

REGIONAL STRATEGIC DIRECTION 2021–2023

Pillar 3: Water, Sanitation and Hygiene Promotion (WASH)

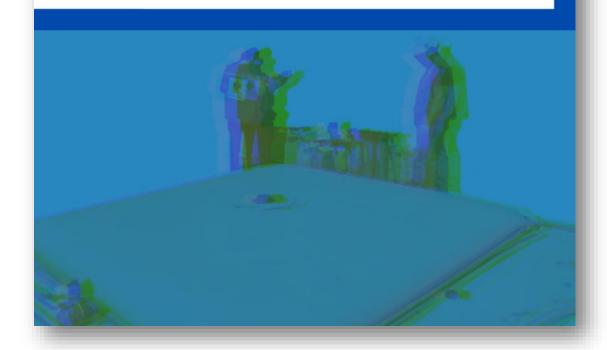


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International Federation of Red Cross and Red Crescent Societies Regional WASH Team for the Americas Health and Wellbeing Unit

January, 2021.

1. Introduction

The International Federation of Red Cross and Red Crescent Societies (IFRC) and its members have a Water, Sanitation and Hygiene (WASH) Strategic Direction adopted in 2017, after extensive consultation with IFRC and National Societies (NS) WASH and Health staff. The global strategy seeks a collective contribution consistent with the goals of the Health and WASH sector as well as the SDGs (Sustainable Development Goals) and includes four areas of expertise: Developmental WASH; Urban WASH; Emergency WASH; and Public Health WASH, which are complementary to each other in thematic, operational, and programmatic terms.

The present Regional Strategic Direction intends to build on these documents, and to disseminate more clearly the WASH global and regional programmatic lines of the IFRC, facilitating the necessary tools for NS of the Americas to include them in their strategies, achieving a greater strategic, programmatic, and operational scope and coherence as the Red Cross and Red Crescent Movement (RC/RC Movement).

Among the components contemplated in the present regional strategic direction, there are actions aimed at: improving the WASH coordination and actions of the NS in the region; designing a model for the participative construction of the WASH programmatic areas in the region, which allows for the generation of capacities in our NS. And finally, the aim is to have trained NS members who are willing to guide and share knowledge related to WASH in the communities where we work.

Background

Access to WASH¹ (Water, Sanitation, and Hygiene promotion) services is a human right and a vital prevention and public health element that contributes significantly to poverty reduction. ²

Lack of access to water and sanitation combined with poor hygiene are among the principal causes of preventable death and disease globally³. It also leads to loss of productivity and forms a major barrier to development efforts and sustainable growth. Although great strides were made globally within the framework of the MDG's, many countries fell short of targets and significant gaps exist both internally and

¹ WASH is the collective term for Water, Sanitation and Hygiene. Due to their interdependent nature, these three core issues are grouped together to represent a growing sector. While each a separate field of work, each is dependent on the presence of the other. For example, without toilets, water sources become contaminated; without clean water, basic hygiene practices are not possible.

² Of particular concern is the impact that the lack of WASH infrastructure and services has on incidence of diarrhoea and resultant malnutrition and stunting among children.

³ WASH related morbidity and mortality is well documented however the advocacy for universal coverage needs a greater emphasis on negative impacts in child development, nutrition, educational impacts (MHM), and overall global productivity.

compared to other countries. Enabling environments for increased sustainable and equitable WASH access gains are still a challenge across the globe. This is particularly the case in fragile states where underlying poverty and lack of investment and implementation capacities are weak and where policy and legislative frameworks are not in place or applied. It is in those scenarios that the RC/RC Movement is most commonly targeting those in need and will continue to do so in years to come, and in both emergency and developmental contexts.

Collective RC/RC efforts in the sector to date are significant and as a result we are recognized as a major player both in emergency and developmental WASH. However, the Federation and its membership has the potential to accomplish much more in scale, measurable impact, and quality than at present. There are also opportunities to demonstrate a greater degree of social inclusion and innovation while being better positioned to respond to current and evolving global and regional demands and needs in a more integrated fashion, and both within the four WASH sector components and cross sectoral.

Within the framework of the IFRC's Strategy 2030 adopted in December 2019, the focus in the next decade will be on ensuring that people enjoy safe and equitable access to health services, water supply, and sanitation services. It seeks to intensify integrated community health, health care, and WASH programs, as well as preventive preparedness for epidemics and pandemics, to meet the unmet needs of the most vulnerable or marginalized.

