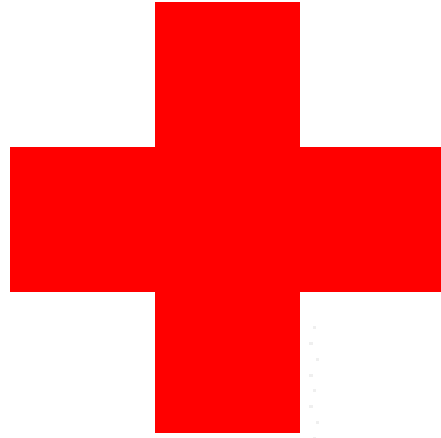


# **Synthesis of the Phase I Report**



**Canadian Red Cross  
Croix-Rouge canadienne**

## **Strategic Review and Analysis**

March 2003

## **Synthesis of Phase 1 Report**

### **BACKGROUND**

The Board of Governors adopted a Three Phase Planning Model at its meeting of September 23, 2001. The Board further approved Terms of Reference and the creation of a Strategic Planning Committee on December 9, 2001.

The Strategic Planning Committee set out a schedule and process at its first meeting in February 2002. It was agreed that the time frame would extend over a period of 18 months. A key milestone in the process is the Society's first General Assembly scheduled for the fall of 2003 at which time the Society's governance will establish the Mission and Ends for the next 3 - 5 year period.

Since early 2002, the Strategic Planning Committee has met on an ongoing basis in teleconference or in face-to-face meetings to review data being received and to consider the analysis and implications of the findings.

Branches, regions and zones were all encouraged to provide input and participate in Phase 1. A consultation format, notes for focus group leaders and discussion questions were developed to facilitate the gathering of information. The field consultation resulted in submissions being received from each of the four Zones. The Quebec Zone report was based on consultations involving 52 key informants - 26 volunteers from Zone and Regional Councils, and 26 staff. The Ontario Zone submission was based on the results of 171 questionnaires and 11 focus groups designed to solicit the input of a wide range of volunteers, staff, stakeholders and clients. In addition, information gathered from the Ontario Zone Odyssey Conference which engaged 150 delegates in discussion about the Society's strategic directions, was incorporated. The Western Zone report compiled data gathered by the Zone since 2001 as part of its own strategic planning exercise as well as sessions conducted at 4 out of 9 Regional Annual Meetings in 2002. Similarly, the Atlantic Zone conducted workshops or focus groups at each Regional Annual Meeting and provided both consolidated and individual feedback. In October 2002, in conjunction with the Society's Annual General Meeting, approximately 75 volunteers and staff including National Representative Members and Governors participated in workshops, the results of which, along with the Zones' Reports, were all considered in the final drafting of the Phase 1 Report.

Much of the information gathered from the field consultation complements data from other sources and has been reflected throughout the Report. Section 2.3.1, however, summarizes specifically the feedback received from internal consultation. Unfortunately, not all points of view can be brought forward. The Report reflects commonly repeated themes and represents a consensus of opinion.

The involvement of the Society's volunteers and staff at all levels of the organization demonstrates the principles of Good Governance Practices (GGP) at work. The time and effort on the part of all those who have, and will continue to participate in the strategic planning process, has been greatly appreciated and underlines the commitment of the Society's major stakeholder group, its volunteers and staff.

At various stages in the process, the Strategic Planning Committee looked at strategies and planning documents of the International Red Cross and Red Crescent Movement, our internal environment (in particular, the status of national programs), the results of a comprehensive external scan, a review of the philanthropic environment in Canada, interviews with multiple stakeholders, as well as the results of the field consultation including input from National Representatives and Governors at the Annual General Meeting workshops. In addition, the Society Management Team has on several occasions reviewed the material being gathered.

This Report of Phase 1, is a summary and analysis of the information gathered. It is a picture of the current situation and contains some business information that is confidential. It is designed to help members of the Strategic Planning Committee and the Board of Governors review the major trends and issues stemming from the external environment (including the threats and opportunities), and to have a better understanding of the Society's reality (including the organization's strengths and weaknesses). Each section of the Report puts forward strategic questions to be addressed in light of this information, and may also propose future directions for consideration.

