

# Cooperation between the International Committee of the Red Cross and National Societies in Bosnia-Herzegovina : broadening the Red Cross response

by Pierre Krähenbühl

The break-up of Yugoslavia and the war in Bosnia-Herzegovina represented the first major conflict on European soil since the end of the Second World War. It confronted politicians, military planners, journalists and aid workers alike with daunting challenges that often posed acute dilemmas. In many ways, the war threw into question the international community's ability to respond to the issues at hand and meet the needs encountered. The International Red Cross and Red Crescent Movement was not spared this challenge.

Present since the very outbreak of violence, the ICRC endeavoured to alleviate the impact of widespread population displacement, targeting of civilians and blatant disrespect for essential norms of humanity. For delegates in the field, the struggle to gain access to places of detention or to make successful representations to political and military authorities in behalf of ethnic and religious minorities was, more often than not, excruciating.

The scale of the human suffering resulted in a need for assistance programmes to accompany the ICRC's protection activities. ICRC

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**Pierre Krähenbühl** is an ICRC delegate. He holds a degree in political science and international relations and has carried out missions in El Salvador, Peru and Afghanistan. In Bosnia-Herzegovina he had a variety of assignments between 1995 to 1997 and worked out of Banja Luka, Pale and Sarajevo.

supplies kept medical facilities throughout Bosnia-Herzegovina operational. Relief distributions, carried out in partnership with local Red Cross organizations, sought to help isolated and exposed families get through the most critical phases of the war. Local water boards and numerous communities benefited from emergency water and sanitation projects.

Since the signing of the General Framework Agreement on Peace in Bosnia and Herzegovina (better known as the Dayton agreement) in December 1995,<sup>1</sup> the ICRC has focused on helping the different communities to address some of the lasting consequences of the conflict. The search for missing persons is seen as a crucial aspect of the reconciliation process. Dealing with the threat of landmines constitutes another important task in the immediate post-conflict environment. And the ICRC is helping to keep a number of components of the medical and social safety net operational in the present transition phase.

Both during the war and in its aftermath, National Societies operating in partnership with the ICRC have made a very significant contribution to the ICRC's work. This article will take concrete examples from Bosnia-Herzegovina to illustrate the types of partnership that have been developed. It will look at the frameworks devised for the different forms of cooperation and the philosophy underlying the process. It will assess some of their successes and failings and cite options for the future. Finally, it will advocate a holistic definition of cooperation between Participating National Societies and the ICRC, and argue that this form of cooperation makes it possible to broaden the Red Cross response and represents an important investment in the Movement.

### **Operational partnerships**

The 1990s saw a combined search by many National Societies for a higher operational profile in emergency situations and by the ICRC for a more structured and productive integration of the National Societies into its operations. This was achieved above all in a number of African settings and in the former Yugoslavia.

In the Bosnian context, the forms of cooperation and the number of projects grew between 1993 and 1997 to an unprecedented number and level of sophistication. Over that period, for example, some 35 delegated

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<sup>1</sup> See the provisions relevant for ICRC's activities in the former Yugoslavia: *IRRC*, No. 311, March-April 1996, pp. 243-245.

or bilateral projects — with an average investment of 1 million Deutschmarks — were implemented. By mid-1997, Bosnia-Herzegovina accounted for over half of these programmes in ICRC operations world-wide. There were different reasons for this. First of all, the conflict in Bosnia-Herzegovina — erupting as it had in the heart of Europe — generated widespread interest and pressure from Western National Societies in particular to become involved in the humanitarian operations on the ground. Secondly, there was gradual recognition that the scale of the needs encountered required new, creative responses.

The first such project was the partial rehabilitation of the gas network in Sarajevo, which the Netherlands Red Cross Society began in 1993. Thereafter and through to the end of the war, delegated and bilateral projects met needs for medical care, clean water, sanitation and relief. Programmes ranged from large donations of hospital equipment to repairs of water-supply systems and on to community kitchens. Additional forms of interaction included relief convoys — often organized by local or regional branches of a given National Society — and staff secondments to the ICRC. In some cases, Participating National Societies established full-fledged coordination offices for their various projects within the premises of ICRC offices.