Additionally, the RC/RC members including the International Committee of the Red Cross (ICRC), the NS and the International Federation have agreed on the Movement Ambitions to address the Climate Crisis, which reiterates the goal of strengthening community resilience, by using climate variability projections to strengthen water resource management in areas where there is or will be water stress; and by seeking solutions based on demand or need.

This Regional WASH strategic direction will therefore lobby and advocate for:

- Providing a long-term vision and common goal for the RC/RC WASH sector in the Americas region.
- Presenting an important coordination tool for RC/RC partners and donors.
- Strengthening the RC/RC leverage for encouraging further resource mobilization for emergency response, IFRC's Global Water and Sanitation Initiative (GWSI)⁴ (contribution to the SDG's) and the One WASH initiative (contribution to elimination of cholera.

Purpose:

This document is intended to provide a reference point and platform from which RC/RC WASH practitioners in the Americas can align their operational and programming direction. Building a regional strategy document is an ongoing process that requires regular consultations between IFRC staff, WASH and Health NS staff, and the Health and WASH Department in Geneva.

The overall objective is to foster a coherent and consistent collective contribution to 1) the sustainable development goals (SDGs); 2) the objectives of the Health regional strategy; and 3) the objectives of the IFRC and NS WASH sector at the regional level.

⁴ The IFRC Global Water & Sanitation Initiative (GWSI 2005-2025) the WASH developmental programming platform.

This WASH strategic direction will also contribute to the design of the new Health strategy and both documents aim to align with Strategy 2030.

Given the variety of contexts and service demands of the National Societies in both Latin America and the Caribbean, this document will try to provide a general guide that can be contextualized to the reality of each country, maintaining a collective general direction in concordance with the global ASH strategy.

A Regional Vision:

The vision is to consolidate a program that from response to sustainable development, enables universal, equitable and affordable access to WASH services as a human right⁵ that impacts positively upon health, dignity and wellbeing of the population.

A Regional Goal:

The goal is to maintain, improve and expand NSs' emergency, recovery and developmental WASH programming.

2. Overarching strategic direction:

The strategic direction will be achieved by focusing upon 'results-based excellence' in SDG's.⁶ delivery and outcomes which will be generated by working more closely with and strengthening NS capacities and relevant presence in communities. In terms of 'results-based excellence' projects should be cost-effective; relevant; replicable; targeting those most in need; should be objectively measurable; demonstrate social inclusion, reflect our fundamental principles and embed applied innovation based on the different contexts of NS.

The delivery mechanism will be founded upon strengthened NS capacities that are tailored towards existing and emerging 'acute' and 'chronic' needs. This will require greater efforts in working collectively across technical or institutional boundaries, seeking out new ways of brokering, creating or expanding partnerships (internally and externally) and better pooling of skills, resources, capacities, innovation, knowledge sharing and experience.

Partnering for more resilient communities⁷ will require an increased commitment to providing support to NSs and vulnerable communities, specifically:

• Working across/through the resilience continuum, in disaster preparedness and disaster risk reduction, disaster response and recovery leading to development. More resilient communities

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⁵ The Right to Water, or more accurately the Human Right to Water and Sanitation (HRWS), was recognised by the United Nations General Assembly on the 28 July 2010

⁷ From Plan and Budget: Water, sanitation and hygiene SDG 6: Ensure availability and sustainable management of water and sanitation for all. a) Vulnerable people's health and dignity are improved through increased access to appropriate and sustainable water, sanitation and hygiene services. • Communities are provided with improved access to safe water. • Community knowledge on treatment and reuse of wastewater is improved. • Communities are supported to reduce open defecation. • Community management of water and sanitation facilities is improved. • Positive behavioural change in personal and community hygiene is promoted through awareness and education activities. The provision of WASH services of course impacts on many other SDG's especially SDG3.