## **METHODOLOGY**

The Board of Governors encouraged all Branches, service delivery units and community-based committees, along with Regional and Zone Councils to participate in Phase 1 of the consultation process by conducting workshops, focus groups or use other means of involving volunteers, staff and the Society's clients and stakeholders.

Three Phase Model Strategic Review and Analysis→ Review of Mission/Ends → Strategic Plan → Operational Plan/Budget
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### **Phase 1 Strategic Review and Analysis**

Organizational review (programs, structure, resources, etc.)

Environmental review:

- Canadian not-for-profit environment and immediate environment
- Broader Red Cross environment (ex: Strategy 2010, Strategy for the Movement, Plan of Action, pledges, etc.)
- Macro-environment (economy and political portrait, market trends, demographics, etc.)

Stakeholders' and Clients' expectations

**Phase 2      Review of Mission and Ends**

Review and enunciation of a Vision, Mission, Operating Philosophy and Ends

**Phase 3a      Strategic Plan**

Strategic Directions and Priorities for the years to come

**Phase 3b      Operational Plan/Budget**

Goals and objectives

Resources which support achievement of the Operational Plan including financial and human resources

**Timetable (revised)**

Phase 1      April 2002 - extended to March 2003

Phase 2      March 2003 – June 2003

Phase 3a      June 2003 – October 2003 (leading up to the General Assembly)

Phase 3b      November 2003 - March 2004 (linked to the budget process)

**EXECUTIVE SUMMARY**

Since April 2002, the Canadian Red Cross has undertaken an extensive consultation process as part of its Three Phase Strategic Planning Process. The Phase 1 Report is the result of widespread review and analysis, both within the Society and externally involving our partners, clients and other stakeholders. The review has encompassed the macro environment, the broader International Red Cross and Red Crescent environment as well as our own Canadian context. The purpose has been to draw a picture of the current reality wherein the Society delivers its services and carries out its mandate.

The report is intended to help members of the Strategic Planning Committee and the Board of Governors review major trends and issues, including the threats and opportunities facing the Red Cross, and to have a better understanding of the Society's present situation, inclusive of the organization's strengths and weaknesses. It raises strategic issues and questions, the answers to which will be the basis upon which the Society's mission will be defined, its vision enunciated and its strategic goals (Ends) determined.

The interest and involvement of our volunteers and staff at all levels of the organization has clearly demonstrated the principles of Good Governance Practices (GGP) at work. The time and effort on the part of all those who have, and will continue to participate in the strategic planning process, has been greatly appreciated and underlines the commitment of the our most important stakeholder group, the very core of the Canadian Red Cross – our dedicated volunteers and staff.

## Our Environment

There is growing concern about the limitations and the fragility of the planet which is impacted by global warming, environmental degradation and the onslaught of complex, technological and natural disasters, all of which create new and urgent challenges for humanity. Population increases and trends towards urbanization are resulting in a rise in the number of people living in overcrowded environments which strain infrastructures and resources such as food, water and energy.

Poverty and aging populations are putting pressure on health care and social welfare systems further strained by the influx of migrants, refugees and asylum seekers. The widening gap between the rich and the poor is not only evidenced materially, but also in terms of knowledge, education and human rights.

While globalization has both positive and negative impacts, it is clearly creating new challenges for those people who are of greatest concern to us, the disadvantaged and vulnerable. The number of internally displaced persons and refugees is increasing in south to north migration. Many countries are facing a health care crisis from HIV/AIDS particularly in Africa but also throughout the world. More lives will be lost due to increasing infectious diseases, the re-emergence of epidemics and non-transmissible diseases, as well the recent threat of bio terrorism.

Threats to human security due to the proliferation of small arms, the existence of weaker or failed states and the growth of non-state actors are breeding cultures of insecurity, violence and fear. International humanitarian law and humanitarian values are becoming less understood and harder to apply. While the emblems of the Movement are highly recognizable, the lack of respect is further reducing their protective power and leading to frequent abuse in the public domain. The job of humanitarian workers is becoming more dangerous. While there is increased interest in learning about International Humanitarian Law, there are a growing number of players etching out a role in IHL dissemination. IHL expertise is being developed in non-Red Cross sectors.