In the days that followed the signing of the Dayton peace agreement, there was a further increase in the number of projects and a redefinition of priorities. The ICRC increasingly sought partnerships for programmes that would be part of the medical and social safety net. These included the rehabilitation of medical and social welfare facilities. Several examples will be studied below.<sup>2</sup>

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<sup>2</sup> Particular emphasis is placed on our experience between July 1995 and December 1997, i.e. the final months of the war and the first two years after the signing of the peace agreement. Changes in the programmes and the concept underlying them are therefore to be seen in a context of transition from one of the most acute phases of the conflict to the immediate post-war environment.

It is worth mentioning that these developments took place prior to the adoption of the *Agreement on the organization of the international activities of the components of the International Red Cross and Red Crescent Movement* (Seville, 26 November 1997 — reprinted in *IRRC*, No. 322, March 1998, pp.159-176). By early 1997, the delegations of the ICRC and the Federation were operating on the basis of a strengthened partnership in the fields of assistance and institution-building. Both components were working with National Societies in the framework of bilateral or delegated projects.

## **Lasting needs and the resulting position of the International Red Cross and Red Crescent Movement**

### *Community kitchens*

In 1994 the decision was taken by the ICRC and the German Red Cross Society to initiate a community-kitchen programme in Sarajevo, which saw the establishment of local Red-Cross-managed facilities throughout the city to provide elderly persons, widows and orphans in particular with a daily hot meal. The number of beneficiaries at the time reached some 10,000. Just as the Dayton agreement was being negotiated in November 1995, discussions between the ICRC and the Austrian Red Cross led to the launch of a similar project, which eventually fed 23,000 persons daily in the greater Banja Luka area. Finally, as of January 1996, the German Red Cross project was expanded to include a further 10,000 persons in the areas between Pale and Trebinje in eastern Bosnia-Herzegovina. In all cases, the respective local Red Cross organizations played a significant planning and executing role.

Implementing a community-kitchen network in an emergency environment was not in itself a novelty though it raised some interesting questions in the case of Bosnia-Herzegovina. First of all, there was the issue of needs that had persisted between a phase of acute emergency and one of recovery/reconstruction. The country was emerging traumatized from a war halted only by a massive and unprecedented international military deployment (60,000 troops under the command of the North Atlantic Treaty Organization) and struggling to define its future and that of its constituent communities. It was engaged in a complex effort to set up common political, economic and financial institutions and both local authorities and international donor organizations were developing strategies for reconstruction. Yet the vast sums of money being injected into the process were failing to have effects on individual lives in the short term. In the meantime, a significant gap was becoming apparent between the effects of structural programmes and the specific needs of entire sectors of society, in particular the most vulnerable groups. The conviction grew that a "humanitarian safety net" had to be maintained. The local institutions in the sectors concerned — not the ICRC or the Participating National Societies — would constitute this net.

The dialogue between the ICRC, the National Societies involved and the local Red Cross partners produced the view that a continuation of the community-kitchen programmes contributed to that safety net. The local Red Cross organizations found themselves very much on the humanitarian

front line and feared that a closure of the kitchens would deprive them of one means to meet needs within their own communities. Maintaining the kitchens was perceived by some as a test of the principle of independence. Since some donors questioned the relevance of public kitchens in a post-emergency environment they advocated a shift towards reconstruction and promoted programmes to strengthen sustainability and build local capabilities. Towards the end of 1996, the Participating National Societies were facing growing difficulties in securing continued funding for these bilateral projects and were at one point notified by donors that the number of beneficiaries would have to be reduced to one third of the figures mentioned above.

While recognizing the legitimacy of and need for framework-reconstruction programmes, the ICRC and its National Society partners upheld the importance of parallel humanitarian support initiatives. They also made the following observations. Firstly, Bosnia-Herzegovina was undergoing a two-fold transition — not only from war to post-war but also from a planned to a private market economy. Secondly, it was a situation in which there was virtually no tradition of civil society and local non-governmental organizations. The present and future role of the local Red Cross was therefore decisive. Irrespective of how badly weakened the local Red Cross organizations had emerged from the conflict, they remained a reference point for people within their communities. In discussions with donors, the point was made that projects geared to the local Red Cross organizations or carried out in conjunction with them constituted a promising means of building local capacity. Combining ICRC activities, National Society projects and the International Federation of Red Cross and Red Crescent Societies' institutional development work would contribute to sustainability.

