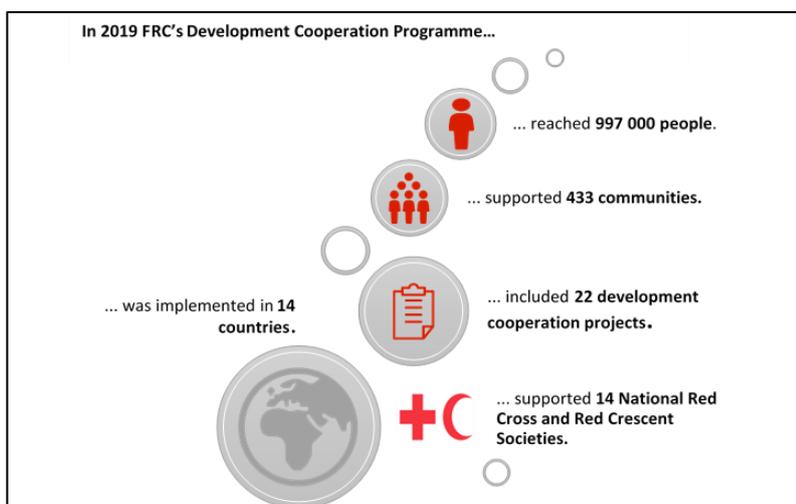


Figure 1. Overview of programme scope in 2019

distributions to over 100,000 affected people with a grant of EUR 5 million from ECHO. Other humanitarian operations with Finnish Red Cross direct involvement included the field hospital service delivery in the Al-Hol refugee camp in Syria under the International Committee of the Red Cross (ICRC) and the deployment of Logistics and Communications Emergency Response Units to the Cyclone Dorian operation in the Bahamas. Of the international assistance provided by the Finnish Red Cross, 71% was targeted at Africa. In 2019, the Programme delivered assistance to 14 countries in Africa and Asia, namely to Afghanistan, Burundi, Cambodia, Côte d'Ivoire, Ethiopia, Kenya, Malawi, Myanmar, Nepal, Niger, Sierra Leone, Somalia, South Sudan and Zimbabwe,

reaching 997,253 beneficiaries in 433 communities, of whom 57% were women and 43% men.

### The Programme continued to focus on the most vulnerable countries and contexts

In the spirit of the 2030 Agenda, the Programme continued to focus on countries with a genuine danger of *'being left behind'* from the Sustainable Development Goals (SDGs). Of the 14 countries, all countries except Kenya, Côte d'Ivoire and Zimbabwe are least developed countries (LDCs) or suffer from a high or very high concentration of diverse natural or human-made risks and/or fragility. For example in Afghanistan, the focus was on rural and hard-to-reach areas, including so-called 'white zones' where no governmental health facilities existed.

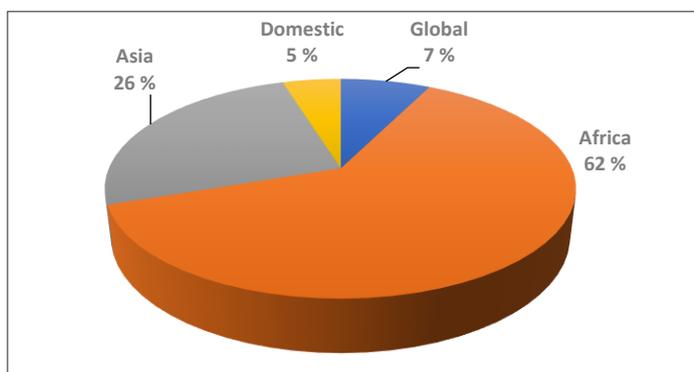


Figure 2. Geographical distribution of Programme expenditure in 2019

Exit processes with Côte d'Ivoire and Cambodia were finalised as planned in 2019, whereas piloting new programme approaches with the Kenya Red Cross Society in the field of Sexual and Reproductive Health and Climate Change with additional MFA Africa funding granted in early 2020 will still continue. Niger, which is suffering from a complex regional emergency besides being one of the poorest countries in the world, was included in the Programme in 2019 as a new LDC partner from Africa.

The share of Africa, the largest target region for the Programme activities, continued to grow from 56% in 2018 to 62% in 2019. Consequently, the highest share of people (56% all people targeted) reached with Programme activities were located in Africa. In 2019, the Programme provided support to 433 communities with the help of 4,539 trained volunteers.

During 2019, the number of Programme activities organised as projects increased from 18 to 22 as a result of new projects being planned while earlier ones were being finalised. An increase in the geographical and population coverage of supported community resilience programmes has also become a new Programme standard: for a third consecutive year, the number of people reached during the reporting year grew in comparison with the previous year. The higher number of projects supported in 2019 contributed to the increased population coverage but the main factor behind this increase is the rise in the number of people reached in Afghanistan. In 2019, the project entered new communities there, reaching a high number of people with several different integrated activities aimed at a variety of target groups.

The Programme's largest community support programmes were run in Africa by the Somali Red Crescent Society and the Malawi Red Cross Society and in Asia by the Nepal Red Cross Society. These programmes exceeded the volume of 600,000 euros, closely followed by the programmes of the South Sudan Red Cross and the Myanmar Red Cross Society. However, the year 2019 was a very difficult implementation year for a number of partners that were balancing between immediate humanitarian crises and long-term needs, with little room for increasing the coverage of their volunteer-based community support. In 2019, various Programme partner countries continued to struggle with protracted crises and impacts of natural disasters. Political events and disasters, though not always affecting the specific geographical areas of FRC-supported interventions, do divert resources from longer-term programming and result in delays as the National Red Cross/Red Crescent Society is in many cases the only civil society organisation mandated to provide emergency services in such scenarios.

#### **National Societies' nexus role strongly reflected in the Programme implementation**

**In Africa**, the Southern Africa food security crisis and the impact of Cyclone Idai, affected both *Malawi* and *Zimbabwe*. In Zimbabwe, the cash-based food assistance operation in project district was started with crisis modifier Programme funds to carry over the lean season. In March 2019, Cyclone Idai caused severe flooding in southern Malawi, which particularly affected the target district of Chikwawa and also Mangochi to a certain extent. A large-scale early response project was undertaken, and the subsequent recovery project is still ongoing. East Africa also suffered from a severe drought until the last quarter of the year when both East and West Africa witnessed large scale flooding. These floods affected FRC support primarily in *Sierra Leone*, while in East Africa the FRC assisted flood response both in *Kenya* and *South Sudan*. In Sierra Leone, flooding with a high windstorm took place around the beach area in Lakka in September 2019, damaging houses and causing 200 people to be displaced. A small re-allocation was made from the programme budget and food and non-food items were distributed to target households. The response was, however, relatively slow and a rapid identification of target households proved to be challenging.

Socio-political unrest was experienced in 2019 in *Malawi*, *Zimbabwe*, *South Sudan* and *Burundi* and the conflict in *Somalia* continued. In *South Sudan*, despite a revitalised peace agreement instilling hope that the worst of the fighting in the country could be over, resulting in improved access for the humanitarian community, violence persisted in areas loyal to political groupings that were not party to the peace agreement, making it difficult to access such areas. In *Ethiopia*, outbursts of ethnic violence and climate shocks left some 3.2 million people displaced at the peak of the crisis between January and April. On the other hand, since the appointment of Dr Abiy Ahmed as Prime Minister of Ethiopia in April 2018 there has been an opening of the political space and political, legal and policy reforms have been ongoing. This has also led to a more democratic regulatory framework reopening space for civil society organisations and human rights related work.

Despite localised communal conflicts which interrupted Red Cross operations at community level due to concern for the security of staff and volunteers, the South Sudan Red Cross, the Burundi Red Cross and the Somali Red Crescent were able to adapt their operational modalities to the situation and managed to implement the long-term programmes as planned. This was not the case in Zimbabwe, where episodes of social unrest and violence in January 2019 as well as economic and social hardships impacted the National Society staff in the same way as all citizens and resulted in relocating some international personnel temporarily out of the country, overriding the long-term operational priorities for the National Society. The new Forecast-Based Action project aiming at developing the National Society's capacities in early response to disasters did not progress during the difficult year the National Society was facing. Also in Ethiopia, the remake of the current health programme implemented in the periodically drought/flooding affected Afar region with stronger emphasis to climate change did not progress as planned. In 2019, the largest budgetary reallocations in Africa were made towards Malawi (+40%) where the large resilience programme run by the Malawi Red Cross Society and supported by multiple partners was able to adapt its activities and target the prevailing food insecurity situation in true nexus spirit.

**In Asia**, the annual monsoon and tropical storm seasons in 2019 did not have a similar impact on Programme implementation as the ongoing conflicts in *Afghanistan* and *Myanmar* did. In 2019, Afghanistan's armed conflict resulted in over 10,000 civilian casualties for the sixth consecutive year (UNAMA). There was a decrease in the number of Islamic State of Iraq and Syria (ISIS) victims, while the number of victims of Taliban and the international military forces increased. Violence hampered the operational space of civil society organisations, and all parties of the conflict violated international humanitarian law (IHL) through targeting civilians and healthcare facilities. Even the International Committee of the Red Cross (ICRC) had to hand over some assistance operations to the Afghan Red Crescent Society (ARCS), which still has nationwide access. Delays in the implementation of the multilateral health and WASH activities supported by the Finnish Red Cross through the IFRC reduced the planned budget for Afghanistan by almost 40%. In Myanmar, the human rights situation continued to be contested both at international forums and locally. Throughout 2019, humanitarian access was restricted in parts of central Rakhine and Kachin and northern Shan but the ICRC was exempted from the ban. FRC's long-term programmes supported with MFA funding are not in the contested conflict areas but the prolonged travel authorisation process did cause delays in and challenges to monitoring and planning of the new FRC-supported health programme in Loilen, which consequently reduced the planned expenditure in Myanmar.

The Red Cross Red Crescent National Societies do not only have the nexus role in their countries but they also mirror the overall institutional cultures of their countries to some extent and are not detached from complex national political and economic challenges. Several FRC partners in the region are either finalising institutional transformation/restructuring plans (Sierra Leone, Malawi, Somalia, Ethiopia), or found themselves in a situation of insolvency during 2019 (Zimbabwe, Côte d'Ivoire). This affects their ability to fully implement cooperation programmes, and considerable resources and attention from their leadership go to the management of the institutional difficulties and immediate service delivery at the cost of more long-term institutional development.

