

# OPERATIONS

# THE ICRC AROUND THE WORLD

AFRICA

AMERICAS

ASIA AND  
THE PACIFIC

EUROPE AND  
CENTRAL ASIA

NEAR AND  
MIDDLE EAST

PROTECTION	Total
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>	
<i>Restoring family links</i>	
RCMs collected	109,219
RCMs distributed	95,423
Phone calls facilitated between family members	479,358
People located (tracing cases closed positively)	4,788
People reunited with their families	1,074
<i>of whom unaccompanied minors/separated children</i>	968
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>	
<i>ICRC visits</i>	
Detainees visited	928,814
Detainees visited and monitored individually	25,736
Number of visits carried out	4,725
Number of places of detention visited	1,596
<i>Restoring family links</i>	
RCMs collected	20,558
RCMs distributed	10,685
Phone calls made to families to inform them of the whereabouts of a detained relative	33,407



ICRC headquarters



ICRC delegation



ICRC regional delegation



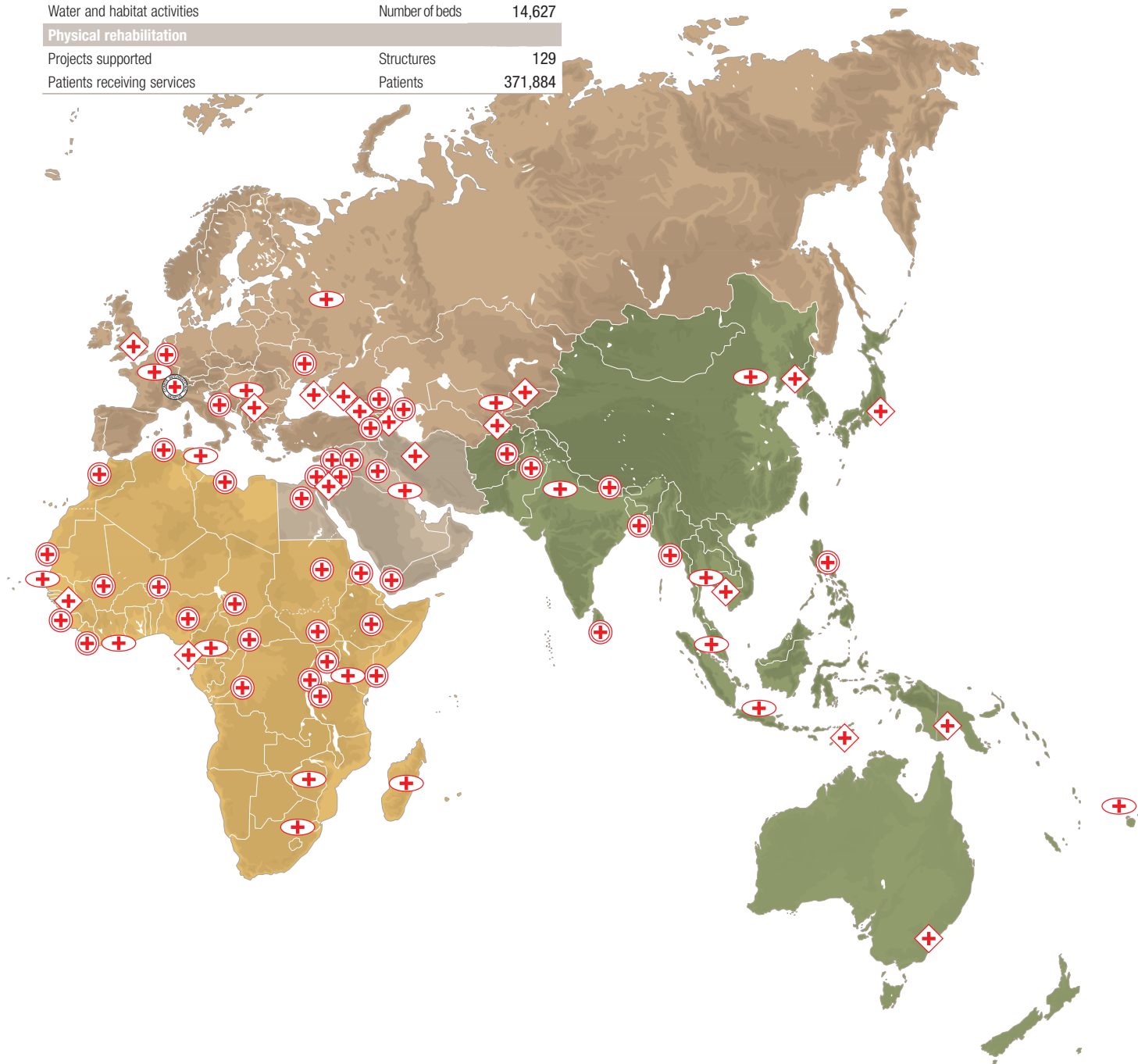
ICRC mission

ASSISTANCE		Achieved
<b>CIVILIANS</b> (residents, IDPs, returnees, etc.)		
Economic security (in some cases provided within a protection or cooperation programme)		
Food commodities	Beneficiaries	13,001,361
Essential household items	Beneficiaries	5,222,659
Productive inputs	Beneficiaries	3,280,542
Cash	Beneficiaries	788,491
Vouchers	Beneficiaries	87,863
Services and training	Beneficiaries	1,622,666
Water and habitat (in some cases provided within a protection or cooperation programme)		
Water and habitat activities	Beneficiaries	31,026,588
Health		
Health centres supported	Structures	286
<b>WOUNDED AND SICK</b>		
Hospitals		
Hospitals supported	Structures	459
Water and habitat		
Water and habitat activities	Number of beds	14,627
Physical rehabilitation		
Projects supported	Structures	129
Patients receiving services	Patients	371,884

EXPENDITURE IN KCHF	
Protection	219,397
Assistance	958,270
Prevention	144,057
Cooperation with National Societies	84,108
General	6,785
<b>Total</b>	<b>1,412,618</b>
<i>Of which: Overheads</i>	<b>85,919</b>

IMPLEMENTATION RATE	
Expenditure/yearly budget	89%

PERSONNEL	
Mobile staff	2,099
Resident staff (daily workers not included)	11,332