Domestically, violence, bullying, physical and sexual abuse have become more prevalent and there is an increased level of fear about and distrust between ethnic groups, cultures and religions.

The number and severity of natural and man-made disasters (both sudden and complex emergencies) has put an increasing strain on the Red Cross to respond domestically and internationally. This trend is likely to continue. The humanitarian environment is becoming more complex. The increasing number of humanitarian agencies leads to confusion and competition. Media coverage often distorts humanitarian priorities. The public and large financial donors are seeking transparency and accountability. Humanitarian aid is increasingly becoming 'political'.

The public perceives the Red Cross/Red Crescent Movement as one humanitarian entity, a perception which generates both moral and financial support. It is unique among international humanitarian organizations in that its components have access and have demonstrated the ability to respond to the needs of vulnerable people from within their communities at the grassroots level. On the other hand, the Movement is a complex

bureaucratic organization and the lack of cohesion has the potential of reducing the effectiveness of the whole. With increasing reliance on partnering and sponsorships, it is becoming difficult to retain identity as an independent, neutral and impartial humanitarian force particularly for National Societies carrying out their role of auxiliaries to the armed forces of their country.

Donors are demanding more accountability, and as with volunteers, are expecting transparency and integrity. More competition means more choice. Trends indicate that many larger donors are seeking more information to hold charities and nonprofits accountable for how dollars are spent. On the other hand, 'big charities' are not appealing as much as before to donors and partners.

Within Canada, the Canadian Red Cross is among the largest and most prominent humanitarian (not-for-profit and volunteer-based) organizations. However, there is intense competition and the Society has to be visible and provide meaningful and satisfying opportunities for its volunteers, its donors and partners.

With the rising costs of health care in Canada and increasing concerns about health globally, the challenge to the Canadian Red Cross is enormous. The various strategies of the Movement have identified community health as a priority and funders both domestically and internationally support this view. With the ageing population, home care is becoming a priority and is receiving more attention from both Federal and Provincial Governments. Changes in Canada's health care system are anticipated, but the impacts in terms of privatization, partnership, and funding are unknown. In addition, certain marginalized populations like refugees and asylum seekers, as well as aboriginal communities, have limited access to health care in general.

Within the Canadian philanthropic sector, core financial supporters seem to be giving more, as volunteers are giving less. Higher expectations on the part of donors and volunteers are creating imperatives for non profits and charitable organizations to adjust their traditional methods of fundraising and recruiting/retaining volunteers. Canada's ethnic diversity is not being represented, and two large younger generations are under-represented in the leadership culture and orientation of the voluntary sector, namely Canadians born outside of Canada and aboriginals.

In general, it is fair to say that charities are under the microscope, although the public believes that they are trustworthy and understand the needs of the people better than government. This should not be taken for granted, however.

Paid human capital is an increasing scare resource as the baby boomers retire and the active labour pool shrinks. Employers, once salaries are competitive, are having to find innovative ways to improve the working life of their employees in order to build cultures that support long term commitment to their organizations.

Charities are falling behind in the use of technology. Many organizations are not benefiting from or contributing to the creation/transfer of knowledge.

*In the months to come, the Canadian Red Cross intends to reflect on these findings. Should the Society participate and contribute to policy agendas to ensure that globalization moves in the right direction and supports efforts to reduce “gaps” such as in (poverty and literacy? If yes, how? Who are the “vulnerable”? The marginalized segments of the population? Or those themes like violence, abuse and injury, especially in aboriginal communities? What about rural and remote areas: are they adequately addressed? Is the Society adequately reflecting the changing demographics of Canada in its volunteers, staff and beneficiaries? Other issues like volunteer empowerment, citizen engagement and advocacy are on the list. Building “local” capacity and strengthening civil society on the international scene are great challenges in our international efforts. How can the Society find synergy between its domestic and international priorities? Should the promotion of mutual understanding, cooperation and non-violence, in times of both peace and conflict, with emphasis the fundamental principles, humanitarian values and International Humanitarian Law become an area of consideration for growth?*

#### An Organizational Review: our strengths and weaknesses

The **International Program (IP)** provides Canadians and the government with a channel to support the work of the International Red Cross and Red Crescent Movement. IP has broad range of services overseas and in Canada, such as public education focused on humanitarian values and issues related to war; Restoring Family Links (formerly Tracing), International Humanitarian Law, project management and support services such as for International Delegates who are currently deployed in more than 38 countries.