In Nepal, new restrictive laws were introduced in 2019 concerning the work of domestic and international non-governmental organisations (NGOs). Many NGOs reported increased bureaucracy in relation to visas, project agreements and negotiations with governmental actors. The more regulated operational environment also impacted the Nepal Red Cross Society (NRCS), which uniquely among Red Cross societies is under an NGO status lacking a Geneva conventions -based national mandate. The NRCS has also been impacted by negative media attention and accusations towards NGOs, which has increased over the years and led to interventions by the government. The federalisation process in 2019 moved decision-making power and funds from the district level – where the Red Cross has traditionally had a strong presence – to the municipal and provincial level. These changes challenged the NRCS organisational structure and management and considerably delayed the plans to merge current community resilience programmes into one new programmatic entity in 2019.

#### **Thematic Programme focus remained in community resilience building**

Thematically the Programme maintained its focus on the resilience approach: making the nexus work in practice. The Programme's theory of change is guided by the idea that resilience is about having a longer-term approach to places and population groups often hit by crises. Sustainable development and durable solutions are not possible without tackling the cycles of vulnerability caused by protracted conflicts or more frequent climate-related shocks. The concept of 'humanitarian–development–peace nexus' highlights relationships and interdependencies and focuses on the work needed to coherently address people's vulnerability before, during and after crises.

The Resilience agenda continues to offer many opportunities for making principles behind the humanitarian–development nexus meaningful. The Red Cross resilience approach goes beyond preventing and/or reducing risks for shock-driven crises. Slow-onset disasters, climate-related crises and crises caused by structural factors – such as poverty, inequality and the lack of basic services – are also taken into account. What distinguishes the resilience approach from other developmental interventions is the need to include elements of what people lack for their future coping in the resilience analysis to stop the cycle of vulnerability.

As both a humanitarian and developmental actor, resilience has become the backbone of Red Cross' long-term programming. Programme partners' preference for community resilience programmes is now mainstream in Asia and Africa. In both continents, the community interventions are based on participatory vulnerability and capacity community assessments and the intervention activities are a mixture of building people's own capacities in health, first aid, livelihoods and disaster/shock preparedness and response as well as addressing more structural needs e.g. in water and sanitation and health care to reduce structural vulnerabilities. The Finnish Red Cross contribution to its partners' resilience programming is focused on improving people's access to health, water and sanitation and on reducing disaster risks with an increasing emphasis on the impacts of climate change in drought-affected areas.

Depending on specific operational contexts and identified needs, the programmes have continued to integrate health, water, sanitation and hygiene (WASH), disaster risk reduction (DRR) and disaster preparedness (DP) as common core elements in each country. Community-based health interventions continue to be at the heart of FRC's support across Africa, with a specific focus on Maternal and Child Health, and Sexual and Reproductive Health. In 2019, climate resilience took precedence in the greater part of East and Southern Africa as millions of the continents' most vulnerable were affected by both drought and floods, evolving into major food insecurity. As planned, disaster risk reduction and climate change adaptation initiatives aimed at protecting and diversifying livelihoods, mitigating environmental degradation and improving nutrition standards. The impact of climate change, including visible seasonal shifts, also prioritised the need for community programmes to tackle challenges in access to safe water. For the first time in Africa, the FRC initiated a Forecast-based Action pilot project aimed at developing the preparedness capacities of the Zimbabwe Red Cross Society to implement anticipatory actions to reduce the impact of climate-related disasters.

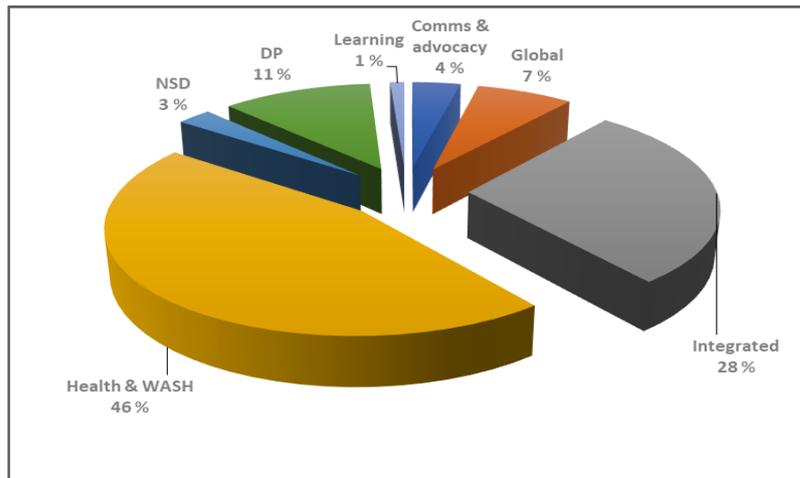


Figure 3. Thematic distribution of Programme expenditure in 2019

Most of the Finnish Red Cross supported programmes in Asia continued to implement integrated community-based approaches that seek to improve the overall safety and resilience of the targeted communities. In Afghanistan the FRC continued to support community-based health, including WASH. The FRC continued to support the ARCS through the International Federation of Red Cross and Red Crescent Societies' (IFRC) cooperation structures in the country. In Myanmar the programming was also multilateral, while preparations for bilateral health programming support started. The cooperation with the Nepal Red Cross Society continued bilaterally.

Statistically, the share of integrated or resilience programmes has not in actual fact declined in 2019 but major multisectoral community resilience projects were closing and the planned ones did not yet properly take off in 2019. Furthermore, water has now been linked statistically to health interventions in programmes containing both health and water and sanitation activities and in reality, all health programmes also include an element of resilience focusing on first aid and epidemic preparedness. Task shifting, meaning a process of delegation whereby tasks are moved, where appropriate, to less specialised health workers and the major element of achieving Universal Health Coverage (UHC) are also progressing in Finnish Red Cross supported health programmes. The integrated community case management (iCCM) method used in Kenya, Somalia and in 2019 also in Niger health programmes complements the community-based health promotion and surveillance activities and links communities to curative primary health care.

## 1.2. Thematic progress

### Changes in Programme policy context in 2019

In 2019, the Programme started planning for some significant changes influenced by two different policy developments. Most importantly, a new 10-year strategy for 192 National Red Cross and Red Crescent Societies was adopted in Geneva in December 2019 after a long process of membership consultations on Red Cross priorities. The **Strategy 2030**<sup>1</sup> aims at reinforcing the role of the Red Cross as a platform of positive global change of 'local action, global reach' in tackling the following major humanitarian and development challenges:

1. Climate and environmental crisis
1. Evolving crises and disasters
2. Growing gaps in health and wellbeing
3. Migration and identity
4. Values, power and inclusion

<sup>1</sup> <https://future-rcrc.com/s2030/>

The *Strategy 2030* aligns the capacity of all members of the International Red Cross and Red Crescent Movement around three strategic goals related to 1. people's capacities to anticipate, respond to and quickly recover from crises that are predicted to become more common, more costly, more complex, and more concentrated to fragile settings where people are least able to cope<sup>2</sup>; 2. ensuring that people can access good quality health care and mitigate vulnerabilities to health resilience; and 3. mobilising people for more inclusive, equitable and cohesive societies where all people are socially included, experience compassion, and where diversity is celebrated. The *Strategy 2030* placed renewed impetus in developing National Societies as strong and effective *local actors*, inspiring and mobilising *volunteerism*, ensuring *trust and accountability*, working effectively as a *distributed global network*, promoting and taking better advantage of *digitalisation* and *influencing humanitarian action*. *Climate risk* (both adaptation and mitigation) and *environmental management* should be integrated across all Red Cross programmes, operations and advocacy, as well as taking a stronger role in promoting greater agency and involvement of marginalised groups and *gender equality* in our work. The goals contribute to major global humanitarian and development frameworks and influence the development of the Programme positively.

On the other hand, the new Government of Finland appointed in May 2019 adopted the idea of having a long-term development policy that extends over several parliamentary terms. The model will specify the development policy goals and priorities and main principles to be transferred from one government to another, ensuring continuity and helping to reach better results. Although the formalisation of the model was delayed until 2020, there is a widespread consensus within the MFA to continue focusing Finland's development cooperation assistance on four of the 2017 development policy priorities with some updates. The programme extension call launched by the MFA in late 2019 was organised around these priorities, in addition to being geographically entirely focused on Africa.

The application process was taken at the Finnish Red Cross as an impulse to take a fresh look at the 2018–2021 Programme design and specify where Red Cross work can add value and impact these priorities. Based on the International Red Cross and Red Crescent Movement mandate, resolutions, policies and the new *Strategy 2030*, the relevance of Red Cross work is the greatest for the MFA focus area 1. The rights and status of women and girls (particularly for its emphasis on health services and sexual and reproductive health rights (SRHR)), MFA focus area 2. Democratic and better-functioning societies (particularly in terms of strengthened civil society) and MFA focus area 4. Food security, access to water and energy, and sustainable use of natural resources (likely to be updated with stronger emphasis on climate change). Supported by the recommendations of the external Programme evaluation for 2016–2019 (see Chapter 6), the extension call was designed to strengthen the Programme from 2020 onwards in combatting gender inequality, striving for respect for diversity and non-discrimination, promoting disability inclusive development and addressing impacts of climate change within our disaster risk reduction activities. In these areas, the unique capacity of the Red Cross to reach out and work within communities can create an even greater impact if the work is done more systematically.

### **Successes, challenges and lessons learned in key thematic Programme areas in 2019**

The 2020 Annual Plan reflects the changes made in the Programme design, focus areas and outcomes towards MFA development policy priorities and future reports will track their success. In 2019 however, the Finnish Red Cross continued to develop its work on National Society Development, health, disaster preparedness and cross-cutting objectives as per original plans.

#### **1. Strengthening the role and capacities of partner National Societies**

In 2019, many of the FRC partners were in financial difficulties and needed support from their partners in acute financial crises as well as in longer-term change management and restructuring processes. Major organisational change and restructuring processes continued in Burundi, Malawi and Sierra Leone. Other partners facing challenges in 2019 in organisational and financial sustainability were Côte d'Ivoire, Nepal and Zimbabwe. Major challenges were related to governance and management, lack of unrestricted funding to cover core costs, accumulating debts, lack of domestic funding, as well as weaknesses in HR and financial management systems. These larger organisational changes were supported together with other Movement partners – e.g. in Malawi the FRC-supported consortium programme has been essential to the recovery of the Malawi Red Cross Society.

