

# International Results Report 2020





# TABLE OF CONTENTS

COVID-19 response  
volunteer in Curacao.  
Photo: ©IFRC

- 3 COVID-19 response infographic
- 5 Message from the Secretary General
- 8 Fundamental principles of the Red Cross Red Crescent
- 10 The Norwegian Red Cross and the sustainable development goals

## 12 COVID-19

- 14 2020 in numbers
- 15 Where we work
- 16 Our global COVID-19 response
- 19 Yemen
- 20 Pakistan
- 21 Bangladesh
- 22 Afghanistan
- 23 South Sudan
- 24 Somalia
- 25 Colombia
- 26 Relief: Food and basic items

## 28 Global health activities

- 30 Healthcare in the Dadaab refugee camp
- 31 Fistula treatment
- 32 Healthcare to the displaced in Syria
- 33 Principled humanitarian action in Afghanistan

## 34 Global health activities

- 36 Municipal water projects in Syria
- 38 Water and sanitation in Burundi

## 40 Disaster Response

- 42 The Beirut port explosion
- 46 Hurricane Iota & tropical storm ETA
- 48 Disaster Response Emergency Fund (DREF)

## 50 Innovation

- 52 COVID-19 challenges and innovation
- 54 Practical solutions to humanitarian challenges
- 58 Innovations in mental health
- 60 Innovations in water and sanitation

## 62 Advocacy

- 64 Health Care in Danger
- 66 Protection from weapons
- 70 Sexual and gender based violence

## 72 Organisational support to National Societies

- 74 Finance development
- 76 Local fundraising

## 79 Resources and Expenditure

- 80 Corporate sponsors
- 83 Financial information

## THE INTERNATIONAL RESULTS REPORT 2020

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**DESIGN** Spoon, SPOONAGENCY.NO | **COVER PICTURES** 1. Red Cross volunteers distribute food to migrants at a camp near Bihac, Bosnia and Herzegovina. Photo: © IFRC 2. Volunteers distribute aid to survivors of the Beirut port explosion, Lebanon. Photo: © Lebanon Red Cross 3. A Finnish Red Cross nurse at the COVID-19 treatment centre in Aden, Yemen. Photo: ©Anette Selmer-Andresen/NorCross 4. Volunteer, Alia Ali, shares COVID-19 prevention messages on the streets of Aden, Yemen. Photo: ©Anette Selmer-Andresen/NorCross 5. A health volunteer supports the ICRC clinic in Cúcuta, Colombia. Photo: ©Erika Piñeros 6. A volunteer cradles a young boy in Syria. Photo: ©Syrian Arab Red Crescent 7. Mother and son, Daniella and Aleksandar, distribute vouchers, masks and food to vulnerable Roma families in Prijedor, Bosnia and Herzegovina. Photo: ©IFRC 8. Home visits to elderly people in rural areas is a key part of the COVID-19 response. Photo: ©El Salvador Red Cross 9. Lebanese Red Cross ambulance teams transport survivors of the Beirut port explosion. Photo: ©Lebanon Red Cross.





Volunteers, health staff and teachers trained in COVID-19 symptoms and prevention messages



Mobile taps and sinks installed at key points so that people can wash their hands

As the economic situation worsens, low-income families receive food or cash assistance



COVID-19 prevention messages broadcast on radio/sent via text message/shared in clinics



Volunteers disinfect public places and schools

# COVID-19 RESPONSE

*How we helped stop the spread of the Corona virus.*

Volunteers visit community members at home, schools and prisons. They share advice on handwashing and social distancing. Sometimes they deliver hygiene kits with soap and disinfectants



Personal Protective Equipment (PPE) given to frontline health workers and volunteers



COVID-19 patients are treated in Red Cross Red Crescent clinics or hospitals (sometimes transported in RCRC ambulances)



Telephone hotlines used under lockdown









NorCross General Secretary, Bernt Apeland, visits the ICRC hospital in Maiduguri Nigeria.

Photo: Truls Brekke Photo: ©Norwegian Red Cross

**Bernt Apeland**

# MESSAGE FROM THE SECRETARY GENERAL

*Humanitarian needs increased in 2020. Conflict, poverty, climate change and health crises continued to shatter people's lives.*

**H**umanitarian needs increased in 2020. Conflict, poverty, climate change and health crises continued to shatter people's lives. The COVID-19 pandemic affected us all, but as always, it was the most vulnerable that were hit hardest. The deadly virus increased existing challenges for those caught in war, conflict and extreme violence, and it created new ones as a result of economic downturn and isolation.

The Norwegian Red Cross (NorCross) is one of 192 National Societies that make up the world's largest humanitarian organisation. Our international work is grounded in the fundamental principles of the Red Cross Red Crescent Movement (RCRC). A belief in humanity and unity underpin the Movement's goal "to prevent and alleviate human suffering wherever it may be found".





**NorCross General Secretary, Bernt Apeland, visits a refugee camp in Nigeria where the ICRC provided clean water to over 35,000 people.**

Photo: © Truls Brekke/  
Norwegian Red Cross

In the face of the health crisis that hit globally last year, the Norwegian Red Cross, and the other National Societies around the world who make up the International Federation of Red Cross Red Crescent Societies (IFRC), and the International Committee of the Red Cross (ICRC), have played a pivotal role in COVID-19 disease prevention, preparedness and treatment.

NorCross' international response to COVID-19 comprised of support to various National Societies and Movement-wide global COVID-19

appeals. Approximately 87 million Norwegian Kroner (NOK) was spent on fighting the pandemic in 2020, of which 45 million NOK was channelled to the global appeals. Our staff and delegates provided essential expertise to RCRC partners across the globe.

COVID-19 has certainly demanded attention and effort, but volunteer and staff action was however not limited to the pandemic. Throughout the year, volunteers responded to crises such as hurricane Iota in Central America, and the devastating port explosion in





«In 2020, we reached millions of people with health services, water and sanitation»

Bernt Apeland

«In the months and years ahead, NorCross will continue to deliver on its mandate to respond to humanitarian needs»

Bernt Apeland

Beirut, Lebanon. Volunteers in Burundi, South Sudan and Iraq have helped improve the health of their communities through the construction of latrines and water systems in schools and hospitals.

Teams of health volunteers across the globe delivered first aid training, immunisation campaigns and lifesaving advice on psychosocial health. Thousands of volunteers shared preventative health advice amongst their communities, many of which are marginalised and have little or no access to healthcare.

NorCross also advocated for the right to education and the right to healthcare. In El Salvador, Honduras and Pakistan, we worked with communities and schools to ensure that all children are given the opportunity to learn. In Afghanistan, Yemen and Latin America we worked closely with healthcare staff and local authorities to record attacks on staff and health facilities.

Our core belief that access to health is a universal human right informs how and where we work. And protection is not limited to staff and clinics. We continue to call for greater action on sexual and gender-based violence within the RCRC Movement and with governments across the globe. We also campaign on the need for adherence to international humanitarian law – specifically in relation to the proliferation of illegal weapons and urban warfare.

The pandemic will continue to demand our attention. Despite the roll out of vaccination campaigns in some countries in 2021, COVID-19 cases and deaths continue to rise exponentially across the globe as the virus mutates (as of June 2021). The social and economic consequences

of the pandemic are potentially catastrophic. According to the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), the number of people with humanitarian needs rose from 3.5 million in March 2020 to 9.2 million in November of the same year. UN agencies claimed the pandemic's long-term effects could push a further 207 million people into extreme poverty, with women and children disproportionately affected.

In the months and years ahead, NorCross and the RCRC Movement will continue to deliver on its mandate to respond to humanitarian needs. We currently support COVID-19 vaccination campaigns in many countries, and we will continue to deliver health and WASH services to those in conflict areas. Our commitment to local humanitarian response means we will support the organisational development of National Society partners. We will empower volunteers to strengthen their own communities as they see fit; and we will advocate for adherence to international humanitarian law at home and abroad.

NorCross is proud to provide support and technical expertise to its Red Cross and Red Crescent partners. We see the value in being part of a vast international network that provides global solutions to humanitarian crises.

**Bernt Apeland**  
Secretary General

# Fundamental Principles of the Red Cross and Red Crescent

*In a world with increasing isolation, tension and recourse to violence, it is clear that the Red Cross Red Crescent must champion the individual and community values which encourage respect for other human beings and a willingness to work together to find solutions to community problems.*

## Humanity

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



## Neutrality

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

[Read more about the principle of Neutrality.](#)



## Impartiality

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



## Voluntary service

It is a voluntary relief movement not prompted in any manner by desire for gain. [Read more about the principle of Voluntary service.](#)



## Unity

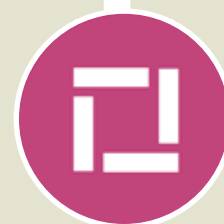
There can be only one Red Cross or one Red Crescent Society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

[Read more about the principle of Unity.](#)



## Independence

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



## Universality

The International Red Cross and Red Crescent Movement, in which all Societies have equal status and share equal responsibilities and duties in helping each other, is worldwide. [Read more about the principle of Universality.](#)

# THE OBJECTIVE OF THE NORWEGIAN RED CROSS' INTERNATIONAL WORK IS TO IMPROVE THE HEALTH AND PROTECTION OF THE MOST VULNERABLE PEOPLE AFFECTED BY CONFLICT, CRISES AND CLIMATE CHANGE

## Good health and well being

Our priority is to improve the health of the most vulnerable people in areas where health services are limited or non-existent. We aim to increase access to quality health care in line with the universal health coverage agenda.

### 3 GOOD HEALTH AND WELL-BEING



### 16 PEACE, JUSTICE AND STRONG INSTITUTIONS



## Peace, justice and strong institutions

NorCross works on specific protection issues that violate people's human rights. In collaboration with the RCRC Movement, we support the protection of health workers, patients and clinics. We advocate for an end to SGBV and illegal weapons proliferation. We push for greater access to education in conflict. We support the restoration of family links i.e. tracing people missing in conflict. And we prioritise humanitarian diplomacy in order to promote adherence to international humanitarian law.

### 6 CLEAN WATER AND SANITATION



## Clean water and sanitation

NorCross prioritises access to adequate clean water and sanitation because it is vital to public health. Our activities provide safe drinking water, latrines and advice on hygiene practices such as handwashing. These three interventions help reduce outbreaks of waterborne disease.

### 13 CLIMATE ACTION



## Climate action

NorCross understands the impact of climate change on health. Large-scale disasters like floods, storms and earthquakes cause massive destruction and death, and heat waves and wildfires occur with greater frequency. Our current international strategy supports the development of programmes which target healthcare needs related to conflict, climate change and environmental degradation.

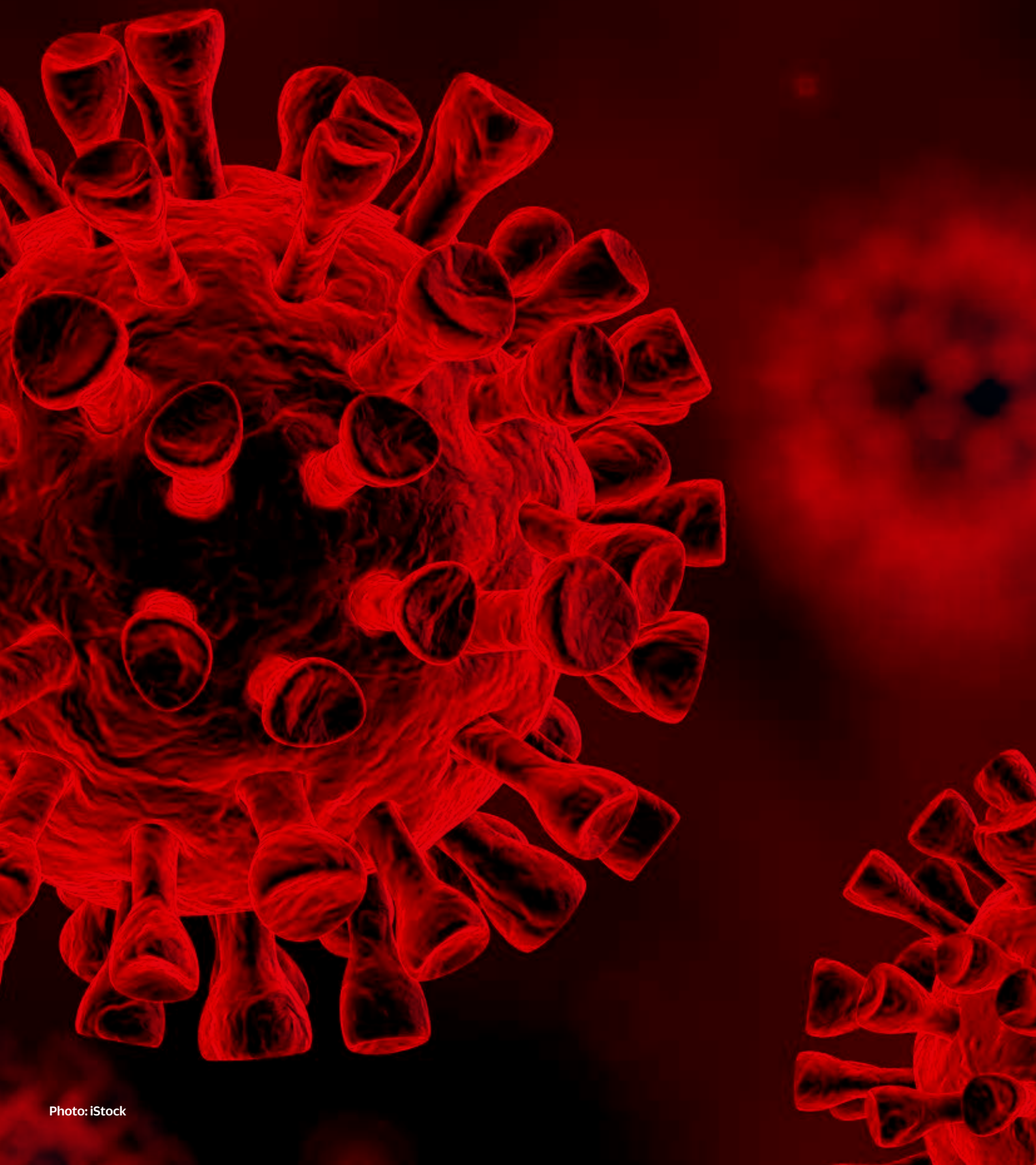
## THE GLOBAL GOALS For Sustainable Development