⁷ 2016 -2020 IFRC Plan & Budget

- will be better prepared to respond to and mitigate the impact of disasters and crises while further contributing to poverty reduction.
- Strengthening of NSs' auxiliary role and links with government and other partners, grow existing and new partnerships, better positioning of NS as preferred partners.
- Ensure evidenced based sustainability and impact, encouraging and providing leadership in innovation, knowledge sharing and best practice. Seeking excellence in everything we do based upon objective and results based programme planning, implementation, monitoring and evaluation.
- 'Greening' both our emergency response and developmental efforts applying climate change adaptation.
- Taking advantage of global initiatives and integrated programming such as the One WASH
 Initiative. We must fully realize the potential of our collective networks including our volunteer
 base, our ability to work at scale, coordinate our shared resources and collaborate through both
 internal and external partnerships.
- 'Flagship' Projects. At least in the first instance, in a phased approach, is another example on how multi-sectoral and holistic programming can benefit from interaction and synergy with the Global Water & Sanitation Initiative (GWSI). The GWSI may be an entry point or indeed may provide the basis for further expanded follow-on or complimentary activities commenced by other thematic sectors. Thus, also the need for strengthened linkages and encouraged overlap and synergy with the other health department teams at all levels, and other technical teams in the secretariat like PGI, DRR, Migration, Communications and CEA.
- Developing a more flexible and 'adaptable to context' disaster response capacity using global tools as the primary platform. This within which a broader and more inclusive RC/RC human resource pool is made available as well as a more adaptable array of technical equipment choices while maintaining standardization and quality control.
- Increasing our Federation and collective RC/RC profiling, representation, sector leadership, advocacy, and engagement through a combination of internal RC/RC networking (binational agreements) and technical working group (TWG) coordination⁸ and external key events such as the Stockholm World Water Week, specific WASH related events and looking for new opportunities, both actual and virtual, to raise collective Federation and RC/RC positioning and visibility.
- Ensuring social inclusion, gender, disability, age, and other cross cutting elements are fully embedded in all activities in all contexts.
- Keeping our primary focus upon SDG 6, while recognizing that WASH importantly overlaps with SDG 3 namely ensuring healthy lives and promoting the well-being for all at all ages and SDG 4 relative to education is essential to sustainable development. Significant strides have been made in increasing life expectancy and reducing some of the common killers associated with child and maternal mortality. Major progress has been made on increasing access to clean water and sanitation, reducing malaria, tuberculosis, polio and the spread of HIV/AIDS.
- In addition to the work of One WASH on cholera, reinforce actions to reduce or even eradicate a
 wide range of diseases and address many different persistent and emerging health issues. This
 will require a greater overlap between health and WASH programming and setting of collective
 targets while increasing complementarity.
- Embed and encourage an advocacy role for IFRC and the membership for the WASH sector.
- Continue strengthening the regional response capacity for WASH aspects related to the prevention and control of epidemics and pandemics, as in the case of COVID-19, and critical

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⁸ See attached an overview of the WASH Working Group Structure.

actions such as hand washing and hygiene promotion in general, proper disinfection of surfaces, and the use of Personal Protective Equipment (PPE) to prevent or reduce transmission. The same applies to vector-borne diseases, such as Dengue, which are endemic in most of the region and can be prevented through vector control campaigns and activities.

Achieving an improved degree of harmonization within and external to the health sector (e.g., education; environment; planning; finance) may only be ultimately measured in the number of vulnerable people empowered and served according to their needs. When targeting those that may benefit from WASH programming or operations our efforts in social inclusion (ensuring the disenfranchised, those suffering stigma or discrimination due to gender, age, poverty, disability, political or religious affiliation or indeed any other reason) will be uppermost in our identification of vulnerable groups that we wish to serve. Interventions need to be tailored to adequately address their specific needs.

4. Specific Strategic direction and technical focus areas:

The four technical focus areas are namely *Developmental WASH*; *Urban WASH* (*emergency & development*); *Emergency WASH* and *Public Health WASH* all of which are complimentary to each other in thematic, operational, and programmatic terms.

Developmental WASH:

The Regional WASH Team (that is country, country cluster, regional WASH staff and RC/RC WASH staff and volunteers) shall continue and further expand its reach and scope under the umbrella of the Global Water and Sanitation Initiative (GWSI now extended from 2005 to 2025) which is primarily driven by RC/RC National Societies active at country level. We shall collectively continue and expand provision of leadership, innovation, best practice, research, and support to RC/RC NSs in development WASH. Delivery and programming modalities including resource mobilization need to be promoted at NS level. The GWSI criteria, tools and methodologies, including software guidelines should be aligned with the SDG's. the approach of One WASH and with the four strategies for implementation.⁹

IFRC and its membership remains well positioned to increase the scope and scale of developmental WASH programming due to several key factors such as our auxiliary role to government; permanent in-country presence; long-term mission and vision, ability to partner internally and externally and the availability of our networks both local and regional. Our role should be expanded where practical in strengthening the enabling environment with governments and other key stakeholders at national and sub-national levels, and in particular the national level policy base.