In the latter part of 1997, the number of community-kitchen beneficiaries dropped slightly. On the other hand, it became clear that several thousands of people would continue for months or years to rely on assistance of the type provided by the kitchen programmes in the same way as many homeless people and other social outcasts do in towns throughout Europe. In Bosnia-Herzegovina, however, the people concerned had lost everything to the war. The local Red Cross organizations insisted that it was their role to support these people in need. The ICRC / National Society projects helped them to do so.

#### *Rehabilitating medical and social welfare facilities*

Throughout the war, supporting medical facilities on all sides was one of the ICRC's main concerns, and was carried out to a large extent with

the backing of National Societies. Saving the lives of the wounded required both experienced staff in the hospitals and the regular provision of supplies. The broader network of social welfare institutions (orphanages, homes for the elderly, etc.) received support on an ad hoc basis in their endeavour, under appalling conditions, to take care of their charges. In the aftermath of the conflict, the health-care sector underwent extensive reform. In conjunction with the World Health Organization, the respective ministries prepared a health plan for the year 2000. On the ground, however, salaries were arriving late, if at all, and no internal or external solution was emerging that would have allowed the ICRC to rapidly phase out its deliveries of surgical and other supplies. The conditions placed by the international community on economic aid and the resulting imbalance of assistance between the country's constituent entities exacerbated the gap described above.

Field delegates began drawing attention to the needs faced by the medical and social welfare institutions in different regions. As pointed out above, ICRC staff had been in contact with and supported many such facilities during the war. Several of their directors had, against all odds, managed to protect patients belonging to targeted ethnic communities against persecution and expulsion. These institutions did not, however, appear anywhere near the top of reconstruction lists despite being an intrinsic part of the humanitarian safety net required in the transition period. Though the ICRC felt that such rehabilitation schemes should not be part of its objectives as such — in particular in a post-conflict environment — it was decided that proposals could be submitted as bilateral projects to interested National Societies. It drew up a framework for this approach, which was based on initial assessments made by ICRC medical staff. These included visits to orphanages, homes for the elderly and for the physically and mentally handicapped (including people wounded and traumatized by the war) to set priorities. They also involved discussions with the Ministries of Health and Social Affairs to ascertain which institutions would be kept in the future health-care system and which would be abandoned. The local Red Cross organizations, while taking no operational part in the actual rehabilitation schemes, were closely involved in the determination of priority institutions.

This allowed the ICRC to submit a number of projects to National Societies. The projects proposed included renovation or expansion of premises, repair of facilities, environmental rehabilitation, staff training and support, and help in establishing links with similar institutions abroad. The interested National Society was required to carry out an additional

assessment to define the scope, budget and technical specifics of each project. In the case of Republika Srpska,<sup>3</sup> for example, a package of four priority institutions was submitted.

At the time of writing, the first phase of rehabilitation had been completed for all four of them by the Norwegian, Italian, Japanese and Spanish National Societies. Thought was then given to additional rehabilitation as well as staff training for these institutions. These promising results led to an increase in project proposals.<sup>4</sup>

Integrating National Society staff, expertise and funds made it possible to broaden the Red Cross response to an area previously considered beyond the ICRC's traditional purview. The fact that a systematic effort was made from the beginning to identify priorities and involve Participating National Societies was welcomed by authorities and National Societies alike. Obtaining support for further rehabilitation and for staff training will represent an important test for the approach chosen. Given the large number of organizations taking part in the broader reconstruction effort in Bosnia-Herzegovina, donors have at times been uncertain as to whether the funding requests submitted by a given National Society should be granted. The fact that the Participating National Societies have been able to set their rehabilitation projects within a framework of priorities covering needs in a specific sector has been considered positive.

### *Mine awareness*

The fighting in Bosnia-Herzegovina ended on 15 December 1995, yet virtually every single day since then someone has been injured or killed by mines or unexploded ordnance planted or abandoned by combatants. Landmines have had, and continue to have, a serious impact on the security of the resident population, on that of internally displaced persons and even more so on returning refugees. They represent a significant obstacle to more rapid economic recovery and have been one of the main causes of injury for the foreign troops deployed under the banner of the "peace implementation and stabilization forces".