In 2019, the FRC defined *financial sustainability* as one of its key priorities for National Society Development (NSD) support. Supporting partner National Societies in their desire to become more self-sufficient and independent is a challenging, long-term process. Some National Societies are strong and stable but many of the National Societies are have over-dependence on

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<sup>2</sup> By 2030 almost half of the world's poor people are expected to live in countries affected by fragility and conflict. Ibid.

earmarked funds indicating potential unsustainability. They have weak organisational capacities and have practically become implementors of external projects and operations – a fact that may affect their identity, relevance and public image.

A financial sustainability study, financed by the FRC to give basis for the financial sustainability approach and further development of the IFRC financial sustainability framework, was carried out by an IFRC consultant. It suggested four critical areas of organisational competence within a National Society (NS) that contribute to increased financial sustainability: (1) NS mission, strategy, positioning, core services and organisational design; (2) attracting financial resources; (3) managing financial resources accountably and transparently, and (4) leadership engagement at all levels. A case study on the financial sustainability of the Uganda Red Cross Society, which suffered from a deep crisis in 2013 and has taken huge strides to regain credibility and a measure of financial and organisational stability, was conducted with FRC funding.

The financial sustainability study influenced the *National Society Development Compact* adopted by the IFRC General Assembly, designed to increase the membership commitments to building a stronger network of local actors: Red Cross Red Crescent Societies as per the new *Strategy 2030*. The Compact contains the guiding principles for NSD support and presents four commitments expected from the supporting partners. Based on the study and other relevant IFRC tools the FRC started also to define its own approach to the organisational and financial sustainability framework to define the steps and frame for how FRC partnership, programming and NSD support would assist its partners to strengthen their sustainability in the long term.

The FRC also continued to support National Societies in identifying their organisational strengths and weaknesses, and in deciding on NSD priorities through the IFRC-developed Organisational Capacity Assessment and Certification (OCAC) process. Two FRC partners carried out an OCAC assessment exercise in 2019. The assessment in Niger – made possible by FRC funds - started a thorough planning process covering NSD priorities and partner commitments to the priorities to be completed in the final NSD plan in 2020. As a result of the assessment in Somalia, the Somali Red Crescent Society has been working on several policies, strategies and guidelines.

In 2019 specific support was directed to strengthening the organisational functions of partner National Societies based on their NSD priorities. For instance, the Somali Red Crescent Society had started its NSD Initiative in 2018 and continued its planning process and in Nepal, an NSD plan was completed for 2020–2025 with the drafting of the finance development plan supported by the FRC. Finance development remained the main targeted area with specific trainings for financial staff. Other major areas for the partners' capacity development were youth and volunteering, resource mobilisation at national and branch level, human resources management, governance and management, and logistics development.



FRC support to *branch development* contributed to the development programme outcomes by strengthening the communities institutionally by making their voice heard locally through more frequent and structured contacts with authorities and other stakeholders (other civil society organisations, entrepreneurs, cultural groups), which enabled working together towards common interests. Stronger branches were better represented at provincial or national level of the wider society through their national structures.

Branch Organisation and Capacity Assessments (BOCA) were supported financially and technically in Ethiopia and South Sudan and in all branches in Sierra Leone. A national training of trainers was organised in Niger. BOCA provided one way for the Red Cross local branches or committees to assess and plan their activities in a wider context and in a systematic way, which facilitated a holistic approach and vision beyond the project mode. In Ethiopia in Semera branch this provided a way forward with new ways to strengthen local income generation. Together with resource mobilisation and capacity development, BOCA self-assessments ensured sustainability. Most of the branches in the development programme have an annually approved development plan and a vision to work towards sustainability.

Strong branches provide a frame for community action and civil society development through training, contacting people, listening to their needs and providing help. Youth clubs and schools in Nepal and in Cambodia provided a good ground for the dissemination of humanitarian values and health promotion, in Afghanistan especially for girls. In Nepal young people took more responsibility for future leadership enabled by capacity building. In Myanmar the schools played an important role in building up preparedness by elaboration of emergency plans. Stakeholders that became engaged in projects now have a better capacity to work with the communities in the future.

The FRC continued to monitor its partnerships for more comprehensive support and mutual learning. In 2019 the only official partnership discussions were held with the Myanmar Red Cross Society to assess the status of the partnership relations. The partnership modality will be changed from multilateral to bilateral in 2020. The relations are beneficial for both partners. The partners shall agree on key points and priorities where the FRC can support beyond a project framework, in line with MRCS and FRC mutual strategic priorities.

## 2. Improving Disaster preparedness (DP) and disaster risk reduction (DRR)

One of the aims for 2019 was to implement community-based activities that are designed upon inclusive participatory assessments that are climate-smart, gender-sensitive and inclusive with an emphasis on better analysis of the different needs of children, women, the elderly, people with disabilities and marginalised groups, and provide opportunities for their involvement in activities and decision-making. In 2019 planning for new, comprehensive resilience programming started both in Nepal and in Myanmar. In Nepal the Enhanced Vulnerability and Capacity Assessment (EVCA) tool was used for the community assessment conducted in late 2019. The findings will impact the adaptive actions that are planned in 2020. In Myanmar, Red Cross staff was using the so-called Climate-smart VCA tool, predecessor of the EVCA. The community-level assessment tools were updated, and once they start to be rolled out in communities (in 2020), they will help in identifying actions to address climate change impacts at community level.

In 2019, funds and capacity building efforts were allocated for the early warning - early action system (EWEAS), which is an interesting component as it passes climate risk management on to local community level. For instance in the resilience project in Zimbabwe, a total of four community early warning systems were established that have coordination and joint activities with World Vision and the Met Office. In the RACE II project in Nepal, a total of 12 early warning - early action systems were established at rural and urban communities with training for district level stakeholders. As an example, a local level early warning system for informing villagers about approaching hazards, such as flooding or storms as well as evacuation to safe areas in the case of serious flooding, was used in practice in Kampong Cham and Tboung Khmum in Cambodia. In these partner countries, the capacity of individuals and communities to prepare for and to take early action under the threat of extreme weather events and natural disasters has improved. In addition to investments on early warning systems, partner National Societies have elaborated disaster risk reduction strategies or plans at national and local level. This is in line with the MFA theory of change which highlights the importance of the national and local authorities' commitment to preparing DRR plans as well as enforcing their implementation, using an inclusive (gender and non-discrimination) and human rights based approach.

### In 2019:

**16** early warning - early action mechanisms were established at the community level.

**61** community-level contingency or disaster preparedness plans were formulated.

*Focus on drought and slow-onset disasters.* Food security continued to be one, but not a comprehensive or streamlined objective for both resilience programmes in southern Africa, Malawi and Zimbabwe. In Malawi one programme focus was nutrition, especially for caregivers and mothers. The activities included localised soya processing, construction of keyhole gardens and energy-efficient stoves. Keyhole gardens are also a method of choice for drought-resistant vegetable gardening at household level in Zimbabwe. Energy-efficient stoves in both countries reduce the need to collect firewood. In Zimbabwe, fruit tree planting was one method for addressing food security and deforestation. In Malawi another set of adaptive actions included tree nurseries and bamboo seedlings for tackling deforestation at community level. However, the final evaluation of the Malawi programme noted that all of the climate-smart disaster preparedness plans developed were not yet successfully translated into action.

While these local solutions can bring impact to households that are using them, the challenge continues to exist in upscaling these practices and finding more structural solutions to food security in Malawi's new programme (starting in 2020) and in other resilience programmes in Africa. As the prolonged food insecurity that started already with late 2018 due to El Niño shows, the communities are far from being resilient to large-scale droughts in which the production of staple foods is disrupted.

*Increased stakeholder cooperation.* Red Cross/Red Crescent programmes have typically been strongly linked to relevant authorities (disaster risk management, health, education), which has allowed for good integration into existing systems (e.g. in contingency planning) and for sustainability potential (if e.g. school-based disaster risk reduction is embedded into the curriculum). The challenge has been linking to other civil society organisations (CSO) and widening access to specific expertise. Nepal has for a few years been the pilot testing ground for linking with both environmental and disability organisations. In 2019 the progress was modest but WWF participated in the planning workshop for the new programme phase and it is expected that WWF will support in baseline and activity planning e.g. for the livelihood component (crop diversification) and

water source protection. In Kenya there was a new opening with WWF Kenya. The FRC and Kenya Red Cross Society worked together in 2019 to scope for project ideas to respond to a Nordic Climate Facility funding opportunity. While the proposal itself was not successful, this led to the planning of a climate-smart agriculture project which will start in 2020. In Zimbabwe already since 2018 the Red Cross and World Food Programme (WFP) have had formal collaboration in cash-based assistance, and this collaboration has had spillover effects on Zimbabwe Red Cross and Red Cross food security operations in general.

### 3. Promoting health and care in communities

In 2019, a key component of FRC-supported country programmes continued to be the strengthening of the Community-Based Health and First Aid (CBHFA) approach aimed at improving the health status of the most vulnerable people by reducing risky health behaviours using evidence-based health promotion and behaviour change methods. Health interventions were closely linked to investments in facilitating access to safe water in beneficiary communities, complemented by the promotion of improved hygiene and sanitation practices. The need for this type of support was validated by the visible impacts of climate change across the continent through which both drought and flooding significantly affected people's access to safe water sources and by the urgent need for improved access to water for hygiene in preventing the spread of COVID-19 and other epidemic diseases. The construction and rehabilitation of protected water wells, drilling of boreholes, expansion of existing water systems, and the promotion of freshwater harvesting are concrete measures taken with FRC support. Under the approach, the Maternal and Child Health (MCH) component focused on antenatal and postnatal care, safe deliveries, managing and preventing childhood illnesses and malnutrition, as well as immunisation targeted women and girls in particular. In addition, programmes worked to improve the health of women and girls through efforts to prevent adolescent pregnancy and harmful traditional practices including early marriage and female genital mutilation/cutting.

Health programmes in Ethiopia, Kenya, Somalia, Malawi, Sierra Leone, Myanmar, Afghanistan and Niger achieved significant results in this area in 2019. Baseline-endline comparisons verified significant achievements in the reduction of malnutrition in Somalia, Côte d'Ivoire, Niger, Afghanistan and Kenya (in Tana River and Kilifi counties in Kenya, the Global Acute Malnutrition GAM declined significantly from 15.6% at baseline to 5.4%), as well as increasing the proportion of women of reproductive age using family planning methods, having safe delivery with skilled birth attendance, exclusive breastfeeding and attending at least four antenatal care visits during their last pregnancy for example in Cambodia, Nepal, Myanmar and Kenya where MCH component was implemented. Reduction of disease burden for some diseases, such as diarrhoea, malaria and dengue, was reported by many projects among key health impacts of the projects. Evaluation reports suggest that this reduction can largely be attributed to increased knowledge and practices of the target communities to prevent such diseases for example through the use of well-maintained latrines by all family members, handwashing with soap at critical times, improved access to clean drinking water and use of insecticide-treated bed nets.