# OPERATIONAL HIGHLIGHTS



S. Rubio/ICRC

Dominik Stillhart, Director of Operations.

## CONFLICT ENVIRONMENTS AND CHALLENGES FOR HUMANITARIAN ACTION

In 2015, the lives of millions were torn apart by turmoil and endless cycles of armed conflict and other situations of violence, from the Syrian Arab Republic (hereafter Syria), Iraq and Yemen, to South Sudan, the Democratic Republic of the Congo (hereafter DRC), Burundi, the Central African Republic (hereafter CAR) and Nigeria, through to Ukraine and Afghanistan. It was a year in which simultaneous large-scale emergencies had far-reaching humanitarian ramifications and precipitated challenges to the delivery of neutral and impartial humanitarian assistance.

Over the year, the crisis in the Middle East and its adverse impact on civilians in several countries became even more acute and dominated the international agenda. In Iraq and Syria, the situation further deteriorated, owing to a complex patchwork of ideological and geopolitical interests – casualty numbers rose every day, and millions continued to be displaced internally or across borders, putting pressure on host communities. Hundreds of thousands of civilians were beyond the reach of any humanitarian aid as a result of problematic access. In Yemen, the conflict became increasingly complex as tensions rose between regional powers.

The further spread of the Islamic State group's influence, its rivalry with al-Qaeda, proxy wars, and the sectarian divide becoming a driver of conflict heralded a confrontation on a global scale, evolving from the dynamics of the post-2001 attacks period and the Arab Spring fall-out. Despite the efforts of a number of States, including those involved in international coalitions, the Islamic State group remained in control of vast territories in Iraq and Syria; other radical elements continued to pledge their allegiance to the group across the globe, carrying out a number of devastating attacks. This posed an enormous challenge for States trying to protect their citizens from home-grown radicalization and the return of people who had joined the fighting abroad, and for humanitarian and human rights organizations working in these contexts.