Mexican Red Cross paramedics transport  
suspected cases of COVID-19.  
Photo: ©Mexican Red Cross





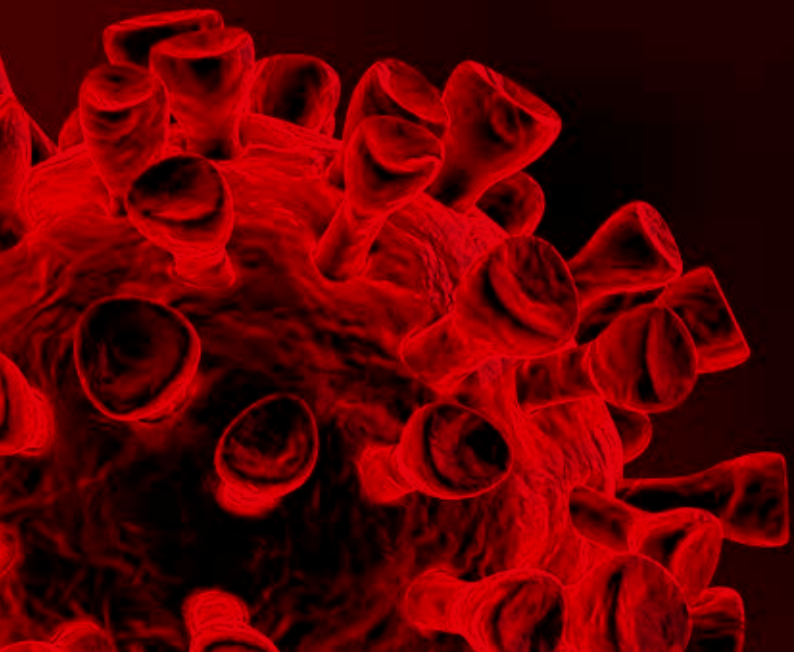




# COVID-19

*The global pandemic has caused the deaths of close to four million people worldwide (WHO June 2021). NorCross and the RCRC Movement have been at the forefront of the global emergency response to the deadly virus.*

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# 2020 in numbers\*

*NorCross' international work has reached close to 2.6 million people with health services, and over 3.4 million people have been reached with COVID-19 health and hygiene promotion messages that we know save lives.*

Our volunteers and staff have reached out to communities with essential advice on handwashing, the use of masks, and the importance of social distancing. We have provided handwashing basins in public places, access to clean water, anti-bacterial solutions, personal protective equipment (PPE), ventilators, oxygen tanks, access to life saving drugs, primary health care, food relief, medical transport, psychosocial support and more.



3.4 million people reached with hygiene promotion on the risks of COVID-19 and how to prevent infection.



Over 2.6 million people access primary and secondary health services.

85 000 000

Over 85 million NOK was allocated specifically to the COVID-19 response. Funds supported bilateral projects and Movement-wide appeals.



## 2020 Countries

### AFRICA

- » Kenya
- » Somalia
- » South Sudan
- » Nigeria
- » Burundi
- » Mozambique
- » Ivory Coast
- » Liberia

### MENA<sup>1</sup>

- » Turkey
- » Yemen
- » Lebanon
- » Syria
- » Iraq
- » Libya

### ASIA

- » Afghanistan
- » Pakistan
- » Myanmar
- » North Korea

### AMERICAS

- » Honduras
- » Colombia
- » El Salvador
- » Guatemala

### EUROPE

- » Russia
- » Moldova
- » Belarusia
- » Georgia
- » Azerbaijan
- » Armenia

### TRIPARTITE<sup>2</sup>

- » Bangladesh
- » Burkina Faso
- » Central African Rep.
- » Dem.Rep.Congo
- » Ethiopia
- » Lake Chad region
- » Sahel
- » Palestine
- » Sudan
- » Ukraine
- » Nagorno-Karabakh
- » Venezuela

<sup>1</sup> Middle East & North Africa.

<sup>2</sup> Norwegian government funds to ICRC administered by NorCross.



INTERNATIONAL  
FEDERATION

We work directly with 15 national societies. Plus additional countries through the Federation & ICRC global COVID-19 appeals.



Over 530,000 people had improved access to water and sanitation.



Over 920,000 people received emergency relief: hygiene kits, food and other items.

\*Numbers reached will increase when Movement-wide data is published throughout 2021

# Our Global COVID-19 Response

## Results by country: Health programme

Afghanistan	1.780.778
Syria	956.165
South Sudan	257.727
Kenya	121.549
Pakistan	117.762
Burundi	68.600
Somalia	49.910
Bangladesh	36.159
Lebanon	35.940
Myanmar	10.270
Honduras	9.001
Guatemala	566
El Salvador	400

### Honduras

- COVID-19 prevention for elderly prisoners
- 1000 masks for vulnerable community members
- Psychosocial support to health workers proves invaluable as rates of abuse increase during the pandemic

### Guatemala

- Over 5000 people receive hygiene promotion.
- Emergency funds support families with COVID-19

### El Salvador

- COVID-19 training for teachers, health staff and community organisations reaches over 5000 people

### Colombia

- Former FARC combatants and locals receive PPE and food funded by Norwegian embassy

### Bangladesh

- Health volunteers keep COVID-19 numbers low in Cox's Bazaar refugee camp. Over 35,000 homes reached with advice on handwashing and the importance of social distancing

### Somalia

- Red Crescent volunteer identifies first official COVID-19 case using NorCross community-based surveillance tool
- Over 250 staff and volunteers provided with PPE
- COVID-19 prevention messages delivered to health clinic patients

### Pakistan

- COVID-19 hotline reaches almost 1 in 4 Pakistanis with COVID-19 prevention messages
- 162, 000 people screened for symptoms of COVID-19 infection at district hospitals
- 24 sinks located in markets and public places
- Hospital for COVID-19 patients in Rawalpindi



## South Sudan

- Mass public awareness campaign and improved access to WASH helps conflict affected communities fight COVID-19

## Kenya

- Over 160,000 people screened for COVID-19 in the world's second largest refugee camp: Dadaab

## Russia

- Food delivery replaces school meals under COVID-19 lockdown restrictions

## Afghanistan

- COVID-19- prevention advice for 1.7 million people who attend the vast network of NorCross supported clinics.
- COVID-19 screening on the border with Iran reduces the spread of the infection.
- Kabul hospital supported with ventilators and medical equipment.

## Myanmar

- Food parcels for quarantined COVID-19 patients
- 2000 face masks and 400 face shields
- COVID-19 awareness campaigns reach over 10,000 people in displacement camps and villages across Myanmar, many of whom are from the Rohingya, Shan and Kachin minority groups

## Lebanon

- Close to 28,000 masks purchased for staff working in mobile health units and ambulance services
- Volunteers and staff reach out to Syrian refugees and local Lebanese with hygiene promotion
- \*Palestinians living in Lebanon— over 17,000 people supported. Additionally, 24 health facilities benefitted from disinfectants, including five hospitals, five clinics, and ten community centres.

## Syria

- Public information campaign reaches close to a million people with risk communication.
- PPE for 3000 health volunteers & staff on the frontlines
- 9000 COVID-19 hygiene kits purchased.
- Public places disinfected.
- Distribution of food parcels, soap and basic items to over 254, 000 people prove invaluable as the average food shop doubles in price due to economic downturn caused by COVID-19.

## Yemen

- NorCross provides technical leadership and funds for one of Yemen's few COVID-19 treatment centres





Medical staff at the  
COVID-19 care centre  
in Aden, Yemen.

Photo: Photo: ©  
Mubarak Saeed /ICRC



Health staff outside the COVID-19 care centre in Aden, Yemen.

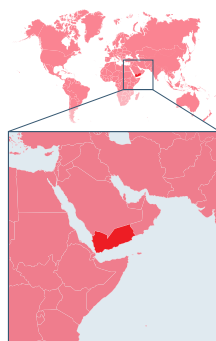
Photo: ©Mubarak Saeed/ICRC

# Yemen

## NorCross takes technical lead for COVID-19 treatment centre in war torn Yemen

**N**ews reports suggest that COVID-19 ravaged Yemen in a matter of months. The fragile health care system shattered by years of conflict was in no shape to cope with the pandemic. Graveyards doubled in size as the first wave swept across the country. And in September 2020 the World Health Organization confirmed that Yemen had the world's highest rate of COVID-19 deaths per caseload. A population of close to 30 million people had few if any healthcare options as the country's only dedicated COVID-19 facility run by Médecins Sans Frontiers was overstretched and forced to turn patients away.

In response to the humanitarian need, NorCross, the Finnish Red Cross and ICRC deployed a 30 bed hospital and key staff to Aden in September. In the first three months over 115 patients with COVID-19 were admitted



### YEMEN

- Over 7000 people receive health care assistance.
- Over 400 volunteers and staff trained.
- 2,500 sets of personal protective equipment purchased.



**Video:** Click the playbutton to watch this video (Arabic with Norwegian subtitles).



**Video:** Click the playbutton to watch this video.

and a total of 340 consultations took place. The hospital has provided much needed medicines, treatment and palliative care to those affected by the ongoing COVID-19 pandemic.





Pakistan Red Crescent doctor responds to COVID-19 queries on the telemedicine hotline. Photo: ©IFRC

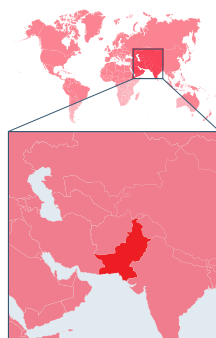
# Pakistan

## Telecoms key to COVID-19 prevention

**T**he Pakistan Red Crescent embarked on digital solutions and initiated telemedicine (telephone consultations and advice) to reach people at risk. They also set up a community engagement hotline and a text message-based public information campaign. The hotline staffed by volunteers and health staff was a trusted source of information for 98,000 people. It offered practical advice on COVID-19 symptoms and how to stay safe.

An unintended consequence of the COVID-19 hotline was an increase in volunteer recruitment – over 15,000 people signed up to offer their time and expertise. And even people who dialled incorrectly received COVID-19 prevention advice!

The mass public information campaign, a collaboration between the Pakistani Red



### PAKISTAN

- Over 62,000 people receive health care assistance.
- 8,000 people receive relief items.
- Over 2,700 receive psychosocial support.



A little girl receives a family hygiene kit. Photo: © Pakistan Red Crescent

Crescent and a leading Pakistani telecoms company, reached 1 in 4 Pakistanis (49 million people) with voice and text messages on COVID-19 health advice. We also ensured that volunteers and staff had adequate protective equipment – masks and disinfectant solutions – to work safely in the community.





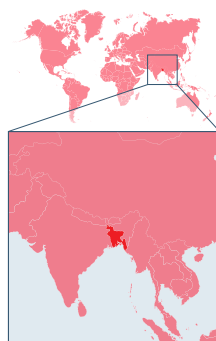
Bangladesh Red Crescent volunteers teach refugees in the camp how to protect themselves against COVID-19. Photo: © Bangladesh Red Crescent

# Bangladesh

*Bangladeshi Red Crescent Volunteers keep COVID-19 deaths low in world's largest refugee camp*

**K**aniz (pictured right) volunteers at the Bangladesh Red Crescent community centre in Cox's Bazaar. Three years earlier Kaniz fled Myanmar with her son in the wake of violence against Rohingyas and other minorities. She is one of 26 health volunteers who were trained on COVID-19 infection and control.

Equipped with knowledge, diagrams and protective masks volunteers like Kaniz visited over 36,000 homes. Important health and hygiene advice on social distancing and handwashing helped keep infection rates low. Reports show there were 10 COVID-19 deaths in the camp compared to 73 in the surrounding areas, despite the camp population being twice the size. The work of Kaniz and other volunteers like her helped stop the spread of the disease in the world's largest refugee camp.



## BANGLADESH

- Over 36,000 people received COVID-19 prevention advice.
- 9,500 are treated at health clinics



Bangladesh Red Crescent volunteer Kaniz and her son at the Cox's Bazaar refugee settlement camp. Photo: © Bangladesh Red Crescent



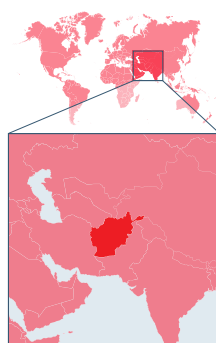
A young boy receives treatment at the Ali Abad orthopaedic centre in Kabul, Afghanistan. Photo: ©ICRC

# Afghanistan

## COVID-19 containment in Afghanistan

COVID-19 swept across Iran leaving many Afghan migrant workers unemployed. An estimated 200,000 returned to Afghanistan – a risk factor for the spread of the virus. Afghan Red Crescent mobile health units were deployed to border towns such as Mazar to screen returnees. One of them, Hassan, said, “The work of the Red Crescent is vital and precious. This is one of the ways to control the spread of the virus. I appreciate their efforts”

The Afghan Red Crescent Society is a major healthcare provider in rural and hard-to-reach areas of the country. Last year, NorCross delegate, Kate Jarman, travelled to Afghanistan to help health staff prepare for the COVID-19 pandemic. “We wanted to ensure that clinicians had a good knowledge of COVID-19, how to keep the clinics safe, through cleaning, the use of PPE



### AFGHANISTAN

- Over 1.4 million received COVID-19 prevention advice.
- Over 6,000 received psychosocial support.

and how to set up a triage process in the clinics” said Jarman.

In a country with a weak health system, basic health care and prevention messages save lives. The infection prevention and control trainings run by Kate Jarman and Dr Asadullah of the Afghanistan Red Crescent, trickled down to the 10 mobile health units, a district hospital and the 68 health centres that NorCross supports. This medical knowledge helped contain COVID-19 across the country.





