

"Of all the partnerships that IRCS has entered into outside the Red Cross and Red Crescent Movement, the one I cherish the most is with World Health Organization", says Dr. S.P. Agarwal, Secretary General, IRCS. He adds that the IRCS has inculcated a dynamic, fruitful and rewarding relationship with WHO office in Delhi.

The association of Red Cross with health care began with the founding of the organization in the year 1863. The organization was started primarily to serve the victims of war by providing them medical care, support in the form of food, medicine, shelter and tracing of those who were found missing during and after a war.

After the First World War, League of Nations was formed with the objective to settle all international disputes between two or more nations by peaceful means. It was felt for a while that in future countries will not wage war for territorial, economic, religious or political ambitions.

During this period, there was no international organization working in the filed of health care. A large number of deaths were taking place in all parts of the world due to epidemics, diseases and during childbirth. The sum total of deaths due to wars was negligible in contrast to deaths caused by natural disasters and non-availability of adequate health services.

To control large number of deaths due to natural disasters and unavailability of adequate health services, under the leadership of Mr. P. Davidson of the American Red Cross, League of Red Cross was formed in the year 1919. With the formation of the League, now known as the International Federation of Red Cross and Red Crescent Societies, the association and contribution of the Red Cross in health related matters got further impetus.

The scenario gradually started changing with the formation of the United Nations after the Second World War. Under the UN systems, World Health Organization (WHO) emerged as the corporate body to address health issues encountered by the developing and the under developed countries. This was the beginning of organized and concerted efforts to rid the weaker sections of the society from health problems.

WHO is the advisory and coordinating authority for health matters within the United Nations system. It is responsible for providing leadership on global health matters, shaping the health research agenda, setting norms and standards, articulating evidence-based policy options, providing technical support to countries and monitoring and assessing health trends. It is also a key development partner and central to delivering the Millennium Development Goals.



IRCS is a member of the Red Cross Red Crescent movement. It is one of the largest and leading humanitarian organizations in India. It is a huge family of 12 million volunteers and members and paid staff exceeding 3500. It reaches the community through its 700 branches spread all across the country. IRCS has a variety of welfare and other activities in the areas of health, disaster and promotion of

humanitarian values. It is also working towards achieving the Global Agenda of the International Federation of Red Cross & Red Crescent societies and Millennium Development goals of the United Nations.

WHO and the Red Cross movement have been collaborating on different levels to provide better health care to the affected and vulnerable people. In times of war ICRC and WHO share responsibilities for providing health care to the affected people that also includes providing of artificial limbs to the needy. In non-conflict areas the Federation and the WHO have been rubbing their shoulders together for eradication of diseases and viruses to rid the world of measles, plague, avian flu etc. The two great organizations realized that a formal understanding between the two should prove beneficial to the needy. After several rounds of talks, it was decided that formal MoUs need to be signed for better co-operation and co-ordination between the two organizations. This led to following developments later on.

WHO (SEARO) and the International Federation of Red Cross & Red Crescent Societies signed an Memorandum of Understanding (MOU) on 10th September 2003 to establish a framework for cooperation between the two to develop and implement joint initiatives. Mr. Murli S. Deora, Vice President of the International Federation of the Red Cross and Red Crescent Societies & Vice Chairman of the IRCS and Dr. Uton Muchtar Rafei, Regional Director of the World Health Organization, South-East Asia Region, signed the MoU at New Delhi.

The objectives of the MoU were to identify areas consistent with public health



agenda, to enhance and support cooperation and to serve as the framework for specific collaborative activities. It also mentioned that the two organizations shall cooperate and consult each other, not less than once a year, on matters of common interest based on prioritized issues and programmes, including joint projects and other activities at the regional, sub-regional and national levels in order to coordinate their work and to strengthen importance. They also committed to

work together for (i) preventing and controlling communicable diseases in the most affected countries of South East Asia Region (including HIV/AIDS) (ii) promoting voluntary non-remunerated blood donation in order to contribute to a safe blood supply, (iii) enhancing collaboration in preparing for and responding to emergencies and disaster situations (iv) exploring collaboration in other areas such as water and sanitation, pre-hospital care, mental health in emergency and post disaster situations. They would identify new areas of collaboration at the time of annual consultations.