Besides implementing community-based health activities, partner National Societies were also filling gaps in existing health care systems, particularly in Somalia where the Somali Red Crescent's role in running over 45 static and mobile MCH/focused clinics across the country continues under the auspices of the Ministry of Health. In Ethiopia, the health programme in Afar region also focused on supporting the mother-and-child health referral services in the district hospital. In Ethiopia, Niger and Kenya the Programme also supported task shifting: training of health extension workers and integrated community case management. In Kenya, integrated community case management (iCCM) was evaluated to be a relevant solution in a context where long distances to health facilities were a significant access barrier. It is also a promising 'nexus' approach in providing some health care services in conflict settings like in Niger where lack of security constantly disrupts the regular services in Diffa. In Afghanistan, community-based health activities were targeted at hard-to-reach rural areas, including so-called 'white zones' where no governmental health facilities existed.

First aid remained the cornerstone of all health programmes. First aid trainings took place both in communities and as income generating activities on a larger scale. In Myanmar, first aid service and support to referrals provided by the trained community volunteers was highly valued and village committees ensured the continuation of these services by putting funds aside especially for the poorest families. First aid was also part of the disaster preparedness activities. The health programmes in Ethiopia, Afghanistan and Somalia reported on including

#### In 2019:

**96 140** people gained access to basic and safely managed drinking water supply, and

**18 700** people gained access to basic and safely managed sanitation services.

**183 800** people were reached with sexual and reproductive health information and community-based services. **65%** of these people reached were women.

#### In 2019:

**4 539** people were trained in first aid.

health risks in disaster risk reduction activities. Branch level disaster response teams increasingly prepare for disease outbreaks – or water emergencies, as in South Sudan or Cambodia, where drought frequently impacts the availability of safe water.

Support for MCH works to address gendered health inequality. However, in the Programme's target countries, stigma and taboos are often related to women's sexual and reproductive health (SRH) and gender-based violence (GBV) such as female genital mutilation/cutting (FGM/C) and other harmful traditional practices, such as early and forced marriage that affect women and girls in particular. While addressing MCH forms a good foundation to address some of the gendered health inequalities in the field of SRH, its full potential to do so is not yet realised. Access to SRH services is regarded as a matter of health, not of gender inequality. Many MCH components target only aspects of reproductive health which reinforce existing family norms, leaving more contested topics aside. Expanding the scope of current MCH topics towards more sensitive areas of SRH and GBV is challenging for partner National Societies for two reasons. Firstly, the auxiliary role of the partner NS often takes them to follow government (Ministry of Health) norms (or practices) and priorities. For example, family planning is more likely to be included in a National Society's health programme agenda when their respective governments have committed themselves to those same efforts. For example, in Malawi a remarkable increase in the use of family planning methods was attributed to both the programme-induced increase in demand and government increase in service provision. Secondly, as members of their own societies, National Society staff members are equally impacted by prevailing social norms.

The extensive presence of the MCH component in all community-based health programmes makes the Finnish Red Cross well positioned to scale-up the Programme's health focus on SRH topics. Many health programmes are also already reporting encouraging achievements. In 2019, training volunteer community mobilisers (both male and female) in gender, GBV prevention, risks of FGM/C and its abandonment, anti-stigma and respect for human dignity increased enormously. A total of 80 trained community health volunteers (30 female, 50 male) in Somalia, 176 in Sierra Leone and 22 (18 male, 4 female) in South Sudan conducted awareness raising sessions on SRH and SGBV issues in their own communities reaching over 30,000 community members, 47% of whom male. In South Sudan, the Mid-term review conducted in 2019 witnessed notable reduction in early marriages/forced marriages and physical/domestic violence at home as a result. On the other hand, while the awareness on FGM/C risks had increased in Somalia thanks to community health volunteers, the actual practice prevails, with 98% of females undergoing FGM/C.

Traditionally, National Societies do not speak publicly on sensitive matters such as SRH but 2019 witnessed important changes in this respect too. In Sierra Leone, FRC's support encouraged the Sierra Leone Red Cross Society to engage for the first time in calling for the elimination of child marriages and FGM/C together with traditional community leaders and local authorities. As a result, some chieftdom authorities in the programme communities established community by-laws to stop the practice of FGM/C especially among the underaged.

It is also important to notice that the full picture of efforts invested in these topics often goes underreported. Mothers' groups established for peer-to-peer support in child health e.g. in Kenya, Niger, Sierra Leone and Myanmar created safe and supportive environments to discuss matters related to SRH. In Myanmar, a local midwife participated in the support group and the programme encouraged younger unmarried women to participate to learn and share their own concerns. In Afghanistan, grandmother committees continued providing vital reproductive health and essential health information for more than 800 women, 19 of whom were living with disabilities. Sometimes the role of the Red Cross is to pass information and create demand for services, as was the case in Ethiopia, where an FRC monitoring mission found women consulting the local health care centre midwives on family planning at night time and in Niger, where the project linked women with local organisations specialised in family planning, although the final results would remain undocumented.

It is also important to note that women still lack access to less contested health care information and services. In Niger, the programme established 'husbands' schools', which engaged men to discuss family issues, including family planning, GBV and supporting their wives in exclusive breastfeeding. Since the start of the schools, men have demonstrated a better knowledge of family health and women have reported of increased support from their husbands to visit health centres and support maternal health in general. As a result, the number of home births has significantly decreased in areas close to the health centre. In Afghanistan, grandmother committees play a critical role in motivating families to have women and children access health services. In Nepal, the final evaluation mentioned women suffering from uterine prolapse, a common health issue among women giving birth in the target area, benefiting from the Red Cross health intervention supporting the referrals of patients to the hospital for further treatment.

In 2019 there was also remarkable progress in terms of Menstrual Hygiene Management (MHM), a topic that was first integrated into hygiene and sanitation training but which has now increasingly become a standard in Red Cross Red Crescent school and youth work. In Sierra Leone, 80 female peer educators were trained in MHM and 50 women and adolescent girls

were trained in the production of local and reusable sanitary pads. This practice increased girls' school attendance and provided a business model to some women who can continue producing sanitary pads for local markets.

#### 4. Enhancing the integration of gender into project activities

Vulnerabilities based on gender, age, disability or other reason for social exclusion were actively integrated into the country programmes in 2019. Specific focus on women and girls was found in all programmes but the way of addressing gendered needs and rights varied from country to country. The majority of country programmes are already applying the twin track approach with both mainstreamed and targeted actions. The minimum standard of do no harm was also well applied, but the programmes are not yet very progressive or transformative – with some good exceptions.

**In Asia**, the external final evaluations made in Cambodia, Myanmar and Nepal captured well the great variation between the different National Societies in their gender approaches. While women-specific activities targeting women's health needs in particular are found in all three countries, the wider mainstreaming of gender to other project activities and community volunteering is still in a very initial phase in Cambodia and Myanmar. The two evaluations pointed out that the lack of wider gender sensitivity may even reinforce the traditional gender roles by focusing on gender parity in the number of volunteers. A balance between female and male volunteers was achieved but both genders volunteered more for activities related to tasks traditionally done and cared for by them: women for health and hygiene related educational activities and men for community development and disaster risk reduction related activities. Even though men felt that the whole village and their families had benefited from the women's participation in project's educational activities and therefore did not see the project as one that supported women, the absence of women's views and voices from larger disaster risk reduction and community development activities is not good disaster preparedness. While transforming gender roles would not be so high on the local Red Cross agenda due to socio-political controversies often attached to them, the Finnish Red Cross needs to promote better integration of women into disaster risk reduction activities – often linked in Asia to much bigger decision-making platforms regarding collection and use of community emergency funds, hardware procurement and structural village development.

On the other hand, things were done very differently in Nepal, where the increase in women's knowledge on their legal rights and measures available related to domestic violence, property and social discrimination was evaluated to have had an empowering impact on women. Programme-supported health and disaster risk reduction activities were used as a vehicle to encourage and promote women's participation in community life by ensuring women's representation in local committees such as community disaster management committees (CDMCs), water user committees, saving and credit groups. This empowerment was partly credited to the Red Cross programme promoting gender equity and social inclusion through multiple trainings and campaigns and equipping the women with skills and knowhow on small-business development and farming and gardening.

**In Africa**, women-specific needs were also well recognised. Like in Asia, all Finnish Red Cross partners in Africa strive mainly for gender parity in all community activities but some with more eye for women's participation in decision-making processes. Particularly in Kenya, gender issues are looked at very critically; women are not brought in just to participate but to lead. In Niger, the Mid-term review conducted by the Belgian Red Cross identified the increased capacity of women to express themselves in public mixed assemblies as an unexpected impact of the establishment of women's groups in diverse fields of activity. This change in behaviour revealed a change in the status of women in the community, which had increased women's leadership.

In some countries, the gender parity challenge is reversed, like in the Cote d'Ivoire health programme where the majority of volunteers were (young) men since women's illiteracy was not originally identified as a barrier for women's participation in health activities. SRH and livelihood are two particularly prominent features in Finnish Red Cross supported country programmes in Africa where MCH activities in almost all countries also addressed some harmful traditional practices, family planning (at least in the form of birth spacing) and gender-based violence. In countries like in Burundi, Sierra Leone and Kenya, National Societies are committed, outspoken and vocal on GBV issues, which are widespread and go unreported. Their commitment could now be transferred as examples to other countries. National Societies have also learned to mobilise communities to make the difference from within: in Nepal paralegal committees were formed in the communities to tackle GBV, mothers' groups have made a major difference in Malawi not only advocating for safer living and learning environments for girls and boys but taking measures to ensure safe school boarding for girls and initiating child abuse community reporting. Women's role in livelihood development is also prominent in Africa not only in terms of nutrition but also of income generation. Women's kitchen gardens were established in resilience programmes in Kenya, Malawi, Zimbabwe and Niger with Nepal accompanying in Asia with better cooking facilities, which have positive environmental impacts with reduced use of firewood.