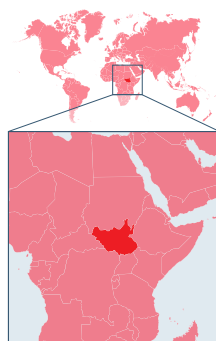
•Women line up to receive clean water in their remote village in Werlang, Aweil East, South Sudan for the first time after the construction of a borehole. Photo: © Corrie Butler/IFRC

# South Sudan

*Cholera projects switch to COVID-19 prevention in response to the pandemic*

**W**hen the first case of COVID-19 was reported in April 2020, the South Sudan Red Cross mobilised quickly. Over 125 volunteers received training on the dangers of COVID-19 and how to prevent transmission. They in turn reached over 250,000 people with messages on how to stay safe in the pandemic. A COVID-19 radio campaign with important advice on social distancing and infection control reached 360,000 people on the airwaves. In a country larger than the Iberian Peninsula with little or no road network, radio was the most effective way to reach some of South Sudan's 12.5 million people.

In addition to disease prevention, NorCross funded the construction of 39 handwashing stations and purchased PPE, anti-bacterial solutions and soap. This came on top of the 60



## SOUTH SUDAN

- 180,000 have improved access to water.
- Over 66,000 people receive health services.
- Over 100 people trained on health topics.

boreholes that were already constructed as part of a cholera prevention project. Infrastructure to provide clean water for cholera prevention enabled people to wash their hands and thus stop the spread of COVID-19. Volunteers were able to build on the success of existing maternal and child health interventions and simply switch the messaging from cholera to COVID-19. The end result was that local people knew how to protect themselves and were able to reduce the spread of infection.

Local leader from Dhekau, Mr Back Uloro, said “Now I am very happy, I have felt the happiness of community members ...and observed improvements in the health situation...as a result of Red Cross meetings in my village”



Naima Aden Elmi, Somali Red Crescent volunteer, who alerted health authorities to the country's first official documented case of COVID-19 using the NorCross community based surveillance tool. Photo: © Somali Red Crescent

# Somalia

*First COVID-19 case detected by Somali Red Crescent volunteer with the help of NorCross innovation*

In 2020 an estimated 128,000 people were displaced in Somalia. A combination of floods, conflict, locust swarms and COVID-19 intensified an already challenging situation for new and existing internally displaced communities. It was in this environment that Somali Red Crescent volunteers and NorCross staff implemented Community-based surveillance (CBS) as a tool to ensure early detection and early action – if the virus was present in the community. In total over 251 CBS volunteers worked in 88 communities.

Naima Aden Elmi was one of 151 volunteers in the Togdheer region of Somaliland. On March 26th at around 6 p.m., Naima was on a house-to-house visit when she heard that a man who lived in her village had recently returned from London. He had a cough, fever and difficulty breathing. At once, Naima thought the signs she heard matched the COVID-19 symptoms



## SOMALIA

- Over 80, 000 people receive health services.
- Close to 50,000 receive COVID-19 prevention advice.
- 185 people trained on health topics.

## CHOLERA PREVENTION IN SOMALIA

- Community sensitization at the water points or sources (protection of water points from contamination and awareness on water hygiene)
- Personal hygiene and environmental sanitation awareness (use of latrines and proper waste disposal and critical times of handwashing)
- Acute Watery Diarrhoea (AWD) prevention and awareness inside the towns and hygiene awareness sessions in the community and schools
- Dissemination of COVID-19 messages (preventive measures and how to protect yourself from the disease and keep other people healthy)
- Hygiene awareness about risks related to open defecation (to sensitize them the proper use of latrines to keep the environment clean, safe, and healthy)
- Handwashing demonstrations at water points, tap stands, schools and at home (by showing the people the good habits of handwashing to keep themselves clean)
- WASH at the health clinics and in learning centres (by conveying key prevention and awareness messages)
- Hygiene promotion CHAST (Child Hygiene and Sanitation Trainings) in schools and madrasas (Quranic schools)

she had learned about during her volunteer training. Naima immediately visited the community member's house and spoke to the family about the situation. She recorded the information on her mobile phone using custom software that allowed Red Crescent staff to categorize and analyse information about COVID-19 in her community. After verifying with the community case definition, the Somali Red Crescent alerted the regional health ministry. Two hours later a rapid response team arrived at the community member's home and advised him to self-quarantine. A few days later, on March 31st, his COVID-19 test results came in. It confirmed the first case of COVID-19 in Somaliland, thanks in part to Naima's timely intervention.





A COVID-19 response volunteer in Colombia. Photo: Photo: ©IFRC



Volunteers construct mobile sinks in Colombia.  
Photo: ©Colombia Red Cross

# Colombia

## Online psychosocial support benefits rape survivors in rebel held areas of Colombia

**D**espite the Peace Agreement Accord in 2016, violence, drug trafficking and impunity continue to blight the lives of people in Tumaco as disparate rebel groups fight to take control of the coastal town once ruled by the FARC. The predominantly Afro-Colombian and indigenous area scores low on socio-economic indicators and has some of the highest rates of sexual violence in Colombia.

As COVID-19 numbers increased in the spring of 2020, the Red Cross and its partners were determined to protect women trapped in their homes under lock-down rules. Unable to provide support in person, SGBV activists used WhatsApp to support survivors of rape and domestic violence. Group therapy was conducted online, and the SGBV network was able to contact and refer victims of violence via the messaging app. A total of 60 rape survivors



### COLOMBIA

- Over 16,400 people received health services.
- Over 5,600 people had access to improved drinking water.
- Over 460 volunteers and staff trained.

and 179 victims of domestic abuse received advice and care in 2020.

The Red Cross Red Crescent Movement believes that violence against women is preventable and that part of the solution is to change attitudes towards violence in the family. The SGBV project in Colombia aims to increase awareness of sexual violence and how to prevent it. A package of online training workshops was successfully delivered despite COVID-19 restrictions. Digital platforms cannot replace the human connection needed to deliver truly effective healthcare. However, they provided a level of protection and care to marginalised women (and men) in Colombia's forgotten conflict.



Every day the volunteers work hard all over the MENA region to keep people safe from COVID-19. Photo: ©Iraqi Red Crescent



Volunteers and staff of the Novgorod regional branch of the Russian Red Cross delivered more than 450 food packages to the families in need. Photo: ©Russian Red Cross

# Food, hygiene kits and other basics

*Food parcels, water cans, PPE and hygiene kits were key to NorCross' strategic humanitarian assistance in 2020. As the economic situation worsened under COVID-19, many people struggled to cover basic needs such as food and essential household items.*

**N**orCross and its partners distributed over 920,000 relief items worldwide. In Pakistan's Swat valley over 9,000 hygiene kits with items such as soap and towels were given to families in COVID-19 affected areas, and more than 6,000 hygiene kits were allocated to girls' schools in the region. Hygiene essentials and important COVID-19 prevention advice were delivered simultaneously. These distributions are a key part of community engagement and provide an important platform to share preventative health advice. The Pakistani Red Crescent installed handwashing facilities, they donated PPE to hospitals, and they gave people soap to keep their hands virus free.

In Syria, food security challenges were part of the Syrian Arab Red Crescent's COVID-19 response strategy. Close to 80,000 people received food relief, 50% of whom were either internally displaced or returnees. Over 100,000 people received hygiene kits. Large scale

Hygiene  
essentials  
and important  
COVID-19  
prevention  
advice were  
delivered  
simultaneously.

distributions took place in rural Damascus. A smaller operation focused on the area of Tartus where wildfires caused widespread devastation. According to an assessment by the Syrian Arab Red Crescent, the fires that hit the country in October caused significant damage to 179 villages in Latakia, Tartus and Homs affecting 40,000 people. A Federation report argued: "the eastern basin of the Mediterranean Sea has witnessed mass destructive wildfires which are becoming a recurring annual event due to climate change...devouring acres of lands beyond rapid control of overwhelmed local capacities" The wildfires placed further stress on a country already grappling with a civil war and a pandemic. The Syrian Arab Red Crescent and many of the sister National Societies that NorCross works with have a triple burden to deal with: conflict, climate change and the COVID-19 pandemic. In this setting, local volunteer action is extremely effective. They understand the reality on the ground, and they are less hampered by travel restrictions and other administrative barriers.







Grace Michael with her 6 month old baby Moses at the Mundri Primary Health Clinic.  
Photo: © Tomas Bertelsen/  
Danish Red Cross



# Global health activities

*NorCross activities were affected as operational priorities shifted to meet the needs of the COVID-19 emergency. A NorCross report on the indirect negative health impacts of COVID-19 clearly shows that health services were disrupted: vaccination campaigns were stalled and non-COVID-19 health priorities such as TB, HIV and malaria took a back seat as the pandemic took hold.*



**Read the report**

**CLICK HERE!**

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Existing NorCross projects on health, WASH, finance development, disaster response and protection saw reduced implementation due to lockdown measures. However, our long-term strategic focus on access to healthcare and WASH combined with the volunteer model proved invaluable in 2020. We could not have predicted the pandemic, but our thematic expertise meant that volunteers and staff were well prepared to deliver an effective, co-ordinated response.

Our goal to improve maternal and child health, to prevent cholera, and to reduce diabetes and heart disease continued in the shadow of the pandemic. Our efforts to increase access to clean water, to mitigate the effects of urban violence and to push for humanitarian innovation were sustained. We continued to advocate for an end to attacks on health staff, disarmament, and increased political engagement on sexual and gender-based violence. Read more about our non-COVID-19 work in the following pages.





The Kenya Red Cross hospital in Dadaab Photo: © Benoit Matsha-Carpentier/IFRC

## KENYA:

# NORCROSS SUPPORT ENSURES WOMEN AND CHILDREN IN AFRICA'S LARGEST REFUGEE CAMP RECEIVE VITAL HEALTH CARE

The future of the Dadaab refugee camp in Kenya hangs in the balance. Home to over 211,000 people the sprawling settlement has been a safe haven for those affected by famine and conflict across East Africa. However, the delivery of humanitarian aid such as health care and food are not adequately funded by international donors. In 2019, the UN reported a budget shortfall of over \$84 million dollars, 50 % of the required amount. This has affected refugees in the camp. Humanitarian services have been reduced and food rations cut.

Despite these challenges the Kenyan Red Cross, with NorCross and UNHCR, maintained their

«Women benefitted from quality ante and post-natal care.»

support to four health clinics and a hospital in the Ifo 1 area of the Dadaab complex. In 2020, their contribution to the health of refugee women and children was immense. Over 113,000 medical appointments took place, and health staff delivered on average four babies a day. Women across the camp benefitted from quality ante and post-natal care.

Another important addition to women's health is the cervical screening unit – the only one in Dadaab. According to the WHO: "Cervical cancer presents a significant public health threat to women on the African continent – all but one of the top 20 countries worldwide with the highest burden of cervical cancer in 2018 was in Africa" The NorCross-supported facility treated over 1,800 women in 2020. Cervical cancer is not fatal if caught early. Healthcare provided by the Kenyan Red Cross and NorCross offers refugee women a health service that saves lives.

Similarly, mass vaccination campaigns directly improved child health. A health strategy referred to as the "Best buy in public health" by WHO reduces child mortality. A single dose of vitamin A can save a child from measles, a highly infectious disease which could be catastrophic in the context of Dadaab. In 2020, NorCross funds helped immunise over 10,000 children. Staff in the clinics went the extra mile to trace and refer immunisation defaulters – with over 4,500 children followed up and treated. Health staff also focused on child malnutrition, a condition that kills an estimated one million children per year. Over 102,000 children in Dadaab were screened last year – a 30% increase on 2019 figures.





Medical staff outside the Keysaney hospital – one of the few clinics in Somalia that treats fistula. Photo: ©ICRC

## SOMALIA:

# FISTULA AWARENESS AND TREATMENT IS A LIFELINE FOR SOMALI GIRLS AND WOMEN

Ahada, 17, lives in rural Khalafe in the Somali region of Ethiopia. Married by the age of 14 she was pregnant just three months later. Ahada remembers going into labour at around 7 pm, and her mother-in-law calling a traditional birth attendant to the home. After 12 hours of labour the baby's head was engaged but progress was slow. She pleaded with her in-laws to take her to the hospital: they refused. After three days of labour her family finally took her to hospital, but it was too late, the baby had died. One week after her horrific experience, Ahada lost control of her bowel movements and had difficulty walking. The hospital diagnosed a urinary infection, suggested antibiotics, and sent her home. The incontinence and pain continued for two years. Ahada's relationship with her husband deteriorated and they divorced.



Ahada, 17, was treated for Fistula at a Somali Red Crescent hospital.

Her life was effectively 'ruined' before her seventeenth birthday.

She pleaded with her family to help. They heard that another girl with similar symptoms had been treated in Mogadishu. But when they arrived at Daynile Hospital no one could help them. Then, one day as Ahada's father listened to the radio he heard a story about Keysaney hospital and the fistula repair team. The family made the long journey back to Mogadishu and met with a specialist obstetric surgeon who agreed to operate. After the successful procedure Ahada said: "I feel like I am a normal person now and I can interact with my community. I am really thankful...for the endless support".

Ahada is one of 116 patients who were successfully treated for fistula at Keysaney in 2020. Since the project began over 420 women and girls have reclaimed their lives. For 60% of these girls (and women) it was their first pregnancy and almost all of them (97%) lost their babies. Keysaney cannot erase the loss and grief, but it does give girls like Ahada the chance to rebuild their lives.



## SYRIA:

# COMMITTED RED CRESCENT STAFF PROVIDE HEALTH CARE TO THE DISPLACED

Fighting continues to devastate communities across Syria forcing thousands of people to flee their homes. However, Syrian Arab Red Crescent volunteers and staff, many of whom have been displaced themselves, continue to support healthcare. In February, fighting caused the closure of two clinics in rural Aleppo. The former head of the Anadan clinic was displaced along with 22,000 other IDPs to another area close to the Turkish border. Despite the forced relocation, he continued to document the health needs of the newly displaced community.

He urged the Aleppo local Red Crescent branch and NorCross to establish a new clinic. He found a suitable location, sourced equipment and reached out to former colleagues to work alongside him. He even met with local factions to secure assurances the clinic would not be attacked. His determination and the commitment of former staff and volunteers was the driving force behind the opening of a new health centre which opened its doors in July 2020.

Patients receive treatment at a Syrian Arab Red Crescent (SARC) clinic in Aleppo, Syria. Ola Al Ojaili.

Photo: ©Syrian Arab Red Crescent





A former ICRC patient and trainee who lost both her legs above the knee to a mine while collecting firewood near Kabul airport in the late 1990s.