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<sup>3</sup> According to the Dayton peace agreement, Bosnia-Herzegovina comprises two entities: the Federation of Bosnia and Herzegovina and Republika Srpska. As a result of operational decisions taken during the conflict, the ICRC had separate delegations in each of these entities until 15 January 1997. Since then there has been one delegation, based in Sarajevo.

<sup>4</sup> Throughout Bosnia-Herzegovina, ten such projects have been completed since the end of the war.

Over the years, the ICRC has developed great expertise around the world in treating mine injuries and manufacturing artificial limbs. By the second half of 1995, a number of delegates based in Bosnia-Herzegovina were stressing that this was no longer enough and that a comprehensive mine-awareness programme was required, with the emphasis on preventing accidents from occurring in the first place. This view initially failed to find a consensus within the ICRC itself. Mine awareness was considered too technical a subject — if not outright dangerous — and was seen as requiring expertise of a type not available within the ICRC.

If the expertise was not available within the ICRC, the project's advocates argued, it might be time to consider looking for it outside — the need was manifest and the Red Cross had a real opportunity to make a difference in an area closely related to both limb-fitting and the international advocacy campaign to ban the use of landmines. Here the resourcefulness of the National Society network was amply demonstrated. The British Red Cross has since the beginning of the programme helped identify and financed the post of mine-awareness project coordinator based in Sarajevo.

This project currently has four central components: a media-oriented campaign to draw attention to the threat of mines; development of school curriculums, in close conjunction with the Ministries of Education in both entities, to help children confront the mine danger; establishment of a mechanism to gather data about mine-related incidents throughout the country; training of local Red Cross mine-awareness instructors — 120 so far — who are becoming resource persons in their municipalities on various aspects of the mine issue.

The programme is presently one of the ICRC dissemination service's main projects. It is neither delegated nor bilateral but nevertheless an example of how effective interaction between a National Society and the ICRC can have a positive effect on the Red Cross operation in general. Authorities in both entities have adopted the school curriculums and the data-bank on mine incidents has become a reference tool in Bosnia-Herzegovina for both local and international organizations. The mine-awareness programme has become a platform for interaction with relevant ministries and agencies alike.

As with assistance for medical and social institutions, far-reaching partnership between the ICRC, the local Red Cross and a participating National Society as well as the integration of external expertise have made



it possible in this case to broaden the Red Cross response and to define the position of both the ICRC and the Movement as a whole on an important issue.

### *Recognition of the National Society*

Local Red Cross organizations and activists were the ICRC's main partners during the war where assistance work and tracing were concerned. In the immediate aftermath of the conflict, they have continued to play a key role in the search for missing persons and in supporting the many people marginalized by unemployment and other problems associated with slow economic recovery. While the Federation has focused on development strategies for the local Red Cross organizations, the ICRC has sought to continue its supporting role in strengthening their ability to meet the needs in their communities. In addition to these operational undertakings, the ICRC and the Federation have devised a framework to bring about recognition of a National Red Cross Society in Bosnia-Herzegovina.

September 1997 brought new momentum to the process, partly thanks to the role played by the participating National Societies. While it is the ICRC that formally recognizes a National Society and the Federation that admits it as a member, Bosnia-Herzegovina has shown the impact that the presence and operational involvement of other National Societies can have. Indeed, visits by National Society desk officers, heads of international departments, secretaries-general and presidents have been a regular occurrence. Visiting their staff members in the field, they have regularly taken up ICRC and Federation requests to hold meetings with the Red Cross leadership in both Bosnia-Herzegovina entities. The intention of these encounters has not been for the participating National Societies to actually take part in negotiations in the recognition process but rather to use their experience and influence within the Movement to back that process. Their presence has also been useful in putting across, from a National Society perspective, some of the more difficult messages regarding structure of the future National Society, conditions for recognition, respect for the Fundamental Principles, etc..

This impact on the recognition process would not have been possible without broad-based integration of Participating National Societies into the ICRC operation both during the war and in the immediate post-war period, and the perception of solidarity that this has created within the local Red Cross organizations.

## Cooperation as a state of mind

On the basis of the examples given above, a number of points emerge that deserve to be highlighted.