Innovation will encompass but not be restricted to increased technology and remote mapping, including the use of drones and analysis of regional data (dashboards) for full project cycle management; 'theory of change' as a means to better capture and relate to change processes and at all levels be that institutional, programmatic or in behavioral change; 'Look Back' studies, a green response approach and increased post-project sustainability activities that allows us to reduced our carbon footprint and comply with the

⁹ Four strategies for Implementation (1) Strengthened National Society capacities and sustained and relevant Red Cross and Red Crescent presence in communities (2) Effective international disaster management (3) A leading strategic partner in humanitarian action and community resilience 4) A strong IFRC that is effective, credible and accountable.

"Do No Harm" principle, including environmental harm; WASH technical trending topics such as the link with the humanitarian effects of Climate Change, Market Based Programming and Cash Transfer (where relevant), greywater treatment and reuse, WASH interventions with emphasis on PGI and Menstrual Hygiene Management (MHM); strengthening WASH actions in urban and peri-urban areas; and an overall renewed emphasis on the need to apply improved, innovative and evolving methods of data collection and analysis. These innovative tools or methods (including virtual technical trainings) should be seen as a vehicle or platform for improving and expanding RC/RC WASH volunteer and staff capacities while improving quality programming overall including impact measurement and monitoring and evaluation.

GWSI projects need to reflect an increasing need and demand for Integrated Water Resource Management (IWRM) and must rapidly increase adherence to environmental protection including being 'climate SMART' to reduce negative environmental impact and plan ahead now for the increasing impact of climate variability and climate change. We must ensure that the data we collect on the sustainability of our programming is used to improve future WASH programming and widely shared and used to compare our approach with other WASH implementers. More efforts to secure 'post implementation' funding and activities to further strengthen sustainability should become the norm. GWSI projects should also be seen as research platforms made open to academic and research institution partners in order to learn and innovate to improve the impact and sustainability of developmental WASH. Overall more efforts are required for collective innovation and research in developmental WASH encouraging a greater buy-in to this from RC/RC and external partners.

Increased resource mobilization (RM) for developmental WASH programming (multilateral and bilateral) is required and we envisage that collective efforts should significantly increase funding. The increased resource mobilization is essential to reach our revised cumulative minimum of at least 30 million people served by GWSI by 2025. A more structured and planned component of WASH related advocacy and information management, representation, and profiling of NSs and the Federation will be undertaken. However, resources required are not just financial, creating a greater synergy with technical and partner resources in programme delivery and capacity building is equally important to financial resources such as greater linkages with other WASH actors, private sector and academia.

The WASH team will provide continued technical and programme backstopping to existing and new GWSI projects and foster among NSs a cascading technical and programming support culture. The emphasis on having the right balance between 'hardware' and 'software' in programme planning and implementation (a public health focused approach) and the increased impact upon sanitation coverage and indeed innovative sanitation solutions will continue.

In line with the SDG 6 we will increase our focus upon and response to wastewater and solid waste management. Similarly, safe excreta disposal and management should cascade to individual needs, especially for the elderly, infirm, those with disabilities or to those who must cope with incontinence. We will continue to expand and roll out our efforts around menstrual hygiene management (MHM) and both in disaster and developmental contexts. Across the board, increased emphasis on water quality monitoring and surveillance is needed in the sector and the WASH team must roll this out to the membership.

Programmatic funding should contribute to the maintenance of a WASH focal points structure in the field, primarily embedded in NSs at country level, but also should contribute to regional WASH positions and structures.

Urban WASH:

The regional WASH team will continue in the first instance to support and disseminate the results from the recently reinvigorated urban WASH technical working group (TWG) and promote shared leadership to RC/RC WASH advisors and practitioners to co-create an urban WASH strategy which supports emergency and developmental programming and roll this out for the membership in the Americas region. The key focus of this strategy development must be to define the role of the Federation and NSs in urban WASH, as it may be substantially different from how we have designed programmes in the past. Tentatively we expect in the near future that 20% of all people targeted and eventually reached by the collective efforts of RC/RC NSs will be in urban contexts and as much as 40% in coming decades.

A mapping, lessons learned and knowledge sharing initiative is required to capture existing RC/RC experience in urban contexts in the Americas.

To enable meeting these new targets, a new means of RM will be required and most likely under broader and different partnership profiles and modalities such as new partnerships across the board inclusive private sector; public/private bodies; local entrepreneurs; WASH service providers (WSP's) including academia and those that can provide specific technical expertise when not available within the Federation or the membership.