Photo: © Andrew Quilty, ICRC

## AFGHANISTAN:

# PRINCIPLED HUMANITARIAN ACTION IN CONFLICT

Over 40 years of war and conflict has left almost 1 in 4 Afghans acutely insecure. International incursions and internal conflict have left the country divided. Brutal violence has left over 4.7 million people internally displaced in the last decade alone, crushing any hope of socio-economic development and progress.

It is estimated that around 8,500 civilians were killed or injured in 2020. Much of the fatal violence took place in the Taliban controlled Farah district in the north of the country. It is in this context that NorCross and the ICRC committed to support the Baka health clinic - one of only five health facilities for an estimated population of 350,000 people.

The project provided health services in Bakwa and the surrounding areas, supported clinic refurbishment, and introduced guidelines on patient and staff safety. In July 2020, NorCross sent a surgeon, anaesthetist and a specialised nurse. The medical team provided life-saving



Hospital staff attend the COVID-19 training session at the Red Crescent Society district hospital in Kabul, Afghanistan.

Photo: ©ICRC

care to civilians, Taliban and other armed combatants. For the next six months, an estimated 80-100 consultations and up to 15 surgeries took place weekly. The team trained local staff on war surgery, trauma techniques, and emergency procedures such as caesarean sections.

The RCRC Movement cannot end brutal conflicts, but it can train local medics to treat ALL those affected by war. And it can negotiate with ALL sides to ensure that patients, medical staff and clinics are protected in line with international humanitarian law.

# Global WASH activities

*Over 528,000 people had improved access to water and sanitation as result of projects carried out by NorCross and its partners. Water pump installation and repair, latrine building and municipal water projects in hospitals and schools was vital for the communities we work in; especially in the context of the COVID-19 pandemic where handwashing is key to prevention.*

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Volunteers from Sudan  
Red Cross assist with water  
and sanitation activities  
close to the Hamdiet  
refugee camp in Sudan.



«The only hospital in the region now has a reliable water supply thanks to extensive reservoir repairs. Patients have clean water to drink, wards and equipment can be disinfected, and sanitation systems for medical and human waste function effectively because of the project.»

NorCross Syria country programme manager and Red Crescent staff inspect municipal water systems. Photo: ©Syrian Arab Red Crescent





Water treatment plant, Syria. Photo: © Anas Kambal/ICRC

## SYRIA:

# MUNICIPAL WATER PROJECTS IMPROVE ACCESS TO WATER FOR ALMOST A MILLION SYRIANS

After 10 years of civil war much of Syria's water infrastructure is damaged. The deliberate destruction of water systems has left entire communities without adequate clean water and sanitation. NorCross' strategic decision to focus on WASH in conflict areas is directly linked to mortality rates associated with waterborne disease. Dirty water kills more people than stray bullets, which is why NorCross and the Syrian Arab Red Crescent repaired municipal water sources and provided washing facilities for schools across the country. The NorCross WASH delegate was a key addition to the team of engineers who successfully delivered the project.

800,000 people benefitted from WASH projects in the Deir Ezzour region – an area that continues to see violent attacks by ISIS, government militias and other armed groups. The only hospital in the region now has a reliable water supply thanks to extensive reservoir repairs. Patients have clean water to drink, wards and equipment can be disinfected, and sanitation systems for medical and human waste function effectively because of the project.

Rebuilding schools is central to the reconstruction of Syria. A decade of conflict created a 'lost generation' of Syrian youth whose educational dreams were shattered by violence. The Syrian Arab Red Crescent with NorCross' support helped renovate schools in 2020. Over 10,000 pupils in 28 schools in Deir Ezzour now have adequate sinks and toilets.

And repairs to a water station in the Yarmouk camp in Damascus has benefitted returnees who fled the violence years earlier. The two square kilometre 'unofficial' camp was once home to around 160,000 Palestinian refugees. However, numbers dwindled over the last decade as government soldiers, opposition forces and 'Islamic State' fought to gain control. What was once a thriving community of Palestinians and Syrians was reduced to rubble and empty streets.

The UN estimates that 91% of Palestinians in Syria live in absolute poverty, with 8 out of 10 relying on cash-assistance. For the 400 Palestinian families who returned to Yarmouk access to clean water is fundamental.



Pupils benefit from new toilet blocks in Chibotke. Photo: ©Truls Brekke/NorCross



## BURUNDI:

# WATER AND SANITATION IMPROVES THE LIVES OF WOMEN AND GIRLS IN RURAL AREAS

Approximately 60% of people supported with WASH services were in Africa, namely South Sudan and Burundi. Sixty-five per cent of those who benefitted from WASH projects were women. Over 38,000 people benefitted from NorCross-funded water and sanitation projects in Burundi. Volunteers constructed latrines in schools and built over 30 water sources in Rumonge and Kabazi. Diane Ntirandekura is one of thousands of women whose lives are now easier thanks to the work of the Burundi Red Cross.

Before the water project, Diane walked six kilometres every day to collect water for her and her five children: now she walks just one kilometre. NorCross' Water for Life campaign funds also trained community members on how to maintain water sources to ensure sustainability. The work of 'water committee volunteers' has helped reduce the risk of cholera and other diseases associated with unclean water.

School sanitation projects benefitted 2,800 girls in Burundi. Girl-only toilets and the provision of reusable sanitary towels contributed to increased levels of attendance in schools supported by the Burundi Red Cross. Students in Makamba and Cibitoke no longer worry about the availability of sanitary towels and when and where to change them. They now have access to latrines at school and are less likely to stay at home when they are on their period.



Diane used to walk to walk six kilometres a day to fetch water. Now the local spring has been tapped her journey is down to one kilometre. Photo: ©Burundi Red Cross





Firefighters try to extinguish flames after a large explosion rocked the harbor area of Beirut, Lebanon. Photo: © EPA-EFE/WAEL HAMZEH



# DISASTER RESPONSE

*Disaster response and preparedness are a key part of NorCross' international work. We provide expert staff and financial support to emergencies wherever they arise.*

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After the port explosion in Beirut, thousands of people were transported to hospitals by Lebanese Red Cross volunteers and ambulances. Photo: © Lebanese Red Cross.





# Lebanese Red Cross volunteers respond to the devastating Beirut Port explosion

*On 4 August, 2,700 tons of aluminium nitrate exploded in Warehouse 12 at the port of Beirut. The blast killed close to 200 people, injured 6,000 and left 300,000 in need of temporary accommodation.*



**First responders on the ground after the port explosion in Beirut.**

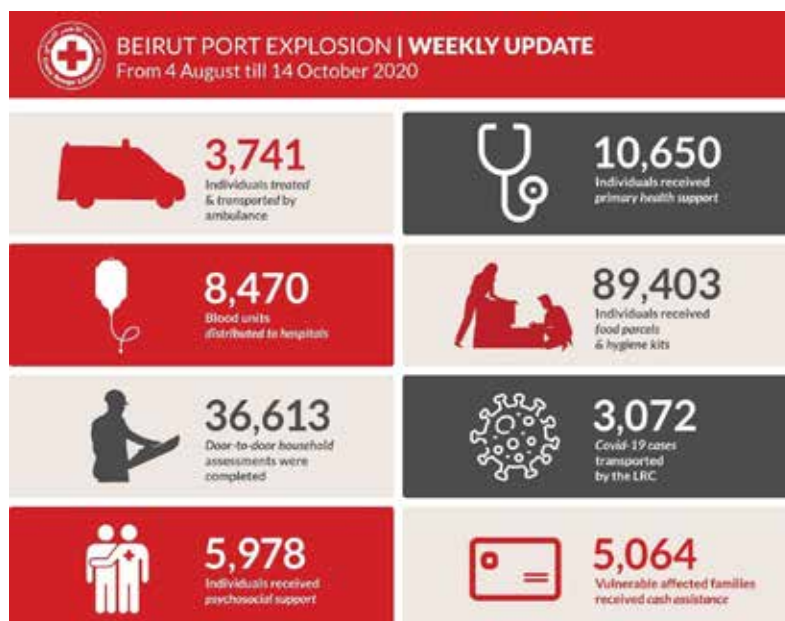
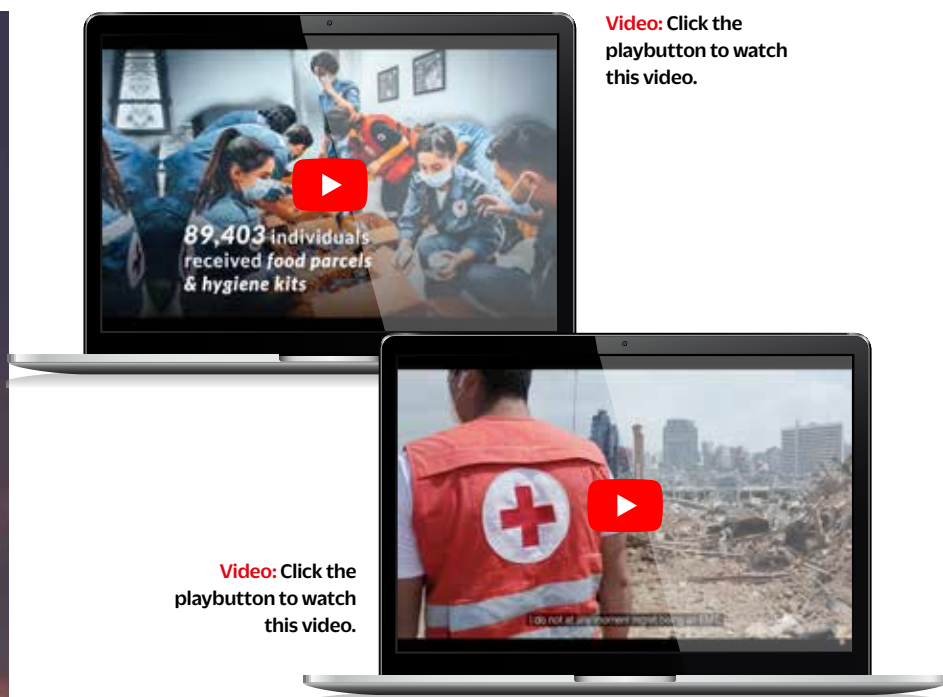
Photo: © Lebanese Red Cross.

The damage was so extensive that many Lebanese no longer recognised parts of their capital city. In the immediate aftermath, Lebanese Red Cross search and rescue staff were at the scene within minutes. A total of 125 ambulance crews supported the response. Medical teams treated and transport 2,000 survivors. They were also called upon to evacuate patients from damaged hospitals as up to half of all health

centres were affected by the blast. The scale of the wounded sparked a Red Cross appeal for blood donation. The response rate was high and transfusion centres collected and delivered over 1,200 life-saving blood units to hospitals across the city.

The explosion - Lebanon's worst peacetime disaster – was an additional burden to the city's 2.5 million people already dealing with





economic recession, political instability and the COVID-19 pandemic. The Lebanese pound devalued by over 200% and the cost of food doubled. Many people saw their life savings plummet overnight. Middle class Lebanese families struggled to cope, low income and marginalised refugee communities struggled to survive.

In response to the humanitarian needs on the ground, the Red Cross set up emergency shelters and distributed food and hygiene kits to 28,000 people. They provided psychosocial support to people traumatised by the carnage. And, from September, they provided monthly cash assistance of 300 USD to the most vulnerable families. The Norwegian Red Cross supported their activities with over 20 million Norwegian Kroner.

**Key response figures from the first three months.** Illustration: © Lebanese Red Cross.

# Clean water and sanitation for survivors of hurricane Iota

*Tropical storm Eta and category 5 hurricane Iota hit northern Honduras in November, over 100 people died and over 368,000 were left stranded because of floods.*

**T**he worst affected areas were in and around the banana plantations of the Sula valley. Thousands of houses were damaged as water levels rose to two meters - thousands of people were forced to evacuate their homes.

Less than a month after the storms made landfall, NorCross water and sanitation expert, Pablo Cabrera, was on the ground developing an emergency WASH response with the Honduran Red Cross and local government.

"It was situation critical when I arrived. Whole communities were cut off from basic service and waterborne illnesses were on the rise," said Cabrera.

"Villages along the Chamelecón and Ulúa rivers had been under water for weeks after riverbanks simply collapsed. Floods caused wide-scale damage to sanitation pipes and water infrastructure. Clean water provision was a priority. And we needed to start the clean up soon to avoid a dengue outbreak. Honduras saw the worst outbreak of dengue in 50 years in 2019 sparking a national emergency. We needed to act quickly to avoid a potentially catastrophic situation," he continued.

The Red Cross mounted a comprehensive WASH and health response – a difficult task in the time of COVID-19. Water purification plants, laboratories and fumigation equipment were brought in. Emergency health units were deployed to assist, and psychosocial support



Pablo Cabrera.

«...I never stop being surprised by the resilience of people living in such hard circumstances and the humanity they show in helping one another.»



was offered to people who had lost their homes, possessions and loved ones. Volunteers were trained and hygiene survival kits distributed.

Cabrera, who coordinated the WASH response, said "We really struggled in the emergency phase: many staff and volunteers had been in quarantine due to COVID-19, and access to most affected communities was impossible due to heavy rains..."

"But I never stop being surprised by the resilience of people living in such hard circumstances and the humanity they show in helping one another."





Flood survivors in Honduras.