Protracted crises likewise continued to engender economic, social and environmental fragility, with attempts at recovery often stymied by fresh outbursts of violence and the absence of viable political solutions. In Afghanistan, the CAR, the DRC, Somalia and South Sudan, for instance, people have endured some form of conflict, extreme vulnerability or multiple displacements for much of their lives. With infrastructure and basic public services destroyed or no longer functioning, humanitarian organizations have, in many contexts, had to fill vital needs gaps leading to development reversals.

On a more positive note, peace negotiations to end the conflict in Colombia – one of the world's longest-running at just over 50 years – made progress on key issues.

In some contexts, the impact of transnational and urban organized or gang-related crime spelled growing humanitarian consequences for civilians – for example, El Salvador and Honduras continued to have the highest murder rates globally.

This was the backdrop in 2015 for the significant challenges facing the humanitarian community. With increasing disregard for the most fundamental principles of humanity in the conduct of hostilities – evidenced by civilian casualties of indiscriminate attacks, the targeting of medical facilities and staff, extensive destruction beyond military necessity – and difficulties in engaging with stakeholders on respect for IHL principles, enhancing the protection of people not or no longer participating in the fighting became a matter of crucial political and humanitarian concern.

Responding to the impact of large-scale, multiple displacements was another challenge. According to UNHCR, by the end of 2014 the number of people forcibly displaced had risen to a staggering 59.5 million globally. Most of the increase was the result of the conflicts in the DRC, Iraq, Nigeria, South Sudan and Syria, which accounted for 60% of new displacements. The trend continued in 2015. The influx into Europe of migrants, including refugees and asylum seekers, risking their lives to escape conflict or seek better prospects, was mirrored by flows in other parts of the world, as hundreds of thousands did the same across the Arabian Peninsula, Central America, South and South-East Asia and the Pacific.

## OPERATIONS: REVIEW, APPROACH AND THEMATIC CHALLENGES

With its partners within the Movement, the ICRC responded to emergencies and ongoing armed conflicts or other situations of violence, working to ensure that the needs of millions whose lives were suddenly devastated or who continued to suffer long-term consequences – the loss or detention of loved ones, chronic displacement and lack of basic services – were effectively addressed. With armed conflicts and other forms of violence increasingly affecting urban communities, whether in terms of higher casualty numbers due to population density or essential services that no longer functioned, the ICRC sought to further improve its understanding of and respond to the escalating scope and complexity of needs.

The ICRC stepped up its response in several high-profile contexts – notably Iraq, South Sudan, Syria and Yemen – while maintaining significant operations in others, including Afghanistan, the CAR, Colombia, Mali, Myanmar, the Philippines, Somalia and Ukraine.

It sought to live up to the responsibilities and pressures resulting from an initial field budget of CHF 1,379.3 million and an additional CHF 210.3 million from 11 budget extensions – for Iraq, South Sudan, Sudan, the Lake Chad region (Nigeria, Niger, Chad and Cameroon – the last covered by the Yaoundé regional delegation), Libya, the Ukraine crisis (covering Ukraine and the Moscow regional delegation) and Yemen. As part of the emergency response to the Yemen crisis, 29 people on the ICRC's rapid deployment roster and five National Society staff members were deployed. Throughout the year, a number of task forces were activated for other emergencies. Regional ICRC approaches and coordination were of crucial importance, for instance in the Great Lakes region following the crisis in Burundi, and in the Lake Chad region as civilians fled the conflict in Nigeria. In Libya, owing to the security conditions it was particularly difficult to obtain access to the populations affected; nevertheless, the ICRC, together with the Libyan Red Crescent, managed to respond to emergencies.