Research and development in solutions for urban WASH in emergencies will continue and be shared and piloted with RC/RC NSs and other WASH actors and partners. Urban solutions in the development context need to be scoped and a plan developed for this new direction for IFRC and NSs to consider.

A major focus for urban WASH should be governance, whereby RC/RC NSs should advocate for those who are the most vulnerable or have no voice, negligible rights like for example advocating for land tenure under the principle of "leaving no one behind". We must also recognize the need for developing stronger partnerships with private sector and other stakeholders to meet the 20% and 40% targets we set. Our urban WASH programming should address 5 building blocks to allow good governance within the urban context, especially for sanitation, which are:

- 1. Universalization of sanitation (inclusive water supply)
- 2. Community processes and duty bearers
- 3. Institutional structures
- 4. Small, private service providers
- 5. Regulatory framework for the urban WASH sector

Emergency WASH:

The Regional WASH Team shall continue to expand its reach and scope in providing leadership, innovation, best practice, research and scaled up relevant programming inputs to RC/RC NSs in the area of emergency WASH. This requires a harmonization process to increase and operationalize country and regional level emergency WASH response capacity (Rapid Response Personnel and Kits), while maintaining and improving/adapting global capacities (ERU and the global Surge database) to achieve integrated and comprehensive WASH surge capacity in both rural and urban contexts. Greater efforts are required to embed WASH preparedness and prevention in DRR and community health programming and not just for large scale disasters like the COVID-19 pandemic, but also the more prevalent smaller scale disasters.

The membership's national and regional WASH surge capacity will be strengthened by ensuring professional dialogue with and relevant support to WASH technical staff and maintaining a functioning network of delegates, NS staff and professionals in the WASH sector. Maintaining the Movement wide pool of human resources for WASH disaster response will require continuous RRT and ERU training as well as online e-Learning and new academic opportunities as well as mentoring at field level when opportunities arise. In partnership with other sectors, efforts will be made to adopt the WASH Competency Framework and improved surge database to streamline deployment and consolidate institutional memory.

The regional WASH team will continue to advocate internally and externally for a better balance between sanitation and water activities in emergency operations. To achieve scale up we must dedicate resources to improve our human resource and equipment capability to deliver sanitation activities, particularly in difficult settings such as floods and urban environments.

Substantial efforts have been made to improve WASH emergency response by making hygiene promotion the bedrock of our approach. Our hygiene promotion activities must expand to incorporate new methodologies grounded in a solid evidence base. This is best achieved through the further roll out of IFRC's Emergency Hygiene Promotion Guidelines. As it is both vital and requires a significant amount of software skills, we will strive to see that menstrual hygiene management is incorporated in emergency WASH response.

To respond effectively and at scale, WASH equipment, including hygiene promotion equipment, needs to be readily available and appropriate and the WASH team will maintain its role as technical focal point for WASH equipment, and equipment that can be sourced at all levels be that global, regional and local especially if local level pre-positioning is appropriate. The regional WASH team will continue to work with logistics and NSs to ensure a range of equipment is available regionally. Research and development in partnership with external agencies, suppliers, and academic institutions will be carried out to ensure WASH personnel are equipped with the most effective and reliable means to provide safe water, sanitation and hygiene in emergency response. We must also acknowledge the need to catch up with adopting ways of working, such as cash transfer programming, which are seen as mainstream rather than innovative approaches to WASH in emergencies.

Saving lives will continue to be always the primary concern when responding to crisis. That in no way precludes a responsibility to reduce harm to the environment. We must contribute to initiatives such as Green Response and thread carbon reduction and improved environmental health throughout our planning and response activities.

We will take every opportunity, like the response to COVID-19, to 'build back better' and plan transition and exit strategies from the onset of an emergency operation. Overall, we are looking for strengthened strategic direction on how we better engage and contemplate a broader resilience into our planning and activities.

Public Health WASH:

The Regional WASH Team will ensure that WASH programs support disease control and prevention of transmission in all relevant settings (clinical, home, environment etc.) We will redouble our efforts to

ensure an equal emphasis on sanitation elements without de-emphasizing the continued need for safe water coverage. The increasing threat and incidence of epidemics and pandemics such as COVID-19, Dengue and Cholera will be a major focus both in terms of preparedness and response, as well as long-term WASH. One WASH encapsulates this joint emphasis on prevention and preparedness.

The proper and safe management and disposal of waste is included as a crucial element in our sector. Handwashing should not be under emphasized. An increased understanding and synergy are required to better link WASH with Nutrition overall. This will be the subject of new collective work within and external to RC/RC National Societies.