The International Program total dollar value fluctuates year to year as a result of public support and is directly influenced by environmental trends or incidences. Our international work is also influenced by the Canadian International Development Agency (CIDA) and by

the Department of Foreign Affairs and International Trade (DFAIT), as well as by general societal trends and concerns.

The International Program has had some success in focusing work on conflict-related issues, in building a portfolio of effective health interventions in poor communities in several countries and in developing a competent project management team. However, the program needs to build stronger project management systems to help assure that the Red Cross receives an appropriate portion of the international “market share” from the public and from CIDA.

During the past decade, through its **Disaster Services**, the Society provided much needed relief and recovery assistance to people devastated by both major and smaller scale disasters. The Society has enhanced its credibility (both public and at all levels of government) as an emergency response organization, although limited in parts of the West and the far North. For the vast majority of Canadians we are the organization of choice for domestic disaster fundraising.

Disaster Services has agreements with the several government departments, nine provinces and over 500 municipalities to support emergency management activities. Some of these are limited in scope and many do not provide the necessary resources to sustain operations or

build capacity. The Society has standardized its services and management of disasters, increased its efficiency and established an environment of best practices across the country. Strong relationships with a number of corporate partners have been developed. Approximately 7,000 volunteers are trained yearly. However, to continue to develop, (incorporating new ways of communicating and training volunteers in remote locations via distance education) requires significant financial and human resources.

The Society has developed a national personal emergency preparedness program for school children, and although it has long-term potential for developing a culture of disaster preparedness in Canada, additional support from the provincial government and local school boards is needed to support its ongoing development and delivery.

Several other humanitarian relief organizations enhanced their domestic relief capacity and have the potential to assume a major role in both disaster fundraising and services. There is every reason to believe that because of the increasing number and complexity of disasters, the Red Cross will be called upon to respond more frequently in Canada and around the world.

The Canadian Red Cross is a leader in **First Aid** with over 20 training programs for all ages and skills. Delivery methods have been a combination of Authorized Providers and Direct Delivery. Since the implementation of the Authorized Provider program, the program delivery statistics have grown and demonstrated a more cost-effective means of servicing a greater number of communities. Training statistics have more than doubled in 12 years; yet, the Society still only captures approximately 23% of the First Aid & CPR training market. Competition has been growing in the workplace first aid market with the number of recognized providers doubling in 2 years. The Society is excluded from the market by legislation in two provinces. More research is needed around the benefits and effectiveness of first aid training (particularly in the new fields like public access defibrillation (PAD) and automated external defibrillation (AED) training) and potential complementarity of the First Aid program with injury prevention.

The Canadian Red Cross is also a leader in water safety education and since 1946, more than 20 million Canadians have been taught how to swim and prevent aquatic injuries through **Water Safety Services**. Drowning statistics have been on the decline since the Society began its Water Safety program. Several trends have and will continue to impact Water Safety: pressure on municipalities to produce better bottom lines has resulted in a need for less expensive programs; for the same reason, schools can no longer afford to offer programs that provide little return. This has given rise to competition with programs which are simpler to implement, competency based, and less expensive. The '*On Board*' Program provides a unique opportunity for obtaining a Pleasure Craft Operator's Card. It is anticipated that this market will increase with 5-6 million boaters requiring cards in the next 6 years.