The lessons learned from ending and on-going country programmes are both encouraging and also pointing out where more work remains to be done. Specific gender analysis which goes beyond the gender-sensitive vulnerability and capacity assessment is needed to capture the wider gendered picture, particularly in areas where secondary data indicates the presence of heavy gender inequalities. These inequalities often fall into the field of women's sexual and reproductive health matters and harmful traditional practices where more efforts and resources need to be invested from 2020 onwards. Combatting all forms of gender-based violence – a global commitment of the entire Red Cross Red Crescent Movement since 2015 – must become a minimum standard in all Finnish Red Cross supported community activities.

#### 5. Promoting social inclusion (including disability inclusion), community engagement and accountability (CEA)

The promotion of social inclusion and diversity in Red Cross activities has deep roots in the principle of 'unity' stating that the National Society must be open for all in its functions and activities. Inclusion of people from different ethnicities is not reported as being a challenge in the majority of countries of the Programme, particularly in Africa where the partners either do not have any or do not recognise that they have ethnic inclusion challenges. In Asia ethnicity is a contested or very politicised issue in many countries and for example in Myanmar and Afghanistan, the ethnic disputes strongly present in the country challenge the National Society's mandate to work in a neutral and impartial way every day. In Ethiopia, Afar region is ethnically very homogeneous but in the country the Afar people, like many other ethnic groups in Ethiopia, feel discriminated against and the ethnic tensions have also complicated the security situation in Afar branch. Positive examples come from Nepal, where the ending resilience programme was evaluated to be very successful in enabling people of different ages and genders, people with disabilities and people with different ethnic backgrounds to take an active role and participate in the programme activities. In Cambodia, minority Cham villages were included purposefully in the health and disaster preparedness activities.

The final evaluations conducted provided the Finnish Red Cross and its partners many lessons learned about how to identify and target less obvious hard-to-reach groups for the programme. For example in Cambodia, whilst the community education activities were accessible to all villagers, systematic involvement of men of the poorest families, fishermen living on boats and persons with certain types of disabilities would have required adjustments in the programme activities and in the way they were implemented (changes in the location or times, or adequate resourcing for example to ensure sign language interpretation) as well as some specific knowledge and skills, especially in terms of persons with disabilities, in order to ensure that specific needs and vulnerabilities would have been taken into consideration.

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Although disability inclusion has become more visible in many FRC-supported country programmes over the past years, we are still far away from the full inclusion of persons with disabilities in Red Cross activities across the Programme and within the partner organisation. Gender equity in volunteering is still a much bigger concern than disability inclusion thanks to strong and long-lasting gender advocacy. Now it is turn to do the same for disability inclusion. Some countries report good initial steps taken. In Kenya, it is mandatory for DP/DRR groups to have one disabled person in each group to ensure disaster preparedness measures also serve the needs of the disabled. In Burundi, the model household programme supported the families with disabled family members to make latrines and handwashing facilities accessible. In South Sudan, first aid training was provided for 20 people with disabilities with one participant later reporting having been empowered not only because he was able to put his skills into practice by actually providing first aid and but also being able to instruct others on what to do.

Disability inclusion as a topic was raised at the forefront of the Programme extension plans for 2020. By means of the extension funding granted, the FRC and Abilis will extend this work to selected African countries interested in learning and using disability-inclusive approaches in their work and potentially using the expertise of local disabled people's organisations in strengthening disability inclusion in Red Cross activities. This work was already started in Ethiopia in early 2020, where Ethiopian Red Cross Afar branch started cooperation with a local disabled people's organisation. At the request of the organisation, the cooperation started with the procurement of much needed personal mobility aids (wheelchairs, crutches, point sticks) which were then distributed by the organisation to people in need.

The example of first aid provision in South Sudan reflects another important achievement in various Programme reports: the empowering effect of volunteering. The external final evaluation of the Cambodia programme captured the sense of empowerment in the community volunteers for being capable of contributing, besides to the wellbeing of one's own family, to wellbeing more widely in the community. Youth club activities, which are a very strong component of community

#### In 2019:

In **52%** of the projects planned activities were adapted to different vulnerabilities.

In **36%** of the projects volunteer recruitment criteria reflects gender balance and diversity of the local population.

In **46%** of the projects diverse community groups are represented in community committees.

programmes both in Asia and Africa, were evaluated to have strengthened the self-confidence of young participants and empowered them to take active leadership roles in running the youth club activities, resulting in youth club led improvements in the school environment. Volunteering was evidenced to increase civic involvement and ownership of project activities. The leadership and advocacy skills training included in many programmes had resulted in increased capacity of community members to take up and advocate their issues at local government level.

Community Engagement and Accountability (CEA) is a strong element in FRC programming, though it is recognised that greater efforts are needed to reap the benefits of closer dialogue with beneficiaries. While Finnish Red Cross Programme partners widely use participatory tools and empowering mechanisms in their community activities, there is a recognised need to improve the community members' access to feedback and complaints mechanisms. Formal mechanisms which really function are rarely in place, and informal feedback mechanisms lack systematic collection and addressing. The Finnish Red Cross will increase training in CEA tools and methods keeping the increase in the number of proper feedback mechanisms as one of its key progress indicators in the quality development of the Programme.

## 6. Incorporating Climate change to Red Cross programming

In general, the Finnish Red Cross has considered the comprehensive disaster risk reduction approach as a key tool for both identifying climate-induced risks (among many other risks) for communities and developing community-based actions to address and prepare for those risks, i.e. increasing climate change adaptation. Disaster Risk Reduction (DRR) can be seen integrated cross-cuttingly into all resilience climate activities funded by the MFA. At same time, all projects are well aligned with the disaster management strategies and policies of the partner countries, thereby contributing to global policies such as the Sendai Framework 2015–2030, Paris Agreement (UNFCCC) and UNSDG Agenda 2030.

In the regional programme plans, there was a slightly stronger focus on livelihoods issues and food security in 2019, especially in Southern Africa where the region was at the same time struggling with a food security crisis. This overlapping of the resilience focus and humanitarian challenges highlighted the relevance of the development - humanitarian nexus especially in addressing climate-induced risks. Planning for the additional funding allocation launched by the MFA in the autumn of 2019 was a great exercise to focus attention on climate resilience and streamlining climate change adaptation and food security to programmes in Africa. In Asia, because of the nature of disasters and their increased intensities, the focus continued to be on better understanding risks and trends at community level.

With 42% of the projects assessing climate-related risks and adapting the activities to local adverse effects of climate change, the FRC continued to approach climate risk management through integrating it into existing activities and programmes rather than developing stand-alone climate change activities or projects. Examples of typical adaptive actions for climate change are embankments or safe crossings for a flood-prone river in the Zimbabwe programme, or even a relocation of a community threatened by river bank erosion as done in Myanmar's urban disaster risk reduction programme.

### In 2019:

In **92%** of the projects climate change risks were assessed and

in **42%** of the projects planned activities were also adapted through climate-smart practices.

## 2. Achievements in global Red Cross programme development

### 2.1. Support for global health programming

The Finnish Red Cross is one of the founding National Societies of the Community-Based Health and First Aid (CBHFA) approach that is widely used in Red Cross Red Crescent (RC/RC) health programming and in FRC-supported community health projects. The FRC has systematically supported the development and utilisation of the CBHFA approach enabling RC/RC National Societies to conduct better preventive health programmes and to report and monitor behavioural change and impact at the community level better. In 2019, FRC support to global health programme development was directed to the enhancement of the CBHFA process, which aims at revising the existing modules and completing the approach with new electronic modules and tools. FRC support contributed especially to the roll-out and testing of the revised and renewed eCBHFA tools. FRC support was also used to translate the seven new modules of eCBHFA into French.

The regional eCBHFA Training of trainers (ToT) workshop in Asia with 24 participants from Asia Pacific National Societies produced a pool of seven Regional Master Trainers (five women and two men) from three National Societies and the IFRC. The evaluation results of the training indicate that the ToT training was effective in supporting the dissemination and

application of the revised tools: the eCBHFA trainers from the region's National Societies (NSs) reached further 2,937 people in communities with health-related training and felt they had the necessary skills and information to provide different capacity building activities in eCBHFA to their own NS colleagues and targeted communities.

Selected master trainers were accepted to a peer exchange programme and are key resources in supporting other National Societies in the region in taking the new eCBHFA tools into use also in future. In 2019, six Asia Pacific National Societies were supported to roll out eCBHFA through training. FRC's partner Myanmar Red Cross Society was one of them. In Nepal and Afghanistan the planned trainings for 2019 were postponed to 2020.

Six Asia Pacific National Societies in Asia shared their experience in working to improve the lives of older populations through case studies developed for healthy ageing. The case studies were important in inspiring other National Societies considering this fairly new area of programming and in promoting the IFRC healthy ageing toolkit and life course approach. A public health and road safety brochure was also produced to highlight the importance of road safety in public health intervention. The brochure featured programming opportunities for National Societies to consider, with guidance from the IFRC-hosted Global Road Safety Partnership. Furthermore, the IFRC eCBHFA toolkit was successfully adapted to the local context of the Democratic People's Republic of Korea (DPRK) to produce health message cards used to provide community people with basic life-saving information and health education. The integrated intervention reached 87,938 people, has led communities towards positive behaviour change and contributed to achieving SDG3 for ensuring healthy lives and promoting wellbeing for all ages.

In the Africa region, FRC's global health support was utilised to organise a regional workshop focusing on creating an understanding of the eCBHFA, Universal Health Coverage (UHC) and Protection, Gender and Inclusion (PGI) approaches and their utilisation in African National Societies. The IFRC Africa Region has committed itself to strengthening health programming in the African NSs to achieve UHC through partnership and advocacy, generating evidence to scale up health programmes. While UHC may be a relatively new commitment internationally, UHC's core strategic principle of people-centered and community-led healthcare has been at the core of IFRC's work for decades. RC/RC National Societies hold a comparative advantage in contributing to UHC based on reach and access of the community-based volunteers. eCBHFA contributes to the whole spectrum of UHC, with many African National Societies implementing the programme as well as national community health strategies, including task shifting and/or integrated Community Case Management.

A total of 33 participants attended the three-day workshop drawn from 19 African National Societies, Partner National Societies and the IFRC. The workshop participants were a combination of PGI focal persons, Health coordinators and Programme coordinators. The NSs also tested a new eCBHFA tool focusing on climate change and health, and they got practical tools for behaviour change communication. Climate change module testing results will contribute to the development of the global tool box.