**Video:** Click the playbutton to watch this video.

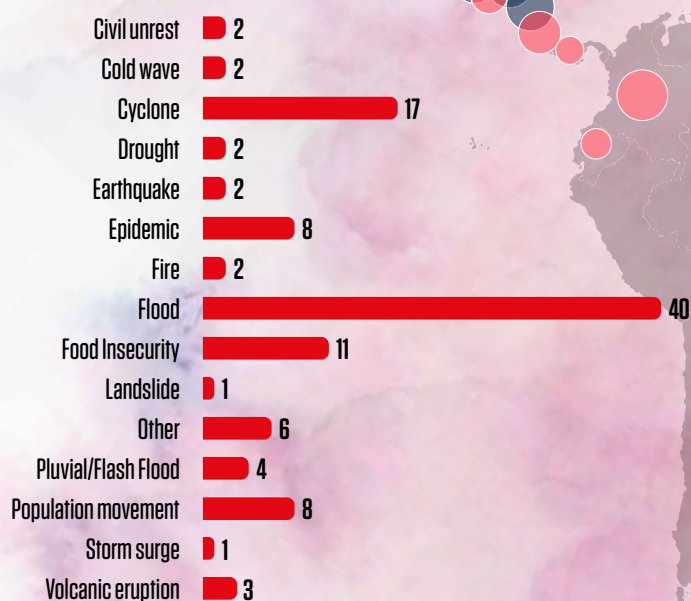


**Video:** Click the playbutton to watch this video.



 DREF grant(s)
  DREF loan(s) to EA

## Overview of Emergency Operations Supported by DREF in 2020



**109**  
Emergency operations supported by DREF in 2020

**75**  
Countries with DREF operations in 2020

**32,99M**  
DREF allocations (CHF) in 2020

**4,14M**  
People targeted through DREF operations in 2020



«Over the past decade alone, 83 per cent of all disasters were caused by extreme weather and climate-related events that killed 410,000 people and affected 1.7 billion. DREF...funds go directly to local Red Cross and Red Crescent responders who are already on the ground and supporting people affected by a disaster.»

Jagan Chapagain,  
IFRC Secretary General

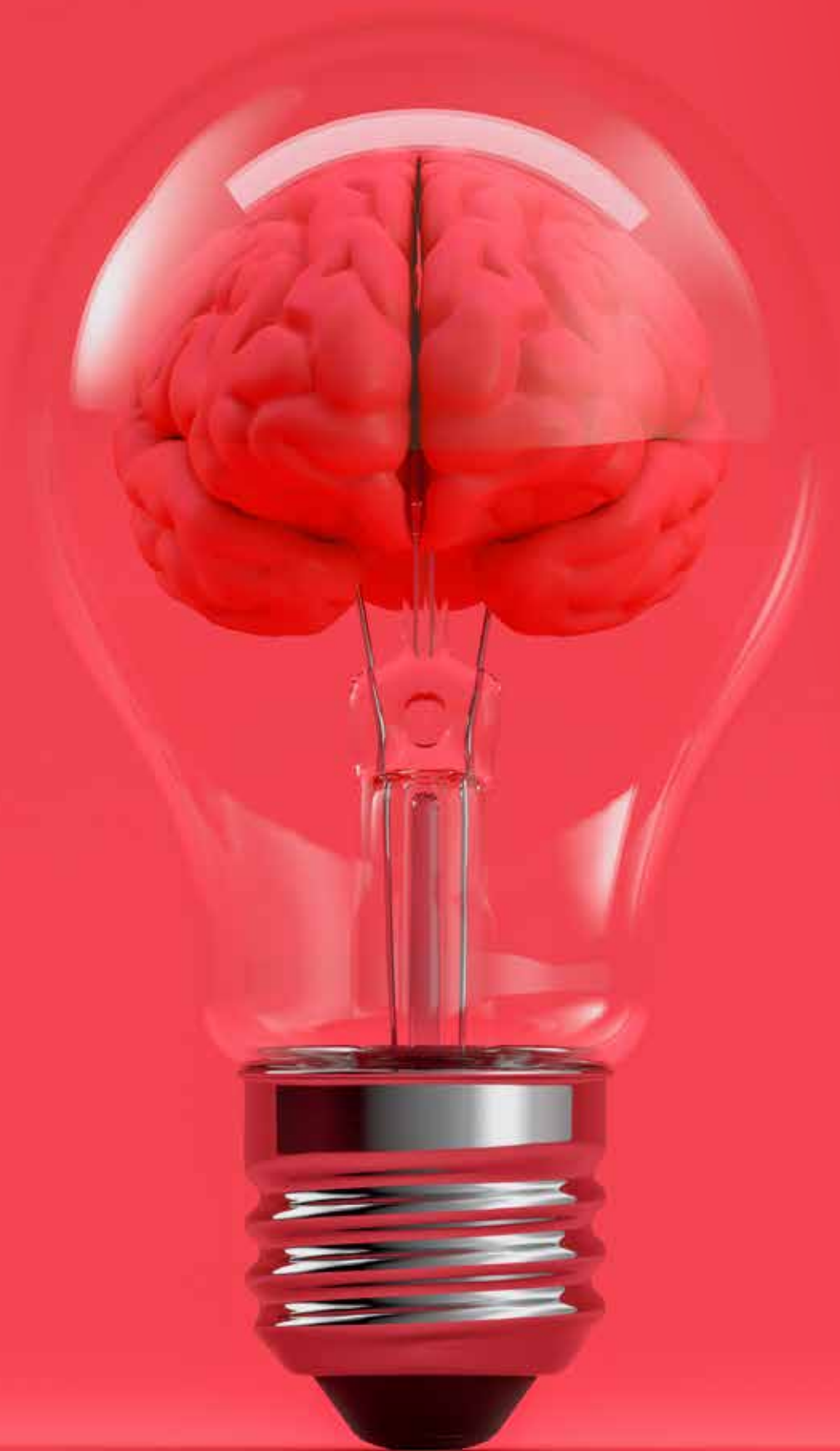
Learn more  
about DREF

[CLICK HERE!](#)

## What is Disaster Relief Emergency Fund (DREF)

**DREF** as a funding mechanism enables speedy emergency response. The Federation allocates money immediately and directly to National Societies to allow local volunteers to work more effectively. Increasingly, funds are also allocated based on a forecasted disaster, to facilitate early action.

In 2020, the NorCross contribution to the Federation's disaster fund was over 23 million NOK. The Norwegian government is the fourth largest donor after the European Commission, the Dutch and the Swiss. DREF launched 40 operations for floods, 17 for cyclones, eight for population movement and eight for epidemics.





# INNOVATION

*NorCross and the Red Cross  
Movement strive to find practical  
solutions to humanitarian challenges.*

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A seamstress sews a face mask in a South African factory. Photo: © iStock

# COVID-19 CHALLENGES & INNOVATION

*COVID-19 lockdown restrictions on movement and the need to respect social distance had a big impact on almost every area of our work.*

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The face-to-face interactions which are central to community health and training had to be revised. Furthermore, our capacity was reduced as many staff and volunteers contracted the virus or had to care for COVID-19 infected family members. How did we adapt? The Red Cross Red Crescent embraced digital technology to subvert COVID-19 restrictions.

According to research (Pew) an estimated 5 billion people globally have access to a mobile phone. Not everyone on the planet has a smartphone, but you can almost guarantee that in every town or village there is someone who has a mobile phone.

Mobile and online platforms were indispensable in reaching people with life-saving information and protection. From Colombia to Kabul volunteers communicated online. They shared relevant health information to help people make informed decisions.

# Practical solutions to humanitarian challenges

*NorCross believes that 21st century humanitarian challenges must be solved with relevant, evidence-based approaches.*

In 2020, that challenge was COVID-19. As lockdown restrictions rippled across the globe, volunteers and staff were unable to visit communities and share important information in-person. The availability of masks and anti-bac plummeted, and many people's mental health suffered due to isolation and uncertainty.

The RCRC Movement identified these challenges early on and tried to engage with them creatively. When masks were unavailable, National Societies across the globe manufactured masks and face shields locally. Malaysian Red Crescent volunteers sewed an astounding 30,000 cloth masks in just six days, which were then handed out to the homeless, migrant workers and refugees. In many countries anti-bacterial solutions were not freely available. So National Societies embarked on sanitisation campaigns. Armed with large containers of anti-bacterial solution they disinfected schools, clinics, markets and transport hubs. Some National Societies engaged with non-traditional partners, like French perfume manufacturers, to manufacture additional anti-bac.



**Youth participants sew masks as part of the life skills program in Daraa, Syria.**

Photo: ©Syrian Arab Red Crescent

National Societies shared COVID-19 prevention advice with refugees and isolated internally displaced communities via mobile phone, theatre performances, and with drones. As a global movement present in over 190 countries, our strength was each other. Volunteer membership grew all over the world. Red Cross Red Crescent staff came together via digital platforms to discuss practical solutions to challenges around mental health, medical treatment and other priority areas.





NorCross strived to be a door-opener to innovation during this challenging year. NorCross supported several large virtual events, including a series of think-tanks on COVID-19 innovation which engaged 3000 volunteers and staff, and a huge virtual climate summit called Climate: Red. The summit engaged over 10,000 people from 195 countries. To help the continuation of essential training, NorCross supported two remote learning projects. One project, in collaboration with ICRC, developed an

«As a global movement present in over 190 countries our strength was each other.»

immersive virtual reality training on kidnapping and armed violence for staff before they travel to high-risk areas. The other project, in Somalia, is testing ways to train health workers remotely so that they can learn life-saving skills at their health centres and not have to travel.

NorCross has also been using innovation during COVID-19 to support the disaster response mechanisms of the Red Cross Red Crescent Movement. IFRC GO, a platform which makes

**Disinfection activities in Yangon to prevent the spread of COVID-19.** Photo: © Myanmar Red Cross Society

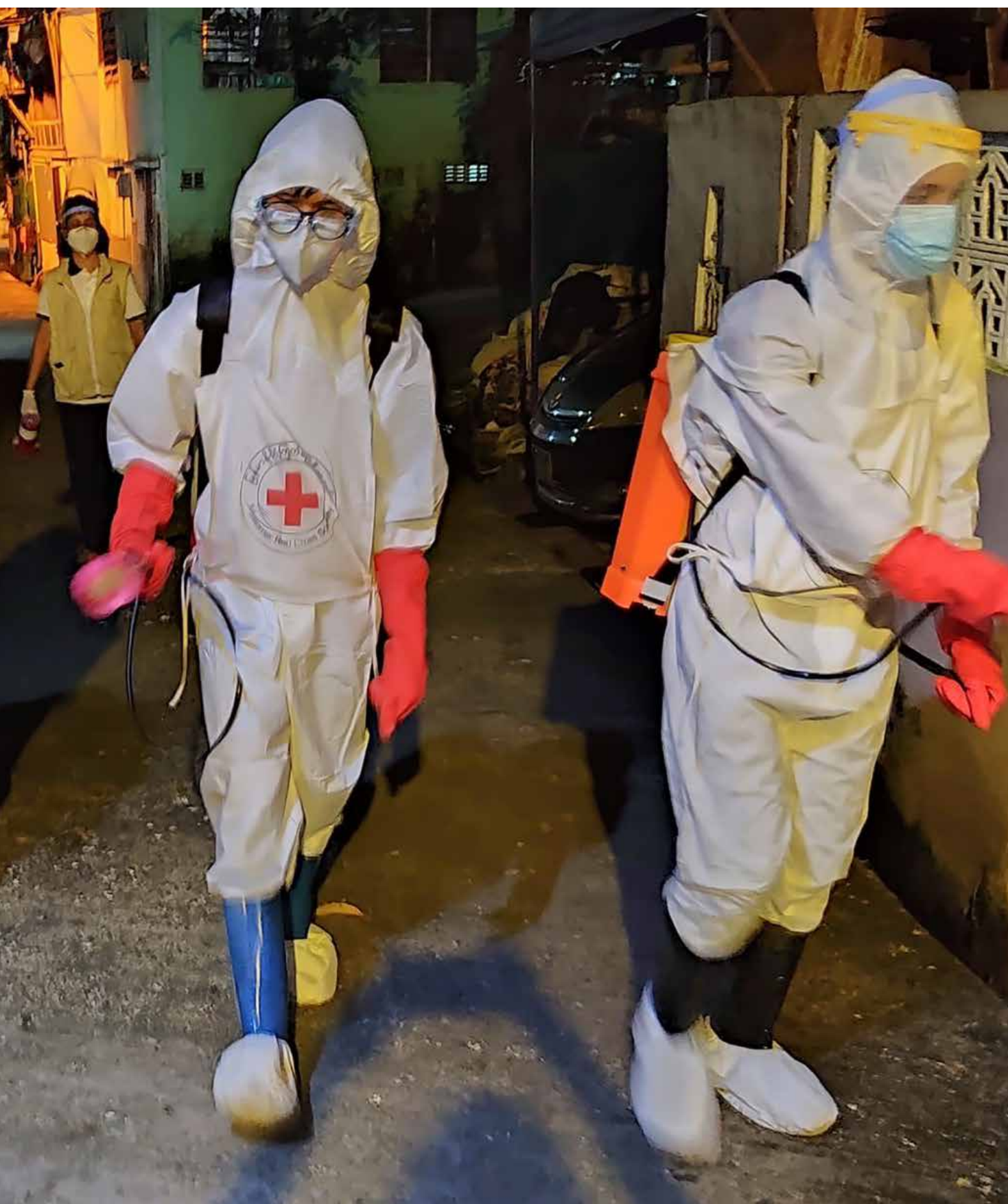
disaster information accessible and useful to IFRC responders, was flooded with reports during the early months of the COVID-19 pandemic. NorCross connected IFRC GO to a Norwegian company called Amesto Nextbridge. Their data scientists developed a tool to automatically read the reports and extract the most important information.

The Red Cross together with Grassroots Economics piloted the use of a community inclusion currency: a complementary currency exchanged locally which helps to keep strengthen the local economy. Transactions are made via mobile phones with the use of secure blockchain technology. Starting from a few hundred users in 2020 the program has expanded to over 270,000 users with a total of approximately \$190,000 USD (May 2021), far exceeding its Innovation Norway target.

Learn more about COVID-19 innovations on page 58. And visit [SolferinoAcademy.com](https://SolferinoAcademy.com) to discover hundreds of COVID-19 response stories from across the Red Cross Red Crescent Movement. The Solferino Academy is part of the Federation network and consists of a team of innovation experts. They work closely with colleagues, academics, the private sector and entrepreneurs to problem solve humanitarian challenges.





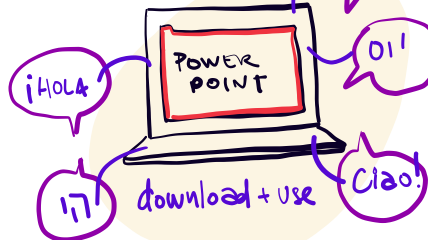




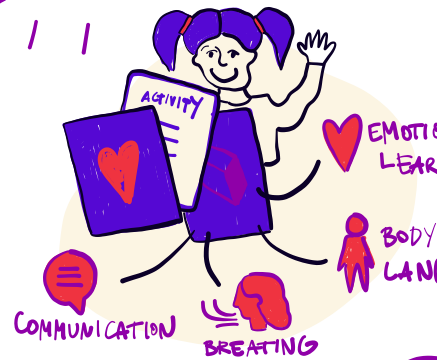
PODCASTS ARE GREAT, BECAUSE YOU CAN DO YOUR LAUNDRY OR DISHES WHILE LISTENING TO IT.