The **RespectED Program** responds to child and youth maltreatment with prevention education programs for children, youth and adults. The effectiveness of prevention education is well documented and since 1984, RespectED has expanded. In 2001-02, RespectED reached approximately 120,000 youth and 30,000 adults in 8 provinces and all 3 territories, currently being offered in more than 200 communities. Quebec and Nova Scotia are in the initial planning phases. National and local agencies have partnered with RespectED to develop materials, participate in training programs, deliver presentations and workshops, and fund initiatives. The challenges include having enough resources to meet the demand for

services, including the up front investment required to introduce the program so that ongoing revenues can be established. Another challenge is the perception, internally and externally, that we are duplicating or competing with other local programs. This perception is dispelled during the community needs assessment and selection of the elements to be delivered to specific audiences. Canadian Red Cross has the only national abuse prevention program in the World and support has been requested from both the Federation and other national societies. The potential for the program to experience rapid expansion and attain financial sustainability is very high in this environment.

The **Community Health Services (CHS)** Program (Personal Support in Ontario Zone) is the largest among community services in the province and employs over 3,300 visiting staff. The program represents significant economic exposures and calls heavily upon management time while the profit margin is quite small.

The contractual arrangements with provincial authorities are very rigid and uncompromising. As such there is little opportunity for providers to distinguish themselves as unique in service delivery. Out of fiscal necessity, the CHS has focused its efforts on the efficient delivery of support services. However, for many providers, the opportunity of long-term survival may not be possible due to the impossibility of economies of scale. Break-even overheads are achieved with two million hours of service. There is an expectation that many providers will not be able to continue operations under current circumstances. As such, the CHS and other large volume providers who have achieved cost-effective strategies may be in a position to increase market share.

‘Home Partners’ in the Atlantic Zone accounts for more than 85% of the total budget, with an estimated low profitability although higher than in Ontario. It is a fully integrated program which offers a full spectrum of care through a 24 X7 Call Centre.

Beyond the national programs, Red Cross volunteers and staff respond to community needs by offering hundreds of **Community Initiatives** at the local level to develop healthier communities. Community initiatives are designed and tailored to the needs of individual communities and special interest groups. They are both preventative and responsive, and though they vary from one region to another, they share the same basic goal of helping the vulnerable.

There are a large number of Red Cross community initiatives across Canada which attract and maintain the active interest of a dedicated volunteer workforce. Most of them depend on local fund raising. Where that is not possible, grants sometimes become the source of funds, either from foundations or government. When the latter occurs, sustainability is not present and needs are often created and left wanting when funding stops. Unless self-financed in both the short and the long term, there is a great risk of diluting existing resources which impairs national priorities or creates unbudgeted dependency on operations or overhead cost. In some places, programs are guaranteed funding through United Way and are subject to failure if United Way priorities change. Others are funded by government contracts acquired through the competition process. These are also in jeopardy if the contract is lost or not renewed. There are often other risks associated with services provided under contract, such as ambulance services. Although not wide spread, in some locations youth groups are flourishing community initiatives. The questions beg however to what extent are we too dispersed and are these programs financially viable?

**Fund Development:** Fundraising revenues have increased over the past few years while United Way revenues have decreased. Only 3% of charities receive donations in excess of \$5 million and the Canadian Red Cross is in this category. Of this group 42% are teaching institutions and hospitals. The Canadian Red Cross is considered to be the lead agency for domestic and international disaster fundraising with the public responding to appeals donating approximately \$100 million in 5 years. The Society receives support from some 250,000 direct mail donors although too few of them give on a monthly basis. Reliance on gaming has been and continues to be risky. There are some revenues from bequests; but this market has not been strategically targeted in all Zones.

The Society has challenges in reporting its financials in a uniform and consistent manner as well as to benchmark its practices. Knowing our donors better is still a priority.

**Resources:** The Society's current financial picture is fragile with an increased challenge in the 2002/03 fiscal year. The majority of funding for operations is received through fee for service activities in Homecare, First Aid and Water Safety. This represents 63 % of the operating budget. The remaining funding is split equally between internal fund raising capacity and reliance on United Way and other sources. The majority of expenses incurred by the Society are related to human and volunteer resources required to provide both services and support. Funds received from the government and other sources for International programs are expended as monies are received or contractual arrangements are put in place. The loss of its reserves has added to the Society's fragility with very little cushion to finance operating losses.