Another workshop took place in Malawi in November 2019, and was aimed to deepen the knowledge of the eCBHFA approach and process, to define behaviour change principles including stages of change and motivation, to conduct the assessment process and to devise an evidence-based action plan of eCBHFA, to plan for gender and inclusion as part of their CBHFA programming, to develop storyboards and a video plan for capturing participatory video for assessment and evaluations and to develop data literacy as a way to inform and transform programming and community health. The workshop was attended by 19 people. Six months later 10 of them submitted their plans indicating how the new knowledge was put into practice in their programmes. These 10 people were accepted to the African RC/RC trainers' pool and will help African NSs in improving their health programmes.

The Finnish Red Cross funded disability inclusion delegate working for the IFRC and the ICRC represented the Movement in Women Deliver Conference in Vancouver in June 2019. She was invited to speak about women and disability related topics in several sessions.

## **2.2. Support for global programming in protection, gender and inclusion**

In 2019 FRC support towards protection, gender and inclusion (PGI) enabled significant steps towards the Red Cross Red Crescent Movement wide goal of localising and mainstreaming the PGI agenda with National Societies. In Africa, the regional coordination and ownership of the PGI agenda was strengthened through a PGI coordinator as staff-on-loan from Geneva, and later in the year through the recruitment of an IFRC Regional coordinator for the Africa cluster. Through the establishment of this technical structure, FRC support enabled several roll-outs of the revised guidelines on *Minimum Standards for PGI* in the region, particularly in Western and Eastern Africa. In Gambia, a greater mainstreaming of PGI issues to the programming

of the National Society was achieved through FRC support. At regional level, guidelines and policies were scaled up through targeted PGI training for newly appointed PGI focal persons from around the region.

FRC support was also directed to advocacy activities of the Africa regional office, which worked to include PGI topics in the Movement Induction Course for new National Society leaders, and also participated in the Legislative Advocacy event for National Society leadership and Government representatives at the regional level. FRC support enabled the piloting of disability inclusion advocacy training in connection with the global Gender and Diversity Network meeting held in Nairobi in April 2019. Issues of Sexual and Gender Based Violence (SGBV) were furthered through hands-on technical support on prevention and response to SGBV and through a roll-out training for African National Societies where action plans were also developed to ensure sustainable long-term commitment. SGBV Trainings of trainers were held in South Sudan (23 participants), Niger (26 participants) and Benin (21 participants).

In Asia, FRC's global support directed to PGI had a slightly different focus. In Asia the IFRC has collaborated with the London School of Economics on research of LGBTIQ (lesbian, gay, bisexual, transgender, intersex, and questioning) programmes in the region to better understand the experiences of LGBTIQ communities in natural disasters, and the critical issues and barriers to the promotion and protection of LGBTIQ rights in humanitarian crises. The FRC supported this work already in 2018 and continued in 2019. FRC support was channelled to develop the material 'LGBTIQ inclusion in emergency programming' and a face-to-face training module, which will be integrated in the IFRC PGI basic training. The materials include case-studies, exercises exploring lived experience of LGBTIQ people in relief and recovery phases of disasters, consideration of the impact of pre-emergency marginalisation (especially in the context of the RCRC principle of impartiality) and could be utilised and mainstreamed in any training or workshop. An e-learning on the IFRC learning platform was designed as well as a guidance that will be posted on the IFRC learning platform in early 2020.

The objective of FRC's global support towards PGI is not only to support the regions in furthering the PGI agenda, but through this also feed into the FRC Programme result chain objective *to improve the quality of Programme through community-owned, risk-informed and inclusive actions*. Ensuring that Africa and Asia at regional level receive sufficient support will connect and complement country-level programming by making them more inclusive and of sustainable quality. For example, trained and motivated PGI focal points of National Societies will also contribute to FRC bilateral programmes to ensure that they are inclusive and take into account potential barriers different groups face. Another significant issue in ensuring good quality programming is to involve and guarantee community engagement. FRC support was also directed to IFRC's surge training on community engagement and accountability to facilitate the increasing of National Societies' capacity to involve communities at all levels in programme design and implementation.

In addition to policy and guideline mainstreaming and advocacy work, the FRC also had an active role in the Movement-wide coordination process of PGI. The Gender and Diversity network met in April 2019. As a result, network-wide work plans were drawn to ensure coordination and best utilisation of network resources. Representatives of the FRC-supported National Societies (Nepal and Côte d'Ivoire) were selected as steering group members to further promote PGI implementation in their regions. At global level, the FRC together with other network members contributed to the revision of the Gender Policy. The purpose of the revision was to ensure a dynamic approach that promotes the inclusion of gender and diversity as the foundation for all our actions, in particular in our institutional arrangements, our operations and programme cycles, and our humanitarian diplomacy. The new Gender and Diversity Policy was adopted by the General Assembly in December. The FRC Emergency health advisor, as the SGBV focal point, also took part in the development of the PGI in Emergencies Toolkit and participated in the validation workshop in September 2019. The products of the Toolkit can also be used in other settings, not only in emergencies.

### **2.3. Support for global programming in disaster preparedness and climate resilience**

*Strengthened disaster preparedness of the partner National Societies and communities:* In 2019 the Finnish Red Cross continued to address the institutional preparedness of partners in order to ensure the sustainability of disaster preparedness activities at community level but also to emphasise the partners' role as key civil society actors in saving lives and mitigating the impact of disasters on development. The FRC provided financial support for the development and promotion of the application of tools, such as the harmonised concepts of Red Cross Disaster Response Teams and the tool launched in 2018

called Preparedness for Effective Response (PER<sup>3</sup>). The tool strengthens the capacity of National Societies to support both institutional and community-based disaster risk reduction, response and preparedness.

In 2019 the main achievements in the development of global tools were the roll-out of the National Response Team (NRT) Common Standards strategy and validation by technical experts of each module of the NRT globally harmonised training curriculum. The NRT Common Standards were published online by the IFRC to further disseminate the knowledge and usage by National Societies. In addition, the FRC supported the IFRC East Africa Regional Office to roll out, coordinate and facilitate PER processes at country level. During 2019, a total of three PER Orientations/Re-orientations (Burundi, Tanzania and Uganda) and two PER Assessments (Rwanda and Tanzania) were carried out. Technical support was also offered to some of the African National Societies to update their Plans of Action formulated based on PER assessments. All East Africa National Societies as well as the South Sudan Red Cross and the Somali Red Crescent Society were updated on the PER mechanism and developments during the Eastern Africa Annual Disaster Management meeting in September.

In addition to developing and rolling out IFRC preparedness tools, the FRC continued to strengthen the National Societies' auxiliary role to public authorities by supporting Disaster Law Programme (DLP) implementation as part of the global process with the IFRC and key partners. In 2019, the support was directed to Africa. The Disaster Law Programme was able to engage the National Societies in their national disaster laws as well as to create awareness of the then proposed Resolution 'Climate Smart Laws that leave No One behind' presented (and passed) at the 33rd International Conference of the Red Cross and Red Crescent (IC33) in Geneva in December 2019.

*Climate-smart, gender sensitive and inclusive disaster risk management and integrated activities:* In 2019 the participation of key National Societies from countries vulnerable to climate change to milestone climate events, in particular COP25, was supported. Three representatives of National Societies from Africa and the Americas participated in the COP25 and were supported before, during and after the COP25 to promote ongoing engagement with their governments. The FRC also supported Red Cross participation in the Global Climate Action Summit. After the summit, the FRC continued active discussion and planning on how to engage with and support the MFA in the new Risk-informed Early Action Partnership (REAP) initiative, which is to be hosted by the IFRC in Geneva.

The FRC supported the IFRC to develop key climate-smart tools together with the Red Cross Red Crescent Climate Centre (RCCC). The global community assessment and planning tool Enhanced Vulnerability and Capacity Assessment (EVCA) was translated into French to enable use by the West African National Societies. At the same time, the toolbox was updated with gender and diversity guidance tools for more inclusive assessments.

By providing ToT training on the EVCA to FRC's key partner National Societies, the FRC ensures that the staff have the latest tools and knowledge for conducting climate-risk informed and inclusive assessments and climate-smart programming for the coming years. In Africa, an EVCA Training of Trainers workshop was organised in November 2019 with 16 participants from nine African National Societies (including FRC's partner countries Kenya, Ethiopia, Burundi, Sierra Leone, South Sudan and Somalia). Similarly in Asia, the facilitation of the first Asia Pacific Regional ToT/Field School was supported with the participation of a total of 26 persons from 15 National Societies (including FRC's partner countries Afghanistan, the Philippines and Myanmar) and two IFRC offices.

A key aim for the FRC has been to improve the effectiveness and inclusiveness of early warning and early action (EWEA) systems for better preparing for disasters. The FRC financed and actively participated in the development of new initiatives in the field of disaster risk management. For instance, in connection with the utilisation of FbF tools, the FRC collaborated with the Finnish Meteorological Institute that sent a researcher to conduct the feasibility study in Zimbabwe.

To support learning and sharing to capitalise on best practices and experiences with National Societies and communities, the FRC continued in 2019 to actively participate in the global meeting of the DRR Advisory Group (20–22 November in Hague) and PER Technical Working Group (28–30 May in Geneva) as well as similar regional meetings.

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<sup>3</sup> PER is not a new approach, but rather an improved one, drawing on lessons from two decades of learning from the Well-Prepared National Society (WPNS) and Disaster Response Capacity Enhancement (DRCE) initiatives. The approach is based on foundational RCRC documents including the National Disaster Preparedness and Response Mechanism (NDPRM), the Principles and Rules for RCRC Humanitarian Assistance, and the IFRC NS Development Framework. The approach complements other major RCRC Movement tools including the Organisational Capacity Assessment and Certification (OCAC), Branch Organisational Capacity Assessment (BOCA), and Safer Access Framework (SAF).

### **3. Country-level achievements**

3.1. Annual report for country programmes in Asia (Annex 1.)

3.2. Annual report for country programmes in Africa (Annex 2.)

## 4. Achievements in Communication, Advocacy and Global education in 2019

### 4.1. Communication on Programme

In 2019 the Finnish Red Cross actively communicated about the MFA-supported development programme. Following the FRC's international communication plan, the communications highlighted the various effects of climate change in people's lives and the work of the Red Cross especially in partner countries in Africa and Asia. The FRC Field Communications Unit (FCU) produced versatile high-quality written and audio-visual communications material from Nepal, Tajikistan and Malawi; the planned mission to Cambodia was cancelled due to schedule challenges. Development-themed communication material was also produced from Lebanon, Democratic People's Republic of Korea, Mozambique and Myanmar. The products were widely distributed through the FRC, the IFRC, Finnish and international media and other partners. Figure 4 shows how themes related to FRC international aid got wide visibility in the Finnish media in 2019. Some examples of materials produced for communication and global education in 2019 are provided in Annex 3.