(ii) Later a Joint Letter of Collaboration was signed between the International Federation and WHO on the 11th May 2005 by Mr. Markku Niskala, Secreraty General of the International Federation of Red Cross and Red Cresent Societies and Dr. JW Lee, Director General of WHO. The purpose of the agreement was to strengthen the relationship between National Societies and their Ministry of Health with the support of WHO. They agreed to work together towards achieving MDG. Both organizations

also share the important objective to reduce avoidable loss of life, burden of disease and disability in crises. The two organizations are already working together in a number of inter-agency setting towards these objetives, taking account ,especially of the International Federation Strategy 2010, WHO's objective 3' & 5' goals and the Three Year Performace Improvement Programme of the Department of Health Action in Crises. The cooperation will build upon existing collaboration in such areas as HIV/AIDS, Tuberculosis and Malaria, as well as first aid, road safety and other work

in disaster prevention, emergency and recovery situations.



(iii) A Memorandum of Understanding (MOU) signed between the WHO and IFRC for three years (2007-2009) during the Regional Partnership Meeting, which was held in New Delhi from March 27th to 29th, 2007. Dr. Poonam Khetrapal, Deputy Regional Director, WHO, Regional Office for South East Asia stated that the "WHO believes in

partnership at the global and regional level. By signing up this MOU both WHO and IFRC will work together in addressing the emergencies and helping the vulnerable communities".

In India WHO and the Indian Red Cross Society together have been working on similar projects under which infant mortality, tuberculosis, malaria etc. have been addressed during the last decades. During major natural disasters such as Latur earthquake 1993, Gujarat cyclone 1996, Orissa super cyclone 1999 & Gujarat earthquake 2001, WHO showed a lot of interest in reaching out to the affected community through the Red Cross systems.

Very recently during the outbreak of Avian Flu in Nandurbar district in the western State of Maharashtra IRCS formed an avian flu taskforce, which was also joined by WHO. It also provided the literature developed on the subject containing important historical statistics and analysis of avian flu. This helped IRCS design an information brochure that was printed in several Indian languages and won international acclaim for its content and narration.

During 2007 floods the tribal areas of Orissa were affected by cholera. IRCS National Headquarters sent a small film developed by the World Health Organization on hygiene issues to the Orissa State branch for dissemination at the community level. The film proved useful to the communities.

This year too WHO office in Delhi donated Rs. 10 lakhs to support the flood relief in Bihar. The donation was used to cover contingencies for immediate health delivery.



WHO has provided teaching material and facilities for the smooth running of the Diploma Course in Disaster Preparedness and Rehabilitation of the IRCS. Teaching material includes Health Sector resource for disaster management and climate change. WHO has also provided a plasma TV, photocopier and three computers. It also sponsored two participants for the first batch and three each for the second and third batch of the course. Dr. Salim J. Habayab, WHO Representative

to India and his colleagues.

"WHO has been participating in our activities organized on World AIDS Day, World Red Cross Day, World Blood Donor Day and National Voluntary Blood Donation Day. The Society has been observing World Health Day through out the country on 7th April every year. The theme and literature for the observance is received from the WHO which is disseminated at the community level through the Red Cross branches", says Dr. S.P. Agarwal. He also informs that IRCS links WHO with the community in all health related matters.

Elucidating the relationship the Head of the India Office of International Federation, Mr Peter Ophoff says, "The MoU between the WHO and the Federation is a milestone agreement to facilitate more coordinated way of helping the people in need. While this agreement between the two international bodies is for a worldwide implementation, here in India, the Indian Red Cross has taken it as one major step forward and has operationalised this agreement in its projects and operations. This is a clear indication and positive development in a growing realization that partnerships in the humanitarian world, such as the MoU with WHO are essential."