The WASH team will ensure National Societies are able to effectively incorporate public health in WASH activities within each stage of the emergency cycle and along the resilience continuum; strengthening of WASH as part of prevention; WASH disaster preparedness; community disease detection and early warning; behavior change communication; community management of sustainable water supplies, vector control in its broadest sense and especially in light of new or remerging public health threats, waste water and solid waste management including reuse and safe disposal.

Internal cooperation will be strengthened with Emergency Health and epidemiology focal points and resources within the Federation and NSs. This will include developing linkages between WASH and the ongoing COVID-19 response, as well as vector control, initiatives like the Oral Cholera Vaccine, and the One WASH approach to influencing GWSI project site selection to eliminate cholera hot spots. This should include all efforts to reduce all diarrheal disease threats and incidence.

Evidence based research and programming will be undertaken in areas such as medical waste and vector control. Five key areas of focus will be:

- Improve data collection and epidemiological analysis and surveillance for programme design
- Make WASH regional tools (FACT, RDRT, ERU and NDRT) more flexible to better address the complexity of epidemics, including slow onset scenarios
- Expand the membership's capacity and access to technical support for vector control activities (partnership) especially regional tools.
- Undertake continual adaptation and improvement overall of kits and tools
- Ensure our medical facilities are the solution rather than the problem by improving medical waste treatment.

Underpinning the above will be an increased focus on staff and volunteer development, tailored training and capacity building and mentoring.

4. Key requirements and assumptions:

To deliver effectively on the WASH vision, goal and strategy we recognize the following requirements and assumptions:

• WASH continues to be one of the main challenges identified in the Strategy 2030under de Strategic Priority 3 on *Reducing the growing gaps of Health and Wellbeing*, contributing overall

to building resilience and impacting at country, regional and global levels and broadly engaged in the continuum of linking relief, recovery and development/resilience building.

- The existing efforts and methods of networking, both internally and externally, will be stepped up and improved through the continuation of existing networks and the creation of new Technical Working Groups (TWG's) in the 4 WASH work stream areas (Emergency, Developmental, Urban and Public Health). These TWGs will create 'buy-in' to better position the sector and highlight the added value it brings to both emergency and developmental programming. These efforts must be closely linked to research, innovation and excellence and driven by emerging needs of targeted populations.
- A clear focus upon complex settings such as fragile or 'failed states' and forgotten disasters as a
 priority, underlined by scaling-up how we address inequities in health. This on the assumption
 that this grouping represents in many countries those in greatest need but often missed out.
- Furthermore, an open and evolving approach is required to benefit from both horizontal and vertical programming where appropriate and according to context assuming that donor flexibility allows such an approach. This requires more inter-sectoral planning, resource mobilization and identification of overlaps that add value to a broader and more holistic product.
- NSs are recognized by their respective governments as playing an auxiliary role for the delivery of WASH services and infrastructure.
- Sustainable funding for WASH projects and staffing is secured from a broad array of sources.

5. Expected results:

- 1. National Societies have a WASH program and/or focal point, with strengthened capacities in the four specialty areas: *Developmental WASH; Urban WASH (emergency & development); Emergency WASH* and *Public Health WASH.*
- 2. The technical training processes are adopted to the current needs, such as the translation of the WASH NIT training to an online version (e-learning).
- 3. Knowledge is generated by working with academia, based on the analysis of our interventions using scientific methods.
- 4. Working with NS on community-based approaches using evidence- based programming.
- 5. Health information is managed in a better way, making the work of our National Societies visible to our allies.
- 6. Better intersectoral coordination is promoted within and outside the organization, including PGI, DRR, CEA, Migration, Operations, Logistics, Education, Climate Change.
- 7. Promoting technological innovation in WASH within our NS.
- 8. A regional network or database of WASH "focal points" is promoted throughout the Americas.
- Evidence-based advocacy actions are implemented, based on joint planning with key actors at the national, sub-regional and regional levels. This includes promoting the active presence of our NS in national and regional WASH coordination platforms.

10.	Strategic alliances and cooperation are promoted with actors from the private sector,
	humanitarian, and non-governmental organizations.

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

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

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

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

Independence: The movement is independent. The National Societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with the principles of the Movement.

Voluntary service: It is a voluntary relief movement not prompted in any manner by desire for gain.

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

Universality: The international Red Cross and Red Crescent movement, in which all societies have equal status and share equal responsibilities and duties in helping each other, is worldwide.