PSYCHOLOGICAL FIRST AID



MORE TRANSLATIONS THAN HARRY POTTER



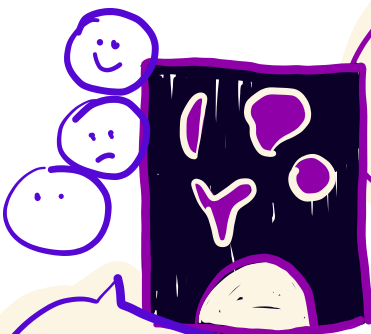
COVID THEMED - EDUCATIONAL



HELPS WHEN YOU ARE IN STRESSED MODE.



CONSULT

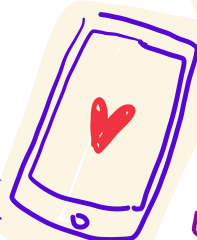


EVERYTHING SHOULD BE FOR FREE

Eva Suzanne Akasha

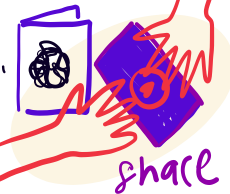


HOW ARE YOU FEELING?



hotline

ANYONE IN NEED CAN CALL AND GET SOME HELP.



HEALTHY MIND HEALTHY ME

AKAISHA BENJAMIN



NOT EVERY DO ACTIVITY THIS FOCUS

COVID-19 Health Help Desk





# Mental health INNOVATIONS

The Red Cross Red Crescent Movement teamed up to brainstorm issues and potential solutions related to COVID-19's impact on mental health.



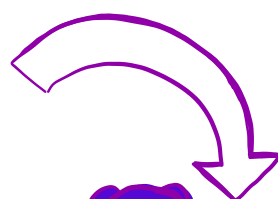
WE CANNOT BE WITH YOU PHYSICALLY, SO INSTEAD YOU HAVE THE BEAR TO BE THERE WITH YOU.



ONE WANTS TO STAY HOME ALL THE TIME. FEELS ON MIND.



VOLUNTEER BEAR LINE



GIVES YOU HUGS ON BEHALF OF RED CROSS

solferino academy



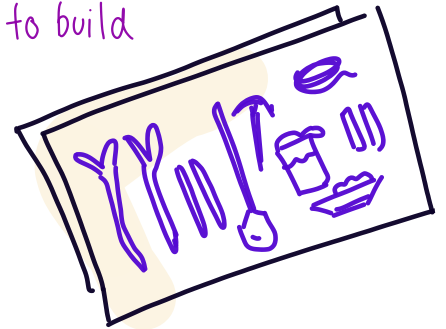
## #1000WAYSTOWASHHANDS

First video to raise awareness among youth



## TIPPY TAP CHALLENGE

Local materials & easy to build



Priyanka, Kenya Martin, Switzerland

# WASH ROOM

The Red Cross Red Crescent Movement looked at ways to improve hygiene promotion and access to water during the pandemic.



## PLASMA WATER & SANITATION SYSTEM

Purify water & easy to distribute

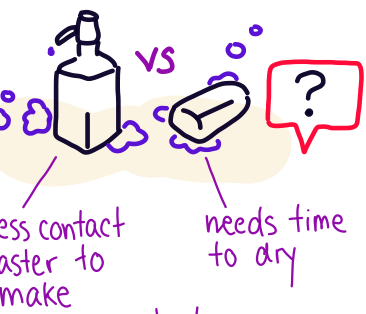


✓ EASY LAN

## LEARNINGS:

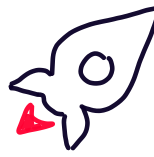
- impact study
- awareness creation
- develop youth stories
- build resilience





Wash your hands, ok?

launched in 10 DAYS



solferino academy

## LEARNINGS:

- act quick to make decisions
- humour and subtitles can be difficult
- good voluntary basis



Swiss Red Cross

## STOP THE VIRUS

Campaign with Swiss Comedian



## TRACING APP

work in progress

25% FOREIGNERS

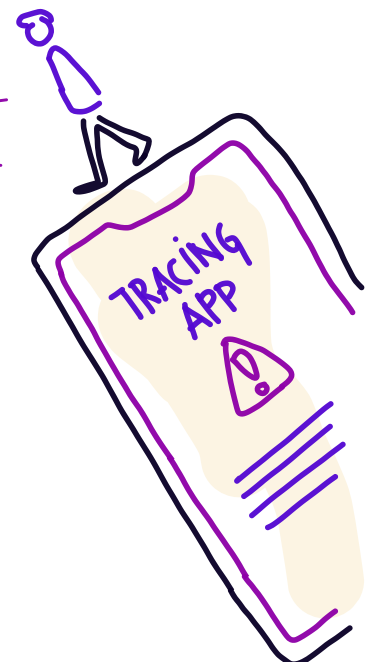
7,2% POVERTY

300.000 don't speak English or the national language

YOUNG PEOPLE ARE NOT FOLLOWING THE RULES

LANGUAGE

TARGET MIGRANT MEDIA



TRANSLATED to 16 languages

500.000 views  
SWISS TV

752.525 impressions  
social media



COVID-19  
Health  
Help Desk



The ICRC restoration of family links program in Juba, South Sudan, helped to reunite Federiko with his son, Victor, after more than a year apart Photo: © Mari Aftret Mortvedt/ICRC





# ADVOCACY

*Humanitarian diplomacy is central to NorCross' international portfolio. We advocate for protection and adherence to international law on issues such as: access to education, access to health, the protection of health staff, the use of illegal weapons, family reunification and SGBV. We push for greater engagement and policy change both within the RCRC Movement and the Norwegian Government.*

---

# Health Care in Danger

*Access to health care is under threat due to the increasing number of attacks on medical staff, patients and facilities. The failure to support health care systems has a direct impact on a nation's health.*

Figures from across the globe show continued aggression and violence towards health professionals and those they treat. According to the ICRC, there have been 3,780 reported attacks since 2016, the year the UN resolution to end violence against health workers was passed. The true figure is likely much higher as many attacks go unreported.

NorCross wants to put an end to the toxic environment many health workers and patients are exposed to. And to stop the exodus of nurses and doctors leaving the profession. We are guided by one of the founding principles of the RCRC Movement: to protect life and health and to ensure respect for the human being. We believe that access to health is a basic human right.

The Health Care in Danger Initiative (HCID) was developed by the ICRC in 2011 in response to increasing levels of violent abuse and the murder of health sector staff and patients in conflict. NorCross supports HCID in Afghanistan, Colombia, Honduras and El Salvador. We work closely with health care professionals and governments to document attacks; we urge government Ministries to address the underlying issues; we reach out to communities and armed groups to ensure greater respect for health workers, and we also provide medical staff with psychosocial support and practical advice on how to deal with violence in the workplace.

In Afghanistan, the ICRC, documented over 80 attacks on healthcare staff with over 1 in 3 cases related to abduction, injury or death. Armed groups have and will kidnap medics to ensure their war wounded receive treatment. Similarly, attacks on ambulances and theft of vital medicines and equipment are commonplace. In 2020, two Afghan Red Crescent ambulances were stolen. One of the

3,780

According to the ICRC, there have been 3,780 reported attacks since 2016, the year the UN resolution to end violence against health workers was passed

80

In Afghanistan, the ICRC, documented over 80 attacks on healthcare staff with over 1 in 3 cases related to abduction, injury or death

325

In Colombia, there were 325 attacks on medical staff across the country in 2020.

vehicles was used to transport explosives, whilst in a separate incident an ambulance was shot at with a patient onboard. In conflict zones around the world, clinics are often caught in the crossfire of heavy fighting and are forced to close. NorCross provided two experts to help improve the situation of safety and access to health in Afghanistan. The experts worked with colleagues from the Afghan Red Crescent to develop practical protection guidelines.

In Colombia, there were 325 attacks on medical staff across the country in 2020 - the highest rates of violence witnessed in more than two decades. Almost a third of the attacks were linked to the COVID-19 pandemic – fuelled partly by misinformation and fear of infection. Not only were health staff under pressure from a gruelling workload, but they also feared for their own safety.

In response to the increase in attacks, the Colombian Red Cross - with support from the Norwegian Red Cross and ICRC – created a nationwide campaign called, «El mundo está al revés (the world is upside down)» to promote protection of health staff. [Click here to see more.](#)

COVID-19 certainly contributed to an increase in assaults. However, the complex unresolved conflict in Colombia between FARC splinter groups and the State directly affects health personnel. An ambulance driver described the pervading fear paramedics face: «Yes, I'm afraid of something happening to me. Sometimes when I'm coming with a patient in the ambulance you come across an armed group. They stop you; they search you; they question you and you feel violated. Also, many times you get threatened, even by civilians.»

In situations of conflict and disaster, aggression can permeate everyday life as individuals feel out of control and under threat.





ICRC staff liaise  
with FARC  
combatants in  
Colombia.  
Photo: ©ICRC

# Protection from weapons

*2020 was the 40th anniversary of the adoption of the Convention on Certain Conventional Weapons (CCW) – a landmark treaty which provided a legal framework for the control of weapons.*

**D**espite successes such as the clearance of over 160 million landmines, there are still an estimated 55 million stockpiled anti-personnel mines (Landmine monitor). Cluster munitions continue to be used in conflict hotspots such as Libya, South Sudan, Syria, Ukraine and Yemen; and arms sales profits run into the hundreds of billions of dollars. These figures represent a world of weaponry that has the potential to kill indiscriminately causing severe injury to large numbers of people. In the case of uncleared landmines and other remnants of war, it is predominantly children who are left dead or without limbs.


NorCross continues to advocate at home and abroad against the use of weapons that are illegal. The Red Cross mandate to prevent and alleviate suffering demands that we prioritise the issue of illegal weapons proliferation and that we push for greater adherence to international humanitarian law with regard to the way legal weapons are used. In collaboration with ICRC, NorCross has demanded action, transparency and debate around issues such as: killer robots (or autonomous weapons), mine clearance, arms sales and nuclear disarmament. We work closely with sister National Societies to support advocacy efforts towards their own governments. We support their demands for concrete commitments in line with existing treaties, because without awareness and education on weapon use and the legal classification of arms used, civilians will continue to be maimed and killed. NorCross has campaigned forcefully for the Convention on Cluster Munitions. Letters were



**Child landmine victim.**  
Photo: © iStock

sent to all relevant National Societies to work towards ratification or accession to the treaty, especially those countries where the state is a signatory but has not yet ratified. The South Sudan Red Cross, which has seen first-hand the devastating effects of cluster munitions, has raised the issue with its government – an important step for a change in government policy.





«The Red Cross mandate to prevent and alleviate suffering demands that we prioritise the issue of illegal weapons proliferation»

NorCross and the ICRC have highlighted the threat posed by recent developments in modern weaponry. Robotic weapons that think independently are no longer confined to the realm of science fiction. Drones, unmanned submarines and other vehicles are being employed and developed as part of modern warfare. And, according to US think-tank the

«There are still an estimated 55 million stockpiled anti-personnel mines»

Arms Control Association, the race to dominate modern military tech could have disastrous effects. Their senior researcher, Michael T Clare, said: "A race in autonomy poses a particular danger because the consequences of investing machines with increased intelligence and decision-making authority are largely unknown and could prove catastrophic."

## «Decades of advocacy from the Red Cross and others finally paid off when the Government of Honduras ratified the Treaty on the Prohibition of nuclear weapons.»

The RCRC Movement has voiced concerns about relinquishing human control to artificial intelligence. ICRC stated, "There is a sense of deep discomfort with the idea of any weapon system that places the use of force beyond human control...we must consider the fundamental legal and ethical issues raised by autonomous weapons,"

In a bid to better understand the extent of the new technology, the ICRC has called on governments to: "share their legal reviews of existing weapon systems with autonomy in their critical functions." As part of the ICRC/ NorCross joint plan of action, 10 sister National Societies successfully lobbied their governments to support a ban on or severe limits on autonomous weapons. Find out more about the Movement's work to safeguard against autonomous weapons.

And the campaign against war in cities continues to push for States to commit to a policy on avoiding the use of explosives with wide area effect in populated areas given the catastrophic humanitarian effects that these weapons have when used in an urban context, damaging infrastructure critical to the survival and health of the civilian population. NorCross supports the development of a Movement action plan on War in Cities and it has lobbied the Norwegian government in supporting a call for an avoidance policy. In 2020 we facilitated action by 13 National Societies, reaching out to their respective governments to discuss the political declaration on Explosive Weapons in Populated Areas (EWIPA). NorCross also organised a roundtable discussion together with the Peace Research Institute in Oslo (PRIO) to raise

the issue with key stakeholders in Norway. Humanitarian organisations, academics, members of the armed forces and civil servants from the Ministry of Foreign Affairs and the Ministry of Defence discussed the implications of using explosives with wide area effect in cities. The meeting was a catalyst for increased domestic dialogue and coordination on Norway's position to the political declaration, which if accepted, would be an important supplement to existing legal obligations under international humanitarian law. Getting the States to commit to a venture point where there is a presumption for

non-use of such weapons unless necessary mitigating measures can be taken, is a step towards changing the way wars are fought in cities and save thousands of civilians in the process.

This may seem unthinkable to many; however, seemingly unimaginable campaigns can change the world as we know it. On

22 January 2021, the treaty prohibiting nuclear weapons came into effect. Decades of advocacy from the Red Cross and others finally paid off when the Government of Honduras ratified the Treaty on the Prohibition of Nuclear Weapons. Head of the ICRC Peter Maurer said, "It shows that we can – if we act in concert, with foresight and clarity of purpose – overcome even our biggest and most entrenched challenges."

NorCross is one of the key actors on nuclear disarmament in the RCRC movement. We will continue to advocate against the use of nuclear weapons and other weapons that are banned under humanitarian law or specific treaties – our commitment to protect life and health demands it.