There are some 1200 – 1400 staff not including Homemakers and an estimated 63,500 volunteers. Reporting on the number of volunteers has to be modernized using IT systems which is underway. The management of the Society's human resources is being standardized across the country. However, the major challenge is responding to a shrinking labour market.

**Information Systems and technology:** The Society has tried to streamline its management structure, develop and implement Society-wide information systems in the areas of finance, financial donors and volunteers. However, information for management/decision-making processes is still not effective enough or uniform due to inconsistencies and progress to be made in standardization. A fund raising and volunteer management system is being implemented across the country to provide tools for recruitment, for fundraising and for data collection; however, it is not fully operational in all regions. The Society has a comprehensive website which is being adapted for local information and input. Several other projects have also been implemented to provide consistent systems for national programs including training based on internet technology for access from remote locations.

**Management:** A streamlined management structure has been introduced and some redundancies have been eliminated. However, it is still complex and multi-layered with reporting lines that are sometimes unclear. The recurring financial difficulties require management to continue the review and implementation of administrative cost-saving initiatives as regards how services are managed, where, and by whom. In order to right size the organization so that expenses do not exceed revenues, further consolidation of administration and support services is required. Accountability needs further enhancement. The Society has moved, and continues to move towards standardization of management practices and amalgamation of processes.

**Governance:** There are a couple of outstanding issues not addressed in the governance review and by-law revisions process, the issue of membership and the organization/parameters of the General Assembly. As GGP rolls out across the Society, the perception remains that GGP is a top-down approach. There seems to be a lack of clarity in the reporting lines/relationships between the different councils, and the modus operandi is awkward. Similarly, some questions of interpretation and practical application have arisen. Although GGP does represent the best option at this time, it is not easy to implement and may take a few years to yield the expected results.

*Is Disaster Services truly the priority program of the Canadian Red Cross? If so, and given the Society's wide range of services and activities, how can the Society remain focused? Issues like the proper balance between health care and the Society's other more traditional services are on the table. What should be the thread that links programs, both domestic and international? Do First Aid, Water Safety, ResepctED and Community Health Services fit within our mission and role? Should they be amalgamated or adapted under one generic line of business such as 'Injury Prevention'? Are there opportunities to fill a niche given the aging population? Are there opportunities to offer services to other providers and form strategic alliances? On the international front, can or should the Society build its capacity to do more bilateral work? How can the Society ensure that it is accessing its share of domestic and international funding from the private and public sectors? Within Canada, how can community initiatives be made self sufficient and more responsive to vulnerable groups at the community level? What role can youth play in these initiatives? Does the Society have the right management structure and process for a volunteer organization? How can the Society better utilize and leverage its volunteers? How should the Society strengthen its fundraising infrastructure and redress the status of its reserves. What steps can the Society take to use technology as a tool to improve organizational performance, realize efficiencies, and ensure accountability and transparency? Is our governance model too heavy and does it allow for Branches and Regions to fully participate - or, are there too many layers of governance? Does the Society have the right size of Board and Councils, with the right people?*

#### Views and Expectations of our Stakeholders

Our **Volunteers and Staff** underlined the importance of maximizing the 'power of humanity' by developing and maintaining a strong volunteer base through sound volunteer resources management. Youth and seniors were identified as groups which could be better tapped, recognizing that in the face of declining volunteerism generally, there is increased competition for volunteers.

There is a feeling that the potential of our volunteers is not being fully realized and in some locations, may be being met with resistance or reluctance. There remain challenges in defining opportunities for volunteers and in recruiting, training, evaluating and recognizing them.

Important to our volunteers and staff is service to ageing Canadians inclusive of its implications in health care and human dignity-related issues (abuse, access to services, poverty, advocacy, etc). Concern was expressed about the 'downloading dilemma' and

cutbacks in healthcare, education and social services - fewer dollars to meet growing needs of the vulnerable.

The promotion of humanitarian values was seen as an important element to be incorporated into all Red Cross services and the need for strategic leadership aimed at influencing behaviour at the community level.

Volunteers and staff reported that some of our stakeholders believe the organization is overly bureaucratic, with a heavy infrastructure, overhead costs and that emphasis on 'national' programs makes it difficult to rationalize fundraising for direct services to clients. Similarly, this discourages or prevents community initiatives in response to local vulnerabilities. Some volunteers have the impression that governance at the community level is still lacking which has implications in terms of influence and image at the grassroots.