In responding to needs in both acute and protracted crises, the ICRC sought to reinforce and diversify its multidisciplinary approach according to peoples' vulnerabilities, paying specific attention to children, women, victims of sexual violence, detainees, persons with disabilities, IDPs and migrants. As much as possible, it involved the beneficiaries at all stages – from assessment to implementation, monitoring and evaluation. Its responses were also adapted to indirect effects, such as from prolonged restrictions on movement and pressure on host communities, or less visible suffering, such as the long-term psychological impact of sustained violence, exposure to severe ill-treatment or living with the disappearance of a loved one. New approaches to improve impact and efficiency were also encouraged, with various pilot projects being initiated, including a system for the quick deployment of hotlines to enable beneficiaries to connect with the ICRC in the field, the development of a multi-stakeholder portal to source energy and lighting for humanitarian projects, the deployment of a solar-powered mobile-phone charging station for separated family members in Burundi, and electronic beneficiary registration and distribution tools in the Philippines.

The ICRC's working methods, notably its neutral, impartial and independent approach to humanitarian action, and its confidential dialogue, were crucial in enabling access and proximity to those whom it sought to assist, especially in operationally difficult or isolated areas. In some contexts, the ICRC continued to be one of the main international organizations (Yemen, northern Mali, northern Nigeria, opposition-controlled areas in eastern Ukraine) or the only one present (Crimea, South Ossetia). However, despite its working methods and its efforts to engage in dialogue with all parties to the conflict, security management remained a major challenge for the ICRC and its field teams, with the tragic loss of three colleagues in Mali and Yemen, and four abducted staff members still being held in Syria and Yemen. National Societies also suffered a high death toll of staff members and volunteers: by the end of 2015, for example, eight had been killed in Yemen, and in Syria, 50 from the Syrian Arab Red Crescent and eight from the Palestine Red Crescent Society had lost their lives since the beginning of the conflict there in March 2011.

A vital aspect of the ICRC's operations was to maintain existing relationships with all stakeholders, forge new ones and create networks across political, ideological or religious divides, so as to foster not only acceptance but also dialogue on key protection concerns. These relationships and understanding of the ICRC's neutrality enabled the organization to act as an intermediary in a number of contexts, including in the exchange or transfer of detainees and weapon-wounded patients.

Equally vital were partnerships across programmes – primarily with Movement components, but also with local organizations. The International Federation, the National Societies and the ICRC sought to strengthen cooperation and coordination with the aim of delivering an improved Movement response, particularly in large-scale crises, as was the case in South Sudan and Yemen, and during the Ebola outbreak, the Nepal earthquake and the Myanmar floods.

The ICRC continued to implement its Health Strategy 2014–2018, with delegations making a concerted effort to improve their response to needs for comprehensive hospital care, health care in detention and physical rehabilitation. The continuum-of-care approach, from first aid to hospital care to physical rehabilitation, was reinforced in more contexts, for instance in the CAR, the DRC, Myanmar and South Sudan; mental health and psychosocial support were increasingly being integrated across all health activities. A few highly publicized attacks against health-care facilities and staff, notably in Afghanistan, South Sudan, Syria and Yemen, kept this issue in the spotlight. Over 60 ICRC delegations worked with authorities and partners to strengthen protection for health-care delivery in emergencies, in line with the objectives of the Health Care in Danger project.

In 2013, the ICRC undertook a commitment to strengthen its response to sexual violence; since then, field delegations have increasingly endeavoured to integrate the issue into their analyses and responses. The ICRC's holistic, multifaceted approach included psychosocial support, medical treatment or referrals for such, and material assistance, reinforced by confidential dialogue with weapon bearers and community awareness campaigns. Activities of this kind were carried out by delegations in the CAR, Colombia, the DRC, Mali and South Sudan. In the DRC, for example, thousands of victims of sexual violence received psychosocial care at ICRC-supported counselling centres; some of them were referred to health facilities for further treatment. Activities related to sexual violence were being studied/developed in several new contexts, such as Egypt, Kenya, Lebanon, Nepal, Nigeria, Papua New Guinea and Syria. Reinforced training and capacity building have helped ICRC staff to achieve these ambitious objectives.

In response to the specific vulnerabilities of migrants along the world's main transit routes, the ICRC worked with National Societies across borders to ensure that thousands received support, enabling them, for example, to access health care, address protection concerns or re-establish family contact.

