

## FROM RESPONSE TO COMMITMENT IN GREECE

How the Hellenic Red Cross turned emergency experience into a long-term organisational approach to community engagement and accountability

### Starting point: CEA introduced during the migration crisis (2015-2018)

As with many National Societies in the Ukraine and Impacted Countries Emergency Appeal (UIC EA), Hellenic Red Cross (HRC) first began to formalise its approach to community engagement and accountability (CEA) through an emergency response. However, for HRC it wasn't the Ukraine crisis, but the migration emergency in 2015, when over one million people arrived in Greece. At that time, CEA was not embedded as an organisational approach, but the scale and complexity of the crisis created a clear operational need for more structured engagement with affected people.



*Hellenic Red Cross volunteers discuss issues with residents of Skaramagas Camp outside Athens, June 2017.*

With support from IFRC and Partner National Societies, HRC first began providing information as aid. During the emergency phase, CEA was largely seen as a separate sector. However, as the response stabilised and camps became longer-term settings, HRC gradually expanded its CEA practices. Dedicated CEA staff were recruited in major camps, multiple feedback channels were established, and communities were increasingly involved in shaping activities. This phase was critical in demonstrating the practical value of CEA to staff and volunteers working under pressure, laying the groundwork for broader organisational uptake.

### Continuing after the crisis: from practice to policy (2018 – 2022)

When HRC began to phase out from refugee camps in 2018, the organisation made a deliberate decision not to allow CEA practices to disappear with the emergency. Instead, CEA was gradually integrated into domestic programmes. Importantly, this period focused on consolidation: translating emergency-driven practices into systems, guidance and internal capacity and culture.

Key steps included a CEA training of trainers, approval of standard operating procedures (SOPs) for CEA in emergencies, and the appointment of a dedicated CEA Coordinator role in 2019. This role proved critical for driving the shift from CEA as a set of activities to an organisational-wide commitment. CEA SOPs setting out minimum standards for all HRC programmes were approved by

leadership later that year, CEA was integrated in all trainings, feedback mechanisms were made obligatory in all programmes, and a CEA library was created to share learning and showcase impact. This progress occurred despite significant challenges, including staff and leadership turnover, limited resources, and heavy workloads.

## Building on foundations: the Ukraine response (2022-2025)

When the Ukraine crisis began, HRC was in a fundamentally different position compared to 2015. Maria Zygouri, HRC CEA Coordinator, explains, *“We didn’t have to start from scratch so we could get moving much more quickly this time. We already had trained staff and existing feedback mechanisms we could adapt for the response.”* This solid foundation also meant HRC was able to integrate CEA into the DG Sante Mental Health and Psychosocial Support (MHPSS) project even when this hadn’t been done at regional level. HRC conducted participatory needs assessments using focus group discussions, developed MHPSS services with service users, and regularly gathered and used community feedback to guide the project.

## Lessons learned and advice for other National Societies

HRC’s experience highlights several lessons for National Societies seeking to institutionalise CEA:

- **Use emergencies as entry points, not endpoints.** Crises can catalyse change, but institutionalisation only happens if practices are deliberately sustained and formalised after the emergency phase. *“The 2015 migration response was an opportunity for us and a chance to learn, but institutionalisation is an ongoing process, not a one-time initiative, and it requires investment between crises too,”* adds Maria.
- **Institutionalisation takes time.** In HRC’s case, the process took nearly a decade, progressing from practice, to systems, to policy. Maria explains, *“It’s a journey, and you need to go step-by-step. Slowly, slowly we built the mentality and then put in place the documents to formalise it and that’s how we managed in 2025, to approve our CEA Policy.”*
- **Start simple and adapt.** CEA does not need to begin with complex systems. *“A feedback mechanism can be as simple as an FGD with 5 people. It’s ok to start with something small and build it up over time,”* adds Vasiliki Dalla, CEA focal person with HRC’s health sector.
- **Find the right people to push it forward.** The positive attitude and commitment of staff within HRC towards CEA proved instrumental in driving it forward and maintaining momentum, despite the many challenges. Maria adds, *“Finding a dedicated person, the right profile who can fight for it, makes a big difference. They also need to build a network of internal allies, who will help to mainstream it.”*
- **Make it official.** For HRC, the creation of a CEA policy and SOPs helped to set clear expectations and commitments within the organisation. Maria explains, *“In practice, having*

*these documents meant that CEA was fully accepted by the leadership. It formalised CEA as a cross-cutting approach and made it obligatory for all sectors and programmes.”*

- **Invest in continual training.** Regular trainings and internal advocacy at all levels built staff understanding and commitment to CEA. Adapting these trainings to the HRC context also helped to demystify CEA, and over time CEA became less associated with “extra work” and more understood as part of good programme quality and accountability. *“Internal trainings were really helpful to sensitise staff. They need to know what it is, why it matters, and how it links to their work, or it won’t happen. These sessions need to be ongoing as staff are always changing. Even if it’s just a 45-min introduction session for new staff or a 1-day training in an emergency,”* adds Vasiliki.
- **Choose the right approach for your National Society.** Maria notes, *“There is no one recipe for success. Every National Society is different, with its own dynamics. Whether to focus on policies or changing mindsets depends on the National Society. In our experience, try to combine a bit of both, but each National Society knows itself best and needs to chart its own institutionalisation course based on what will work for them.”*

## Implications

HRC’s experience demonstrates that National Societies can use emergency operations as a foundation for institutionalising CEA, but only if this work continues beyond the crisis. By investing consistently in policy, people, and practice, HRC entered the Ukraine response better prepared, more confident, and more accountable. This long-term approach shows that institutionalisation is not a one-off achievement, but an ongoing organisational journey. As Maria explains, *“Having the official documents doesn’t mean the job is done. You still need to push. Communities are always evolving and changing and that means we have to keep learning and adjusting too.”*

## Contact information

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