**Find out more  
about the Treaty on the  
Prohibition of Nuclear  
Weapons here**

**CLICK HERE!**





Photo: © iStock

# Sexual and Gender-based Violence

*An estimated 1 in 3 women worldwide (UN) will experience sexual or domestic violence in their lives. Sexual violence disproportionately affects women and girls but there are large numbers of male rape survivors.*

Despite the unacceptable high incidents of Sexual and Gender-based Violence (SGBV), it continues to be a challenging theme to work on. The Red Cross Red Crescent Movement is made up of 192 National Societies each with their own culture and social norms. Unsurprisingly, the themes of sex, gender and violence continue to be taboo subjects that makes it difficult to tackle in many contexts. In spite of the limitations, NorCross is committed to continue its work in providing holistic and survivor centred SGBV services in collaboration with National Societies and ICRC. Together we advocate for States to tackle the issue through adequate legal frameworks and to end the impunity through successful prosecutions of SGBV crimes.

In Myanmar, we work with the United Nations Population Fund to provide SGBV training to mobile clinic staff in Rakhine who treat internally displaced communities such as the Rohingya and Karen ethnic groups. Given the high levels of alleged military rape in Shan, Kachin and Rakhine states, the need for specialist rape trauma staff is a valuable addition to the Myanmar Red Cross

The Myanmar Red Cross provides specialist care for violence survivors, often where little other support exists. Even if survivors were to report their ordeal to the police, which is unlikely, there are currently no trained specialist staff in the Myanmar Police Department specifically for victims of sexual crimes (UK Foreign Office). NorCross and the Myanmar Red Cross offers survivors health services based on needs in an impartial, neutral

«...More than once I thought about taking poison and finishing it all, but when I thought of my children I armed myself with the courage not to do so.»

Diana

and independent manner.

In partnership with the Somali Red Crescent, we have started to develop a SGBV health response. In 2020, 16 members of staff were trained in post-rape medical examination. It is hoped that through their work with local partners and volunteers, the Somali Red Crescent will treat survivors of sexual violence. Similarly, in South Sudan, NorCross supports a joint SGBV response as part of the community health project in Bentiu.

Our longest standing SGBV projects are in Central America and Colombia. Central America has some of the highest rates of femicide in the world. According to the Economic Commission for Latin America and the Caribbean (ECLAC), El Salvador has a rate of 6.8 murders per 100,000 women. ECLAC believe that the situation has been "aggravated" during 2020 due to the COVID-19 pandemic since isolation "limited access to support networks and care services" aimed at preventing violence. Despite lockdown measures, the El Salvador Red Cross continued to run support services for women in danger, first online and later in person when COVID-19 restrictions were lifted. Diana, a mother of four, was at breaking point when she fled her abusive husband.

«I felt very anguished because I fell asleep thinking about what I was going to feed my children the next day and I had no money for that, and apart from that nobody gave me work. More than once I thought about taking poison and finishing it all, but when I thought of my children I armed myself with the courage not to do so», confessed Diana during a Red Cross support group.





The group provided Diana's family with emergency financial support for food and basic items. She also took part in group therapy sessions where she was able to work through years of pain and emotional trauma caused by violent abuse. Fellow group members bolstered Diana's confidence. They reminded her that she was not alone, that she was brave, and that help was available. Diana has since found a job and is now able to support her family. Furthermore, she intends to take her husband to court with legal support from a local government organisation. Diana came to the El Salvador Red Cross at her lowest ebb. Life is still hard but with the help of the Red Cross she has created a new life for herself and for her children. Seventy women were murdered in El Salvador in 2020. Diana could have been the seventy-first.

Rates of sexual violence against women are higher than that of men but there are of course cases of male and transgender rape. An Overseas Development Institute report stated that in Uganda: "more than one in three Congolese male refugees had experienced sexual violence in their lifetime" Men's experiences have been largely absent from the wider picture of sexual and gender violence because of attitudes around sexuality. However, NorCross is calling for a better understanding of rape and domestic violence across the gender divide. Which is why in 2020 we supported research which gives a more complete picture of SGBV irrespective of the social norms and stigma that surround the issue.





More than 150 youth volunteers gathered in ARCS HQ in Kabul to mark the International Year for Volunteers by making the Red Cross and Red Crescent logos. Photo: © Ali Hakimi/IFRC

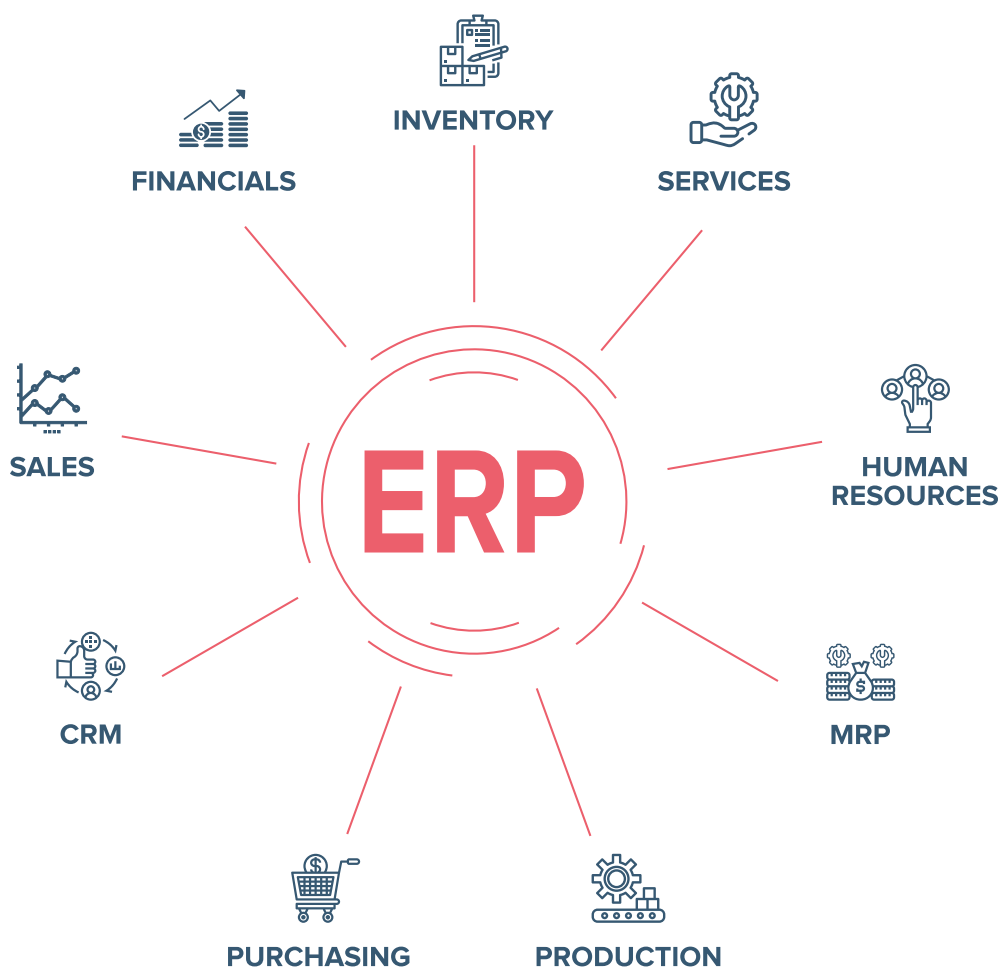


An aerial photograph of a large group of people, likely volunteers or staff, standing on a grassy field. They are arranged in a large heart shape, with their arms raised in the air. The entire image is overlaid with a solid red color. In the background, there is a fence and some trees.

# ORGANISATIONAL SUPPORT TO NATIONAL SOCIETIES

*NorCross prioritises financial development and local fundraising initiatives.*

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# Financial development

*Universality is one of the Movement's seven founding principles. What this means in practice is National Societies supporting each other. Each National Society be it Norway, Namibia or Nepal share equal responsibilities and duties to support a strong International Federation of Red Cross Red Crescent organisations.*

**N**orCross has supported National Society financial development (FD) for over a decade. The FD project aims to assess finance capabilities and to then strengthen organisational capacity, structures and systems to improve accountability and transparency. NorCross wants to help create sustainable National Societies better equipped to support humanitarian volunteer action.

«In 2020, NorCross finance delegates worked in 13 countries.»

We place finance experts in specific countries and we support local resource mobilisation. In 2020, NorCross finance delegates worked in 13 countries. They worked alongside sister National Society colleagues and provided technical expertise and invaluable training.

NorCross' Africa regional finance delegate, Elmelda Obwocha, explains the challenges: "The FD assessment in South Sudan highlighted



a number of issues: unstructured departments, a lack of financial information systems, gaps in staff training and delays with branch financial information.

But you need to understand the contexts we work in. Our volunteers and local branches are often in hard-to-reach places, prone to conflict with little or no infrastructure. For example, the Wau local branch is 550km away from Juba, so just getting receipts and other financial information is extremely difficult. Last year, we agreed to transport all finance documents via ICRC planes to minimise delays. Finally, we can close accounts on time.”

Elmelda worked closely with South Sudanese Red Cross (SSRC) colleagues to improve efficiency and sustainability. A core cost budget structure – where an estimation of basic costs needed to run the SSRC are fairly distributed across projects - was created by a task force who successfully liaised with all partner National Societies working in the country. NorCross also supported the introduction of a fixed asset policy. As a result, the SSRC now have an overview of what they own, therefore limiting the chance of theft and misuse. Staff training on Excel and budget analysis has led to improvements in procurement and financial planning. And finance workshops for volunteers in isolated branches across the country has bridged an important skills gap. “We want to build National Societies that are less dependent on specific donor funds,” said Elmelda Obwocha. “There is still some way to go, but staff and donor feedback indicates that the South Sudanese Red Cross now has processes in place.”

Similar improvements were achieved across the global FD portfolio. Restructured finance departments with specific roles and tasks have improved efficiency and reduced staff turnover in Myanmar. And for the first time in its history, Pakistan Red Crescent has digital accounting software for both its local branches and the national headquarters. A detailed due diligence assignment identified areas for improvement, namely governance, internal procedures and human resources. It is hoped that subsequent changes will strengthen the relationship between the head office and local branches across the country, thus increasing



**Elmelda Mokaya Obwocha, NorCross' Africa regional finance delegate.**

«Our volunteers and local branches are often in hard-to-reach places, prone to conflict with little or no infrastructure.»

the effectiveness of volunteer action. In Somalia, revised FD guidelines have ensured compliance with international standards, and the introduction of SAGE accounting software has simplified financial management.

An important part of the finance development workstream is the inclusion of Enterprise Resource Planning software or ERP. Software such as SAGE and Navision enable organisations to store and analyse data. The digital application relates to accounting, procurement, human resources, reporting and logistics. For individual National Societies and their partners ERP systems have the potential to simplify tasks and increase transparency e.g., in the context of the Syrian Arab Red Crescent where many different RCRC National Societies are present, ERP systems enable both NorCross and the Canadian Red Cross to access important information such as available medicines, current projects or procurement guidelines. Previously paper-based administrative tasks can be recorded and stored digitally, reports generated, and evidence-based analysis used for project planning.

The NorCross/ICRC partnership on financial development supports National Societies in some of the hardest places. In 2020, delegates successfully supported National Societies in: Burkina Faso, Ivory Coast, DRC, Liberia, Libya and Nigeria.

Finance development support to the Libyan Red Crescent has been invaluable. The country is in a state of political turmoil after years of dictatorship and the Libyan Red Crescent has been overstretched. According to the World Bank, the economy saw a GDP drop of over 31% in 2020. Sanctions continue, and a lack of banking facilities make basic transactions very difficult. The Libyan Red Crescent somehow manages to operate in a country that has endured prolonged financial collapse. The role of the NorCross finance delegate was to implement accounting procedures to enable the office to function more effectively. The co-creation of the finance manual with Libyan colleagues was pivotal to sustainability. This type of organisational support not only impacts the National Society and its volunteers, but it also benefits the many partner National Societies who fund humanitarian projects.

# Local fundraising

*NorCross supported individual giving programmes and local fundraising initiatives generated much needed income in 2020.*

**T**he Lebanese Red Cross' individual giving programme was incredibly successful in 2020. Despite the country's economic collapse over 2,300 regular givers were recruited. In total, over 33 million dollars was raised locally. The success was a culmination of historical support to the finance system and fundraising activities developed over a two-year period. A dedicated website, app, face-to-face fundraisers and 'celebrity influencer' PR campaign #SupportLRC helped mobilise millions of dollars for emergency responses. When COVID-19 hit in March, followed by the devastating Beirut Port explosion six months later, the infrastructure was in place for people to support their local and national Red Cross.

Similarly, the strategic, resource mobilisation project with the Russian Red Cross raised over one million US dollars in 2020. Donations from corporate sponsors and individual givers paid for medical equipment such as ventilators, COVID-19 testing kits and personal protective equipment. These essential items were distributed to under-resourced hospitals in the provinces to bolster their pandemic response. The dedicated Fundraising Officer role (sponsored by NorCross) was pivotal to the project's success. Alongside colleagues in Moscow the officer oversaw the face-to-face fundraising campaign across the country. The team's agile approach allowed them to operate even under lockdown restrictions. When social distancing was enforced, face-to-face campaigns were replaced by telephone fundraising – over 340 regular givers were recruited during the period.