The humanitarian community as a whole continued to face numerous challenges and perception difficulties in some contexts. This was accentuated by the drive by some States to “nationalize” aid, thereby challenging the importance of principled humanitarian action, or by the fact of aid being used for political purposes by parties to a conflict. The humanitarian sector was also

overstretched, with a gap emerging between planned responses and the support available from donors, given the number of concurrent crises.

## AFRICA

Across a large part of the African continent, stable contexts were few and far between. While maintaining its operations in countries such as the CAR, Côte d'Ivoire, the DRC, Ethiopia, Mali, Niger and Somalia, the ICRC responded to urgent needs in several other contexts and to the spillover effects in neighbouring countries. For instance, while Nigeria's population bore the brunt of the violence in the north, Cameroon, Chad and Niger also found themselves facing attacks and a refugee influx in the hundreds of thousands. The ICRC therefore strengthened its presence in all four countries, developing a coordinated regional response with the National Societies.

April saw the worst turmoil in Burundi since the twelve-year civil war ended in 2005, prompting concerns that the wider Great Lakes region would be affected. Over 200,000 fled to the DRC, Rwanda and the United Republic of Tanzania. The ICRC supported the Burundi Red Cross in maintaining its first-response capacity, helping it treat people wounded in the unrest and/or evacuate them to hospital. The ICRC also provided family-links services to separated family members and visited detainees, including those held in relation to the situation.

Many in South Sudan have lived the last two years on the run – from the dangers of warfare and sexual assault and in search of food and health care. Despite the peace agreement, over 2 million people have been displaced internally or to neighbouring countries, and hundreds of thousands continued to face insecurity, including severe food shortages. South Sudan was one of the ICRC's largest operations; key activities involved food distributions, provision of health care, water and sanitation projects, and visits to detainees.

As an official observer to the African Union, the ICRC worked to raise humanitarian issues of concern, to enhance support for ICRC operations across Africa and to promote greater recognition of IHL and its integration into African Union decisions and policies, while building relations with NGOs and UN agencies based in Addis Ababa.

## AMERICAS

Colombia remained the largest ICRC operation in the Americas, with activities centred on addressing the consequences of the country's long-running armed conflict and other violence. Despite progress in the peace dialogue, the situation remained extremely precarious for millions, with some 15% of the population still displaced. ICRC support focused on the most vulnerable IDPs, civilians affected by weapon contamination, women exposed to sexual violence, missing persons, and people deprived of their freedom. The ICRC also continued to act as a neutral intermediary in the release of people held by armed groups.

In Central and South America, the ICRC, often with the local National Society, assisted people affected by organized armed violence, which has resulted in tens of thousands of victims and affected the regular provision of essential services. Of note was the successful culmination of the "Rio Project" – a partnership between the Brazilian authorities and the ICRC aimed at supporting communities affected by armed violence in certain

neighbourhoods by facilitating their access to basic services, including health care, and helping them put in place measures to cope with the violence. Some aspects of the project have been replicated by the Brazilian authorities in other municipalities in Rio de Janeiro and another state, with regular support from the ICRC.

Across Central America, support was given to thousands of migrants who risked their lives on the dangerous journey north and to the families of those missing. The ICRC and the National Societies in El Salvador, Guatemala, Honduras and Mexico encouraged migrants to take measures for their well-being, and provided emergency assistance and opportunities to contact their families along the way. In a number of countries, the ICRC visited detainees and supported the authorities' efforts to improve prison conditions and alleviate overcrowding.

## ASIA AND THE PACIFIC

South Asia continued to be an important focus of ICRC operations in this vast region. Afghanistan, in particular, experienced the bloodiest year in recent years; the ICRC continued to provide essential medical support, clean water and other assistance to those most in need, and visited thousands of detainees.

In Myanmar, the ICRC worked to assist those affected by conflict in the north-east and communal violence in Rakhine state. It visited detainees throughout Myanmar and engaged in regular dialogue with the authorities on detainee welfare issues. After floods hit the country and displaced over 1.5 million people, the ICRC worked with the Myanmar Red Cross Society and the International Federation to respond to urgent needs.