Figure 4. Visibility of FRC international aid related themes in the Finnish media in 2019.

the positive results and significance of development cooperation. Light visual reporting was done throughout the year by publishing material on the positive results of the programme. More visual Annual Programme reporting was planned, but the implementation will happen in 2020, hand in hand with FRC's website renewal.

For example, Instagram stories and Instagram TV products were developed to appeal to younger audiences and more in-depth articles were published for example in *Kehitys-lehti* and *Avun maailma* magazines and on digital channels to interested audiences. Audiovisual reporting on development results was developed. Cooperation with infographic experts was launched to visualise information informative on the new FRC website and digital channels. Workshops on mobile video, climate change and infographics provided the FCU delegates and Finnish Red Cross staff with new skills to produce compelling, target-audience specific stories.

#### Key results in 2019 include:

- Material published on climate change and development reached wider audiences on social media and digital and print channels:
  - The reach of FRC Facebook posts grew by 30% from the previous year and the average reach of a post grew 65%. People also reacted more actively to posts, as the Facebook reactions/engagement grew by 70% and the reactions/reach per post grew 115%.
  - The number of Instagram posts grew 79% and the number of followers 34% from the previous year, exceeding 10,000 followers.

The desired communication outcome was to ensure that the Finnish public perceives development cooperation as one of the most important instruments of global accountability, and as a key element in combatting the likely consequences of climate change and that the Finnish public and media perceive FRC communications and advocacy as inspiring, relevant, timely, and of high quality and that the FRC is seen as a major source of expertise in the field of development.

The revision of the FRC international communication plan in 2019 led to more strategic and meaningful communication actions aimed at specific target audiences. More target-audience specific material was produced and published on appropriate channels. Efforts were made to produce understandable and visually appealing communications, highlighting

- Issues related to global development were regularly covered especially on the FRC communication platforms. Articles on the international work/development cooperation of the Red Cross were published on each issue of *Avun maailma* (print run 90,000) and *Apua* magazines (print run 20,000). Altogether 95 articles were published on the website and they reached a total of 23,500 readers.

The involvement of youth volunteers in development communication was an unforeseen success in 2019. The FRC coordinated a cooperation project with young Red Cross climate advocates – *'Ilmastovaikuttajat'* - and two social media influencers, who visited the Finnish Red Cross Logistics Centre and produced social media content on climate change and Red Cross international aid to their followers. They also produced a series of five podcasts on climate change. Further, FRC international delegates were actively encouraged to contribute to producing stories from partner countries.

## 4.2 Advocacy and Global Education

Finnish Red Cross' key audience for advocacy was students of the Finnish comprehensive school system. The aim of advocacy activities in 2019 was to expose each age class of young students to key messages covering the Red Cross world view, development aid, humanitarian assistance and the plight of the most vulnerable. FRC advocacy intertwined with global education under the headline Risk Zones.

The annual Risk Zones publication was, for the first time, published electronically and printed in three language versions: Finnish (*Riskien keskellä*), Swedish (*Riskzoner*) and English (*Risk Zones*). Thus, the printed product matches the language selection of the electronic teaching material package, covering all three major teaching languages of the country. The combined circulation of the three versions was 14,000. As a result of higher than anticipated demand, both the Finnish and the Swedish language versions had two print runs.

The FRC Advocacy Officer conducted a series of awareness-raising events in different parts of the country covering the topic of the future role of development aid and humanitarian response in the context of challenges as posed to us by the remaining 80 years of this century. All in all the some 40 such events gathered approximately a 2,000 strong combined audience. Some of these events resulted in articles published by the local press.

The development of the Risk Zones global education teaching material progressed to a stage that enabled full-scale marketing of the material to educational institutions. Pilots with the Risk Zones teaching material carried out in 2018–2019 confirmed the notion that the material with its pedagogical applications is suitable as part of and support for teaching from primary schools to upper secondary schools and vocational schools. The pilots also confirmed the notion that the material can be marketed most effectively for use through the teachers' mandatory additional training events, as well as opportunities through teacher training institutes.

The main goal for global education work in 2019 was to initiate and finalise the renewal and merger of the Risk Zones teaching material package on the same teaching material service portal as other Finnish Red Cross materials for schools and other educational institutions. This was done successfully so that the new service and Risk Zones as its key part was launched and introduced at the EDUCA fair in January 2020. Co-operation with the School Cooperation Team of the FRC Volunteer and Youth Unit was significantly strengthened as part of the process.

The old version of Risk Zones was actively introduced to teachers at various teachers' additional training events and through introductory lectures and workshops at numerous teacher training institutes. Some 30,000 students used the Risk Zones material during 2019.

## 5. Programme management and learning

### 5.1 Developments in Results-based management in 2019

The FRC applies the Results-based management (RBM) approach in its programme management in order to ensure quality and impact of its development cooperation. FRC's Programme Quality Management framework, developed in 2013, defines the mechanisms and tools utilised in planning and design, monitoring and evaluation of FRC's programme and other activities. These tools include strategy-based programme design, application of risk management measures, regular monitoring and measurement of programme progress through key indicators with baseline and endline data collection and regular evaluation of different programme elements (programme-level evaluations, thematic evaluations, community activity evaluations). Management response procedures and learning logs which are inbuilt in FRC's Project Information Management System (PIMS)

enable continuous learning and improvement. As a programme partner, FRC's responsibility is to ensure adequate financial and technical resources also for its partners to be able to implement and monitor the project according to agreed quality and minimum standard commitments and to follow the key RBM procedures.

Apart from the systems development and introduction of the PIMS into the portfolio management and monitoring and learning in 2016–2017, no major development processes related to results-based management have been implemented during recent years. Efforts have been dedicated to ensuring that the full potential of PIMS in portfolio management, monitoring and reporting is being taken into use.

The FRC measures programme performance at the outcome level through baselines and endlines conducted for each community-based project. The FRC has defined joint quantitative indicators which quantify development results annually and assist in monitoring whether the projects are on track with their annual objectives in improving personal and community health and/or reducing exposure and vulnerability to natural and human-made disasters. Indicator data is collected from each FRC-supported project, and project outputs are aggregated at the programme level. In addition to qualitative indicators, the FRC's results chain includes key performance indicators that measure progress related to enabling actions contributing to the Programme outcome delivery. Accumulated, programme level key results and progress measured by the key performance indicators in 2019 is summarised in Annex 4.

In 2019 small finetuning was made to the 2018–2021 results chain with some of its indicators being reformulated and indicator guidance document with indicator definitions being revised to take into account the relevant MFA aggregated indicators published in 2019. During the last programme period, the FRC put efforts into the improvement of project monitoring and reporting measures and systematisations of baseline and endline survey data collection. As these promoted RBM practices have become a standard in the FRC-supported projects with very few exceptions, the need to measure the progress made in this area with key performance indicators no longer existed, and they were removed from the results chain. However, seven new indicators corresponding to MFA aggregate indicators were added to the results chain, allowing the FRC to report data against those in the 2019 annual report. Also FRC's evaluation process and tools for the procurement process were revised in 2019, with new criteria of coherence formally added in the standard Terms of Reference rather than used when appropriate as previously.

## 5.2 Evaluations and learning in 2019

According to the FRC learning and evaluation system, mid-term reviews (MTR) and final evaluations form a standard procedure in project cycle management to enhance accountability and learning. In 2019 six evaluations covering eight projects were conducted. Outside the FRC's evaluation framework, an internal review of the co-funded water preparedness project was also carried out by the partner Austrian Red Cross. The following table provides more detailed information on the type of the evaluations conducted in 2019:

Country & project(s)	Evaluation	Evaluation type
Nepal: Community resilience project	Final evaluation	External Evaluation
Cambodia: 1) Community based health & 2) Community based disaster risk reduction	Final evaluation	External Evaluation
Cote d'Ivoire: 1) Community based health and first aid 2016-2018 & 2) CRC National Society development 2016-2018	Final evaluation	External Evaluation
Kenya: Integrated community resilience building project in Kilifi and Tana river counties	Final evaluation	External Evaluation
Myanmar: Community based health and first aid in Loikaw	Final evaluation	External Evaluation
South Sudan: Healthier and safer communities and schools	Mid-term review	Internal review
FRC's Development Cooperation Programme 2016-2018	Learning-oriented programme evaluation (initiated in 2019)	External Evaluation with participatory approach

The evaluation reports were reviewed by the Quality Group established for each evaluation, and management responses were given to the evaluation recommendations. The findings, lessons learned and recommendations were also discussed internally during the annual planning workshop. The recommendations will be addressed accordingly in future programme and project planning and implementation. The study findings on financial sustainability will contribute directly to the establishment of the FRC organisational and financial sustainability framework. The ex-post review on the long-term partnership with the

Cambodian Red Cross for institutional learning purposes did not take place as an additional sustainability support was agreed on.

### Key lessons learned

All the resilience projects evaluated had water and sanitation, disaster risk reduction and branch capacity building components. School activities were included in all projects in terms of health education, peer support and latrine construction. The evaluations confirmed that allowing adequate opportunity for stakeholder consultations and inputs during project design is a critical starting point in ensuring the support of the target community. The participation of communities fosters local ownership and is an important foundation of sustainability. Mothers' clubs have been successful as platforms for promoting healthy practices. It is important to find ways of making sure that men are part of the project activities in a more participatory way. The commitment of the branch committee to the project is inherent in its degree of involvement at all stages of the project cycle, which can therefore increase the chances of sustaining the results achieved.

Resilience building requires flexible and adaptive programming – it is important to keep an eye on the constantly evolving context, shift focus when required and remain responsive to community needs and priorities. For example in Kenya, Community Health Volunteers (CHV) were trained to provide preventive and promotive health services with a focus on mothers and children under five years of age. A component on integrated Community Case Management (iCCM) of common childhood illnesses was added to bring curative services to community and household levels. CHVs were trained and equipped to screen, treat or/and refer cases of diarrhoea, malaria, pneumonia and malnutrition. This greatly improved access to timely treatment for the four conditions that were the predominant causes of childhood morbidity.