Firstly, the ICRC often perceives cooperation with Participating National Societies only in terms of bilateral or delegated projects. This situates the partnership first and foremost at a technical level. But it is high time for the ICRC to consider cooperation from a broader perspective. Cooperation should become a *state of mind*, as natural an endeavour as, say, protection or war surgery. In spite of progress in that direction, there is no widespread agreement on this within the organization. Resolute steps should be taken to overcome this imperfection in the institutional framework.

Secondly, attempts have been made to address this concern in Bosnia-Herzegovina. Among the most important tenets of the philosophy chosen was that, when declaring its intention to assume leadership of the Movement, in certain respects in certain areas at certain times, the ICRC considers this role as a *responsibility*, not a privilege. Ensuring consistency requires a readiness to make time available, to have precise knowledge of the priorities in the field, to research issues for National Society colleagues and also to be prepared to present them with a policy framework that they should respect. The experience in Bosnia-Herzegovina has shown that National Societies are very willing to accept an international operation conducted by the ICRC if they can identify a consistent range of concepts underlying that operation and if they feel that an attempt is being made to include them effectively. To that extent, the ICRC has sought to take a proactive approach towards the participating National Societies.

Thirdly, a well-structured and all-embracing partnership with National Societies is beneficial in many different ways. As already pointed out, it enables the ICRC to broaden the Red Cross response to specific or evolving needs, to acquire expertise that it does not possess itself and to develop a sense of solidarity with local Red Cross organizations, which have in the case of Bosnia-Herzegovina proved responsive to a truly internationalized endeavour. For the Participating National Societies, this approach is valuable for three main reasons: it allows them to draw on the ICRC's experience of the situation; it enables them to obtain ICRC support for action at the political level when required and, finally, being integrated into the broader ICRC operation affords certain National Societies greater independence and room for manoeuvre. It enables them to draw donor attention to the needs identified in the field.

Fourthly, the projects carried out in Bosnia-Herzegovina have highlighted the ICRC's responsibility for and ability to invest in the Movement. A narrow interpretation of the concept of partnership has often limited such collaboration to strong National Societies, i.e. those that have traditionally had the means to participate in field operations. The attempt was made in the Bosnian context to integrate a larger and more diverse number of National Societies. Several Societies (the Spanish and the Japanese, for example) thus engaged in their first bilateral or delegated projects with the ICRC. Such experiences have in turn helped strengthen the international departments of the Participating National Societies.

It must be pointed out, however, that this aspect of the cooperation philosophy has been insufficiently developed, particularly if one considers that Bosnia-Herzegovina has become an East-West meeting point. From embassies to non-governmental organizations to journalists, there are people from a variety of civilizations, cultures and religions present in the country today. This should have inspired the ICRC much earlier, within the framework of a broad-based cooperation policy, to organize systematic contact with representatives of, for instance, Red Crescent Societies that have operated and continue to operate there. A significant conceptual and strategic flaw exists in failing to appreciate the importance of integrating organizations such as the Turkish, Egyptian and Iranian Red Crescent Societies and other National Societies into the operational framework there. Beginning in 1995, the ICRC delegation in Sarajevo sought dialogue with their representatives. All sides showed interest in dialogue and some in operational partnerships. Actual cooperation, however, remains at an embryonic stage. The groundwork still needs to be laid and this ought to be one of the ICRC's objectives.

Finally, there is a conviction that a strong partnership with a variety of National Societies in the field forms the basis for relations of a less defensive nature between the ICRC and Federation delegations. The more positively and effectively the Participating National Societies become part of an ICRC operation, the more they will feel at ease in supporting an open dialogue between institutions.

### **A necessary search for consistency**

In a domain in which clear-cut institutional frameworks and operating procedures have yet to be consolidated, there is a tendency at the ICRC to emphasize the perceived shortcomings of these partnerships, possibly with a view to discrediting this form of interaction. This is misguided in

that it fails to recognize that the process of cooperation itself is well underway. Focus is therefore better placed on achieving the greatest possible consistency. In that respect, the case of Bosnia-Herzegovina points up the following matters of concern.