Russian Red Cross street fundraisers. Photo: © IFRC



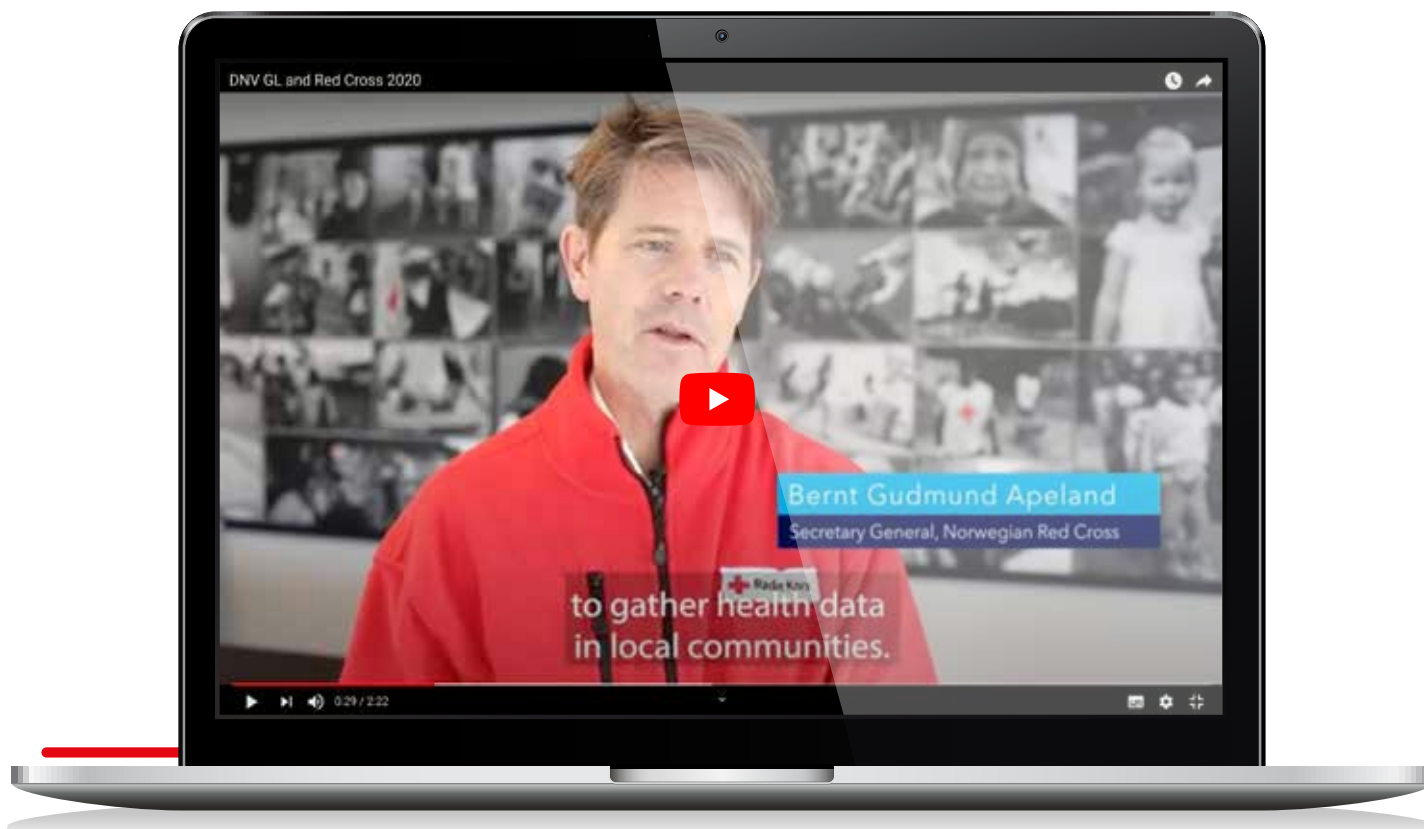


The background is a solid dark red color. Overlaid on this are several faint, light red graphics. In the upper left, there is a line chart with a fluctuating line. In the upper right, there is a bar chart with several vertical bars of varying heights. A large, faint world map is centered in the background. In the bottom left corner, there is a candlestick chart. In the bottom right corner, there is a bar chart with many thin, closely spaced vertical bars.

# Resources and Expenditure

*NorCross is funded by private individuals, corporate donors and government institutions. This section of the report shows who the major donors are and where the funds are spent.*

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**Video:** Click the playbutton to watch this video.

# Corporate sponsors

*Leading Norwegian corporate companies support NorCross' humanitarian work across the globe.*

One of Norway's foremost companies, risk experts Det Norske Veritas (DNV), have been a key NorCross corporate partner for over 16 years. Since 2019, they have supported NorCross and the IFRC with digital transformation. The creation and delivery of a digital strategy for 192 National Societies has been a huge endeavour. DNV's expertise in the field of data and how it can be applied in risk reduction and organisational development made them the perfect mentor and partner to support the digital transformation.

In 2020, DNV wrote a strategic overview and analysis entitled "Perspectives on Digital Transformation" This document serves as a roadmap for the digital future of the wider

## NORCROSS CORPORATE PARTNERS

**Apotek1:** Water for life

**DNV:** International preparedness

**Frognerseteren:** Water for life

**Gard:** International preparedness

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Movement. Its focus on leadership, research and training will influence the way in which the world's largest voluntary organisation will operate in the future.

Water for Life (Vann for Livet in Norwegian) is a NorCross corporate partner campaign that supports water and sanitation projects in Afghanistan, Bangladesh, Burundi and Syria. In 2020, Water for Life funds contribute to improved access to water for over 25,000 people, 4,000 people benefitted from improved sanitation and over 1.5 million received hygiene promotion. The corporate donations were used to improve plumbing in schools, homes, hospitals and health clinics, as well as the construction and repair of toilets, latrines and reservoirs.











EXPENDITURES BY DONOR  
INCLUDING ICRC

- MFA 69 %
- NORCROSS 22 %
- NORAD 7 %
- EU FUNDING 1 %
- OTHER 1 %

**Overall NorCross and ICRC**

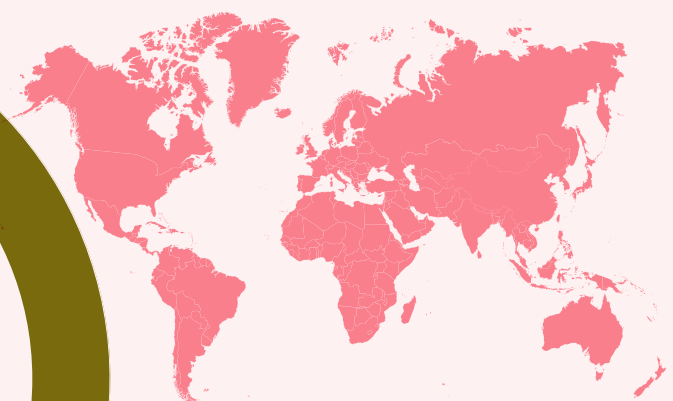
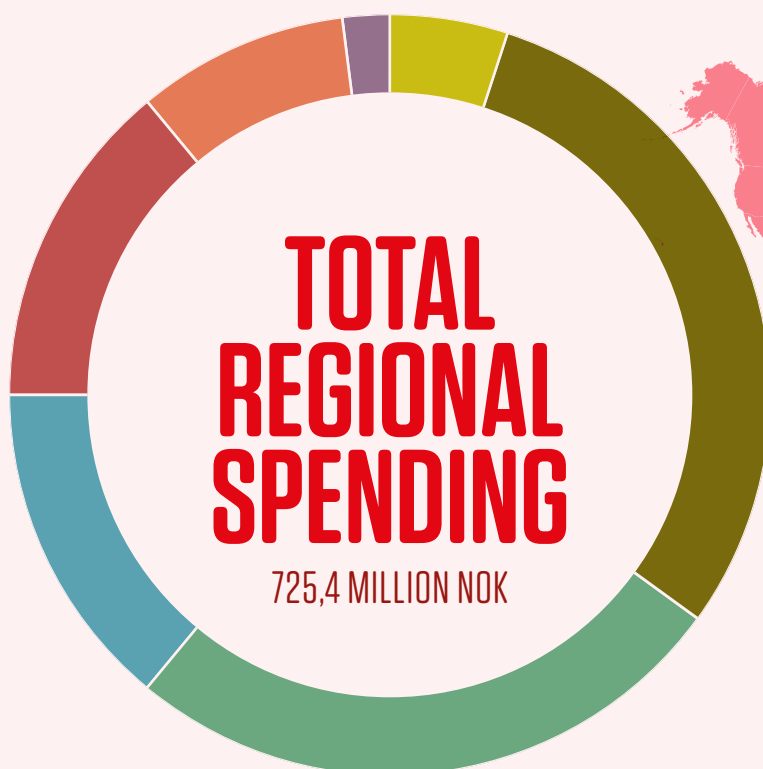
Total expenditure was 1 305 mill NOK, including 579.5 million through ICRC tripartite agreement financed by the Norwegian Ministry of Foreign Affairs (MFA). Overall, the MFA contribution was 69%, NorCross with 22% and Norwegian Department for International Development (NORAD) 7%.

EXPENDITURES BY DONOR  
EXCLUDING ICRC

- NORWEGIAN MINISTRY OF FOREIGN AFFAIRS 45 %
- NORCROSS 39 %
- NORAD 12 %
- EUROPEAN UNION 2 %
- OTHER 2 %

**NorCross excluding ICRC**

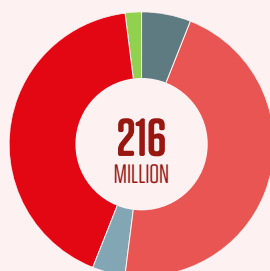
Activities implemented by NorCross, excluding the ICRC tripartite agreement, mainly focused on access to primary health services, WASH and Disaster response. The principal donors were the Norwegian Ministry of Foreign Affairs (45%), NorCross own funds (39%), followed by NORAD (12%), the European Union (2%) and other funding (2%).



#### REGIONAL SPENDING EXCLUDING ICRC

ADMIN ACTIVITY	4.9 %	35,502,086 NOK
MENA	29.8 %	215,801,350 NOK
GLOBAL ACTIVITY*	26.1 %	189,349,667 NOK
AFRICA	14.1 %	102,574,739 NOK
ASIA	13.9 %	100,674,848 NOK
AMERICAS	9.6 %	69,992,199 NOK
EUROPE	1.6 %	11,485,044 NOK

\*appeals/activities that cover several countries.

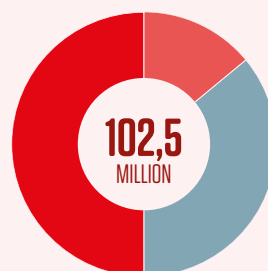


#### MENA REGIONAL SPENDING EXCLUDING ICRC TRIPARTITE

EU FUNDING	6 %
MFA	46 %
NORAD	4 %
NORCROSS	42 %
OTHER/PNS	2 %

### Middle East and North Africa

MENA was the largest region in terms of funds, 216 million NOK. This included allocations to bilateral projects and joint activities with ICRC and IFRC (Al Hol hospital in Syria, the Yemen COVID-19 centre, and support to IFRC for Beirut Explosion). Close to one third was spent on improved access to water, sanitation and hygiene, with the majority being implemented in Syria. One fifth of expenditure in MENA went to access to primary health services, followed by 17% to RCRC emergency health and WASH response, and 9% of total expenditure were spent on financial development.



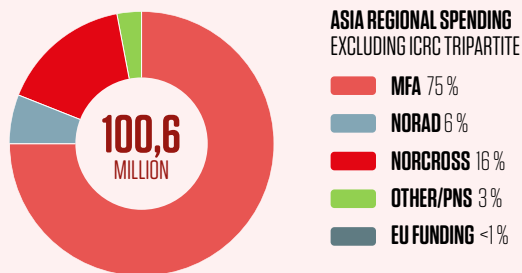
#### AFRICA REGIONAL SPENDING EXCLUDING ICRC TRIPARTITE

NORAD	36 %
NORCROSS	50 %
MFA	14 %

### Africa

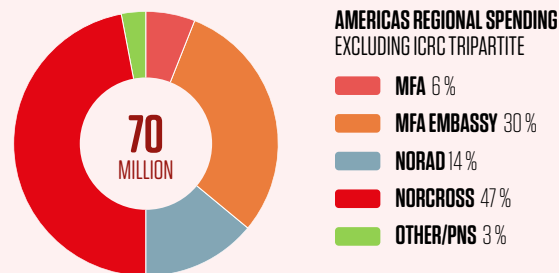
The total expenditure for Africa was NOK 102,5 mill, including bilateral projects, regional projects through ICRC and support to IFRC. Over a quarter was spent on improved access to secondary health services (27%), mainly in Somalia. Improved knowledge and practices related to health accounted for 23%, financial management 15%, and increased access to primary health services 13%. NorCross was the biggest donor with 50% of own funds, followed by Norad 36% and MFA 14%.





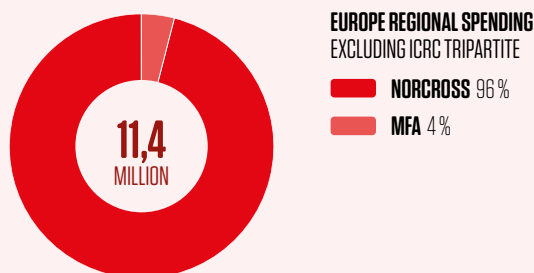
## Asia

The total expenditure for Asia was NOK 100,6 million. Close to half of the Asia budget was spent on increased access to primary health services in Afghanistan (approx. 49%), followed by health projects in Myanmar and Pakistan. The disaster response treatment centre in Bakwa, Afghanistan, received 17% of the total regional project budget. Remaining funds were allocated to improved access to water, sanitation and hygiene activities across the region. The MFA was the major donor in Asia (75%), followed by NorCross own funds (16%) and NORAD (6%).



## Americas

The total expenditure for the Americas was NOK 70 mill in 2020. This included bilateral projects and RCRC Movement activities. Approximately 28% of funds were spent on access to primary health, including mobile health units in isolated areas of Colombia and health services in El Salvador. Twenty-six percent of funds were allocated to reintegration projects such as health and education services to former FARC combatants in Colombia. Activities to strengthen humanitarian diplomacy and development, specifically access to education for marginalised groups accounted for 12% of all regional funding. NorCross was the major donor (approx. 47%), followed by Norwegian Embassy in Colombia contributions (30%) together with Norad funds (14%).



## Europe

The total expenditure for Europe in 2020 was 11,4 mill NOK. Almost half was allocated to emergency relief items such as food and basic items; 20% was allocated to primary health and 14% to disaster preparedness activities. NorCross was the main donor (96%) and the MFA contributed to the Nagorno Karabakh conflict response (4%).

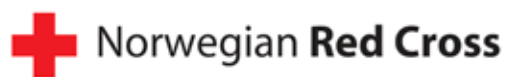
76%

**OVER 76%\* OF NORCROSS FUNDS ARE FROM THE NORWEGIAN GOVERNMENT**

\*56% excluding Tripartite



# COVID-19 VACCINE FOR EVERYONE



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