In addition to emergency aid, an important area of response was physical rehabilitation for people disabled by conflict, mines or unexploded ordinance, or owing to the lack of health-care services. In 11 countries in this region, including Afghanistan, Bangladesh, Cambodia and Pakistan, the ICRC supported some 50 physical rehabilitation projects, providing prostheses and orthoses, micro-credit loans and vocational training, all of which promoted greater social inclusion. A new initiative, Enable Makeathon, was launched in India to challenge designers, engineers and entrepreneurs to develop affordable assistive devices.

In South and South-East Asia and the Pacific, hundreds of thousands of migrants faced terrible conditions. The Andaman Sea crisis, involving thousands of migrants from Bangladesh and Myanmar dangerously stranded in boats, spotlighted this regional problem. Loss of family contact was one consequence, and the ICRC and National Societies did their best to reunite family members separated from each other.

The ICRC delegations in China, Indonesia, Malaysia and Thailand, and offices in Australia and Japan, played an important role in deepening the organization's dialogue with the authorities on humanitarian priorities and approaches.

## EUROPE AND CENTRAL ASIA

The humanitarian consequences of the conflict in eastern Ukraine remained extremely serious: by UN estimates, over 2.5 million had been displaced and over 9,000 killed since the fighting erupted. The ICRC was able to assist thousands on both sides of the front lines, and worked to secure access to people held in relation to the conflict. Some people returned to find their homes damaged

---

or destroyed. The ICRC provided construction materials, food, hygiene items and other basic necessities to help them get through the long winter.

As hundreds of thousands of migrants arrived on Europe's shores and borders, the ICRC bolstered its support for National Societies in the countries most affected, focusing on its key areas of expertise: monitoring detainees' treatment and living conditions, restoring family links, support for forensics and clarifying the fate of missing persons. In several contexts, notably in the northern and southern Caucasus and the Western Balkans, the ICRC pursued its long-term efforts to address the issue of missing persons and the consequences for their families.

The delegations in Brussels (Belgium) and Moscow (Russian Federation) provided essential forums for dialogue and engagement, particularly on humanitarian concerns relating to major crises, with bodies/institutions of regional/international influence, including the Commonwealth of Independent States, the Collective Security Treaty Organization, the European Union and NATO.

## **NEAR AND MIDDLE EAST**

Much of the world's attention centred on the Middle East, where relentless hostilities and unimaginable atrocities took place, with millions of people subjected to enormous hardship and suffering. The ICRC provided support for those who remained in the countries concerned and those who had fled to neighbouring countries.

Syria remained the ICRC's largest operation worldwide. From its bases in Damascus, Aleppo, Homs and Tartus, the ICRC worked closely with the Syrian Arab Red Crescent to respond to needs in both government- and opposition-controlled areas: millions received food and household essentials, and over 15 million benefited from water and sanitation projects. Detainees held at nine central prisons were visited by ICRC delegates.

In Iraq, the situation did not improve – 2015 saw the highest number and fastest rate of people displaced in the world, with, reportedly, over 3 million people fleeing their homes as a result of intense fighting between Iraqi government forces and armed groups, including the Islamic State group. Across the country, the ICRC assisted hundreds of thousands of the most affected, including those displaced, by distributing food and essential items and facilitating their access to health care; it also visited tens of thousands of detainees. In addition to working on the issue of people missing in connection with the current situation, the ICRC continued its work related to the Iran-Iraq war.

Activities in Israel and the occupied Palestinian territory and in Yemen ranged from emergency response to longer-term programmes. Yemen in particular saw a sharp deterioration in the situation as the hostilities intensified in March 2015, with indiscriminate attacks on health-care facilities and civilians struggling to obtain basic necessities. The ICRC delivered life-saving assistance and acted as a neutral intermediary on several occasions, including in the evacuation of the wounded and in the transfer of detainees across front lines.

The delegations in Bahrain, Egypt, the Islamic Republic of Iran and Kuwait sought to engage in deeper dialogue on humanitarian priorities and approaches with various stakeholders in the region.