In Nepal and Myanmar, seed funds for communities were established and were considered very important for the villages. In Myanmar the availability of seed funding allowed the villages to support emergency referrals and save funding for other village projects considered important (ambulance, village hall). At the same time, volunteer services and first aid materials are meant to be financed with the fund as the project has ended. Given that the effect of the seed funds and a comparison to other existing mechanisms are quite complex, another exercise is already planned by the IFRC/MRCS to better understand the impact of seed funds in more detail. It was also reminded in the evaluations that the available National Society planning, monitoring, and evaluation tools should be used in the most efficient way. Good results have been achieved in projects but we need to ensure that these good results can benefit the National Society as a whole – e.g. support volunteering at the national level to develop volunteer criteria instead of developing project-based criteria. The evaluation of the NSD project in Côte d'Ivoire concluded that without strong leadership, it is difficult to work to make the organisation more efficient, effective and sustainable. The development of a National Society requires the mobilisation of diverse and sustainable resources.

The case study on the Uganda Red Cross financial sustainability also reflected the importance of leadership and organisational culture. While producing and implementing management policies was relatively quick, barriers to full implementation included established organisational cultures and ways of working. Changing these takes longer, and may require deeper work to change mindsets within the National Society. Experience and evaluations show that positive changes in terms of financial sustainability can be reached when project funding is complemented by investment funding: small amounts of relatively flexible funding that can be applied to National Society developmental priorities.

*Programme evaluation 2016–2019:* In addition to project-level evaluations, a learning-oriented programme evaluation to look at the three-year programme achievements in 2016–2018 and the progress achieved in programme quality and effectiveness standards was commissioned in the last quarter of 2019. Evaluation results, which will be reported more in depth as part of the 2020 annual report, have informed the Programme planning for 2020 (more about changes under 1.2 Programme development in 2019).

### 5.3. Risk management

Risk management is an integral part of the Finnish Red Cross performance management system embedded in operational and financial planning as well as monitoring and reporting procedures. Risk management in FRC International Operations and Programmes is defined as a continuous cycle of identification, assessment, analysis, monitoring and response to risks. Instead of avoiding risks they are potential opportunities to be managed systematically and consistently at all levels of management. The risk management process is performed at various levels (projects, partners and programmes) and is integrated in the FRC Project Information Management System (PIMS).

Programme level risk management is guided by the programme-level risk management plan 2018–2021, which is revised and updated regularly and used in full scope. At the project level all risks are recorded in the risk register in PIMS and monitored

and mitigated on a regular basis by the regional teams and HQ personnel, and when needed, taken forward to FRC senior management level.

The Programme Risk Monitoring Summary for 2019 in Annex 5 summarises the materialisation of some of the identified risks and their impact on the Programme implementation in 2019. Increased volatility in Afghanistan, rise of tensions and insecurity in Somaliland, and for instance the disruptive Cyclone Idai and Southern African food security crisis in 2019 showed how political instability and natural disasters affect programme implementation by challenging the monitoring, causing delays and creating a need to plan for alternatives and requiring the ability to swift quickly from development work to disaster response mode.

FRC's partners' varied capacities to administrate, manage and implement projects are another well-recognised risk, which was materialised in Zimbabwe where several financial irregularities were observed in 2019. The identified irregularities also impacted the programme schedules. The FRC had to increase controls, which slowed down the financial transactions and consequently made e.g. procurement processes slower. At the programme level the FRC has constantly developed its capacity to identify risks related to partners and mitigate their impact and likelihood. In 2018, the FRC put efforts in developing its process for partner assessment and adopted a practice of documenting the financial and administrative capacities of FRC's bilateral partners. In 2019 two new assessments – one on Niger and the other on Myanmar due to the planned modality change – were initiated and scoping missions were planned for the beginning of 2020.

The further development of risk management practices will continue in line with the recommendations rising from the ECHO FPA assessment the FRC underwent in 2020. Work will focus on developing a documented register of irregularities, fraud, corruption and safeguarding cases to ensure that reported instances will be adequately documented, and systematising the review and follow-up of corrective measures ensuring that follow-up of identified risks and mitigating activities are linked to each risk. Also safeguarding risk consideration will be incorporated in the normal risk management process better.

## **6. Finance and administration**

### **6.1 Finance and human resourcing**

The International Finance and Administration Unit continued to ensure financial and administrative scrutiny and lead the development of key finance and administrative processes in support of the Finnish Red Cross international programmes and operations. In 2019, no major financial system changes were introduced but the focus was on ensuring the mainstreaming of the tools and systems developed during previous years and supporting their utilisation. Preparing for the evaluation of FRC's financial systems and processes as part of the ECHO FPA assessment, conducted in January–May 2020, dominated the year 2019 and a number of different documents describing, among others, the financial processes and risk management systems, were collected for the auditors to review. The auditors evaluated that the FRC scores on average 9.28 points out of the maximum 10.

In 2019 the Programme support structure remained practically the same in Asia, with two regional delegates placed in Kuala Lumpur, one Programme Delegate based in Nepal and one in the Philippines. In addition, one FRC delegate supported IFRC programme work in Myanmar. In Africa the FRC supports development cooperation activities in countries of which some are relatively new programme countries, and the Finnish Red Cross complemented its regional support structure with country delegates in some key partnership countries already in 2018. In addition, regional representation was divided into two different locations, Nairobi and Harare during 2019. With the combination of regional and country-placed delegates, the FRC aims to ensure that delegates have an optimal role in the facilitation and technical support given to partner National Societies. The structure is kept administratively as light as possible in order for it to be adaptable more easily in the changing operational context and technical support required by the partners.

For East Africa, the FRC regional office is located in Kenya with a Regional Representative, a Regional Finance and Administration Delegate, a Regional Disaster Management Advisor and a Country Delegate (covering Kenya and South Sudan). In addition, the FRC has a Regional Health Delegate in Ethiopia and a Country Delegate in Burundi. In order to better meet the management and administrative needs, the FRC Deputy Regional Representative role stationed in Zimbabwe was upgraded to that of Regional Representative. The Regional Representative's task is to oversee programme support and administration in Southern and West Africa. A Regional Finance and Administration Delegate and a Programme Support Delegate were also located in Zimbabwe. Furthermore, the FRC has a Regional Finance and Administration Delegate and a Regional Programme Support Delegate in Sierra Leone. During 2019, the Finnish Red Cross also continued youth cooperation with partner National Societies with four Youth Delegate deployments to Malawi.

In Asia the FRC continued with the same set-up as in previous years, in which regional delegates are located in main partner countries. The bilateral programme team consists of a Regional Representative and a Regional Finance and Administration Delegate both based in Malaysia and a Regional Programme Support Delegate based in Nepal. In addition, the FRC has a Regional Disaster Management Delegate in the Philippines. The Delegate gives capacity-building support to activities in the Philippines when necessary, and his salary is partly covered from the MFA framework. The decision made in 2018 to deploy an FRC Staff-on-Loan Delegate to the IFRC community-based health programme in Myanmar was successful and worth investing in. The Delegate supported multilateral operation in the country while at the same time strengthening partnership development between the FRC and the Myanmar Red Cross Society.

FRC's HR resources in 2019 are summarised in table 2. With this global HR set-up, the FRC continued to promote cross-regional knowledge-sharing by sending regional delegates from one region to another to support in specific operations or projects for which they possessed strong competence. In addition, some short-term missions to support the overall programme work in Asia and Africa were covered from the MFA framework, e.g. in the case of the feasibility study of the programme in Zimbabwe.

Sub-region	Country	Delegate
Southern Africa	Zimbabwe	Regional Representative Regional Finance and Administration Delegate Programme Support Delegate
West Africa	Sierra Leone	Regional Programme Support Delegate Regional Finance and Administration Delegate
East Africa	Kenya	Regional Representative Regional Finance and Administration Delegate Regional Disaster Management Advisor
	South Sudan	Country Delegate
	Ethiopia	Regional Health Delegate
	Burundi	Country Delegate
Asia	Malaysia	Regional Representative Regional Finance and Administration Delegate
	Nepal	Regional Programme Support Delegate
	Philippines	Regional Disaster Management Delegate
	Myanmar	Health delegate (Staff-On-Loan IFRC)

**Table 2. List of FRC regional and country delegates in 2019**

## 6.2 Financial reporting and cost-effectiveness

The original programme budget for 2019 was EUR 6,675,000, of which 67% MFA funding and 33% FRC's own funding. During the year, three requests for budget revisions were made. The final revised budget is EUR 6,755,372, which is EUR 80,372 higher than the original budget.

The total expenditure of the Programme in 2019 was EUR 6,515,043, showing an under-expenditure of EUR 240,330 compared to the revised budget. As a result, FRC's funding share decreased to 31.9% while MFA funding remained at EUR 4,440,000. No MFA funds were carried over to the year 2020. Detailed financial report for 2019 is presented in Annex 6.

In the budget revision process the largest reallocations were made to the Malawi Community Resilience Programme (EUR 232,778) and to the Somalia Integrated Health Programme (EUR 111,111). The increase in Malawi was made to support disaster preparedness, climate change adaptation activities and the building and renovation of health, children's and girls' centres. The increase of Somalia was targeted to cover the operational cost of health clinics. The funding to these was mainly allocated from the Afghanistan Community-Based Health Care Programme (EUR -189,111), Ethiopia New Health project (EUR -170,500 and Zimbabwe Forecast-based Financing programme (EUR -102,500).

In 2019, the actual delegate costs in the regions totalled EUR 995,261, which was less than the respective delegate budget of EUR 1,010,400 (original EUR 1,080,000). For example youth delegate costs were less than budgeted.

Ten per cent of the total budget for the Programme have been reserved as administrative costs as per the terms of the contract. The administrative cost covers a portion of the costs of the International Operations and Programmes department of the FRC.

**MFA development framework expenditures in 2019**

<b>Costs</b>	<b>Original Budget 2019</b>	<b>Actual 2019</b>
A. Programme costs	4 664 700	4 587 953
B. Programme support	38 700	63 966
C. Delegates	1 080 000	995 261
D. Communication and advocacy	224 100	216 357
E. Administration	667 500	651 504
<b>TOTAL COSTS</b>	<b>6 675 000</b>	<b>6 515 043</b>
<b>FUNDING</b>	<b>Per cent</b>	<b>EUR</b>
Government funding	68%	4 440 000
FRC funding	32%	2 071 859
Interest income	0%	3 183
<b>TOTAL FUNDING</b>		<b>6 515 043</b>