There is wide acknowledgement that resources are spread too thinly across the Society, both vertically and horizontally – that the organization is trying to do too many things with shrinking resources. It was recognized that financial stability and restructuring the organization in light of its Mission and Ends is essential. Although improved, internal communications must remain as high a priority.

In response to growing competition, some feel that broadening Disaster Services to encompass non-traditional assistance could be a business strategy. Similarly, some recommend that the Society become a national and international leader in injury prevention – injuries having been identified as a growing major public health concern.

As regards the view of the **General Public**, recent polling tells us that even in light of charges being laid against the Society, 1 out of 5 Canadians name the Canadian Red Cross as the charitable and humanitarian organization which first comes to mind. 73% of those polled had either a 'very positive' or 'positive' view of us which reinforces that the Canadian Red Cross today is still one of the most respected and recognized humanitarian organizations in Canada. But it is still being associated with managing blood, the polling results being 57%. Although Disaster Services and International Programs are linked to the Red Cross, the general public is not aware of the scope of our other services. Often, the Society is seen as a government-funded agency.

From consultation with our **Partners**, the most significant message which emerged was that the image of the Canadian Red Cross is unclear. The Society has made concerted efforts to appropriately align itself with similar organizations/corporations and partnerships/strategic alliances have been effectively established in the areas of Disaster Services, RespectED, Water Safety/First Aid, and International Programming. This not only provides new resources (financial and human), but often introduces the Society to a wider range of complimentary activities and opportunities. Feedback from partner interviews indicates a certain degree of concern about the vast menu of our programs. On the international scene, partners prefer 'partnership' to 'inter agency cooperation' as it is often the case.

From our consultation with **Clients and Donors**, we know that the Red Cross is very much top of mind for Canadians. The Society has a practice of designating funds in accordance with its donors' wishes. Trends are indicating that donors are demanding more accountability and transparency. Our Finance and Fund Development Departments are working hard to ensure that we comply and the Society is working hard to be fully compliant with Canadian

Centre of Philanthropy guidelines on Fundraising. Trends also show that donors want more involvement and seek a say in how their donations are being used, often linking the relationship to business objectives. Many private and community grant makers want closer relationships with grantees, meaning more involvement in strategic development and program design. The Fund Development group is striving to ensure that fundraising costs are maintained according to best standards. While the Society is meeting its ethical fundraising requirements, it has to enhance its reporting systems for funders and foundations as well as partners and agencies.

*There was a great deal of similarity in the strategic questions raised during the review of the Society's external and internal environments and those that came forward from the consultations with our stakeholders, most importantly, our volunteers and staff. If we accept the international mission of the Federation, to respond to the needs of the vulnerable, does it not follow that there be mechanisms, capacities, and resources to achieve this at the community level? How can the Society better invest in its human resources, maximize the potential of its volunteers and mobilize the power of humanity? What strategies should be developed to tap into youth and senior populations. Is there a role to play in advocacy, promoting tolerance and human dignity? What more is the public expecting from the Canadian Red Cross? Have we fully assumed our unique position in terms of IHL and humanitarian values? What value do we add to the voluntary sector in Canada and are we truly leaders in the voluntary sector? Is maintaining effective partnerships essential to ensuring continued support? How do we ensure that partnering does not jeopardize our Fundamental Principles? Is the Society seen as an invaluable Canadian asset by our clients and donors? What kind of Red Cross do our donors and clients expect us to be 10 years? How can we be seen as a truly transparent organization in terms of accountability and reporting?*

These are only a few of the strategic questions that resulted from the Review and Analysis Phase of the Society's strategic planning process. The challenge that remains for the Strategic Planning Committee and the Board of Governors is to determine which of them are the most important to answer and which are key in establishing a set of *Ends* or strategic goals for the next 3 – 5 years. As during Phase 1 of this process, the Board is very interested in hearing from the Society's volunteers, staff, and other stakeholders and welcomes comments to help it in this important task.