Firstly, as mentioned above, the approaches chosen in the field suffered to an extent from the lack of a policy framework (the state of mind) for partnerships with National Societies. In its absence, too great a margin of manoeuvre was left to heads of delegations and too much depended on their personal interpretation of what this interaction was supposed to achieve. This confronted the participating National Societies with conflicting ICRC messages or, if one looks at it from a different angle, allowed them to advocate different approaches in different areas. While perhaps appealing in the short term, such a trend will eventually have negative repercussions both for the ICRC and the National Societies: it will be detrimental to operational effectiveness and predictability, as well as to dialogue with local partners and donors.

Secondly, further efforts will have to be made to give participating National Societies the means to resist government pressures and the temptation to ensure visibility at all costs. During the war, for example, National Societies were mostly interested in operating in the Federation of Bosnia and Herzegovina, which was seen as more attractive to donors than proposals for projects in the Serb Republic. There were instances after the signing of the Dayton peace agreement when some Western governments were keen to see their National Societies engage in projects that were in line with political objectives they considered crucial. These objectives, however, did not automatically correspond to the humanitarian priorities identified in the field.

This nurtured the perception in ICRC circles of a lack of independence on the part of some National Societies in terms of funding and of project identification. If one takes a far-reaching view, however, this is no reason for shying away from cooperation. On the contrary, it imposes on the ICRC a responsibility to provide better assessments and devise more effective frameworks and tools that enable the participating National Societies to defend the specificity of the Red Cross vis-à-vis their governments.

Thirdly, there is concern about the insufficient number of projects — both during the war and immediately afterward — focusing on the local Red Cross. Most partnership programs have been in the medical, water-and-sanitation and relief sectors. Few of them have been centred on the local Red Cross organizations themselves. Participating National

Societies ought to be in a position to better defend the interests of operating National Societies. To date, for instance, in spite of meetings on the issue between the National Societies concerned, the Federation and the ICRC, no common policy has been adopted regarding subjects such as incentive payments for local Red Cross volunteers or professionals. Every programme in the country currently has its own policy. All parties involved share responsibility for this inconsistency.

### **A look ahead**

Events in Bosnia-Herzegovina have left few people indifferent. Some are indignant at the fact that it has been the centre of so much attention and interest. They observe that the number of National Society programmes has less to do with a developing state of mind than the fact that it was a conflict in *Europe*. It cannot be denied that this was at least partly the case. However, it is also true that the people who voice such views are often those with a general reluctance to engage in cooperation. Those, on the other hand, who have advocated a broad-based approach to the ICRC/National Society partnerships are convinced that they cannot be limited to Bosnia-Herzegovina. Rather, that situation should be viewed as a learning opportunity. The lessons can be adapted to other situations.

Among those lessons is the demonstration that partnership can be expanded from the current core of bilateral and delegated projects to a wider framework, as described above. There is also a recognition that the necessary *state of mind* has not yet been consolidated. The ICRC in general and the average field delegate in particular still tend to adopt a defensive or reactive attitude towards Participating National Societies and other components of the Movement. As one ICRC cooperation delegate has observed, mistrust towards our Red Cross partners too often makes well-intended actions on our part look like mere institutional manoeuvring. This has often caused the ICRC to miss benefits that it might otherwise have enjoyed.

In addition, a growing number of the conflicts in connection with which the ICRC operates today shift back and forth between acute and low-intensity phases. The chronic nature of a number of these has had an effect on operation decision-making. Whether in connection with long-term civil wars, stalled conflicts or immediate post-conflict environments, the Red Cross is often one of few organizations present in a consistent manner over a long period. If one adds to this the growing ambition and experience of various participating National Societies, there

is likely to be an ever-increasing coexistence in the field between the various components of the Movement. Central to this article is the view that this development must be seen as an opportunity, not a threat. Bosnia-Herzegovina has shown that it is part of, and could become a response to, some of the challenges being faced by the ICRC in the ever-shifting pattern of emergencies.

A broad-based and far-reaching cooperation policy will allow the ICRC to meet the competition in the field of humanitarian endeavour. The ICRC's specificity is often described as stemming from the mandate it has been given by the community of States. It would not be surprising if, in today's changing world, the international Red Cross and Red Crescent network evolved into the ICRC's greatest asset yet. In that respect, cooperation between the ICRC and National Societies in Bosnia-Herzegovina should be seen as a stepping-stone towards the future.

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