# ICRC OPERATIONS IN 2015 – A FEW FACTS, FIGURES AND RESULTS

## PRESENCE

In 2015, the ICRC was present in more than **80 countries** through delegations, sub-delegations, offices and missions. Its delegations and missions were distributed throughout the world as follows:

Africa	31
Americas	15
Asia and the Pacific	19
Europe and Central Asia	18
Near and Middle East	10

## PERSONNEL

The average number of ICRC staff in 2015 was as follows:

Headquarters	969
Field: mobile staff	
- Mobile staff	1,964
- National Society staff	103
- Resident staff on temporary mission	40
Field: resident staff	11,430
<b>Field: total</b>	<b>13,537</b>
<b>Final total</b>	<b>14,506</b>

## FINANCE

ICRC expenditure in 2015			
In million	CHF	USD	EUR
Headquarters	202.2	209.8	188.2
Field	1,412.6	1,465.7	1,314.7
The sub-total comes to CHF 1,614.8 million, from which field overheads (CHF 85.9 million) must be deducted in order to reach the final total.			
<b>Final total</b>	<b>1,528.9</b>	<b>1,586.3</b>	<b>1,422.9</b>

Exchange rates: USD 1.00 = CHF 0.9638; EUR 1.00 = CHF 1.0745

15 largest operations in 2015 in terms of expenditure			
In million	CHF	USD	EUR
1 Syrian Arab Republic	137.5	142.6	127.9
2 South Sudan	137.4	142.6	127.9
3 Iraq	106.6	110.6	99.2
4 Afghanistan	81.0	84.0	75.4
5 Somalia	63.2	65.6	58.8
6 Congo, Democratic Republic of the	60.8	63.0	56.6
7 Nigeria	59.3	61.5	55.2
8 Israel and the Occupied Territories	52.1	54.1	48.5
9 Ukraine	49.7	51.6	46.3
10 Yemen	49.4	51.3	46.0
11 Lebanon	41.8	43.3	38.9
12 Mali	37.5	38.9	34.9
13 Central African Republic	36.1	37.5	33.6
14 Jordan	31.3	32.5	29.2
15 Colombia	27.4	28.5	25.5

Exchange rates: USD 1.00 = CHF 0.9638; EUR 1.00 = CHF 1.0745

## VISITS TO DETAINEES

ICRC delegates visited **928,812 detainees** held in **1,596 places of detention** in **96 contexts**; they included detainees held by or in relation to the decisions of 4 international courts/tribunals. A total of **25,734 detainees** were monitored individually (951 women; 1,306 minors), of whom 16,660 detainees (704 women; 1,172 minors) were registered and visited for the first time in 2015.

The ICRC issued **15,923** detention attestations.

## RESTORING FAMILY LINKS

The ICRC collected **129,778** and distributed **106,108 RCMs**, enabling members of families separated as a result of armed conflict, unrest, migration or other circumstances to exchange news. Of these messages, 20,558 were collected from and 10,685 distributed to detainees. The ICRC facilitated **479,358 phone and video calls** between family members, and made **33,405 phone calls** to families to inform them of the whereabouts of a detained

relative visited by its delegates. With support provided by the ICRC, **11,501 detainees** were visited by their families.

The ICRC established the whereabouts of **4,798 people** for whom tracing requests had been filed by their families. Its family-links website ([familylinks.icrc.org](http://familylinks.icrc.org)) listed the names of **46,979 people** in a bid to reconnect them with their relatives. A total of **1,074 people** (including minors – see below) were reunited with their families. At the end of the year, the ICRC was still taking action to locate **63,110 people** (6,135 women; 8,904 minors at the time of disappearance) at the request of their families.

The ICRC registered **3,809 unaccompanied minors/separated children** (1,348 girls), including **450 demobilized children** (50 girls). Once their families had been located and with the agreement of the children and their relatives, it organized the reunification of **968 children** (256 girls) with their families. By the end of the year, the cases of **3,219 unaccompanied minors/separated children** (including 196 demobilized children) were still



being handled, which involved tracing their relatives, maintaining contacts between the children and their families, organizing family reunification and/or identifying other long-term solutions for the children concerned.

The ICRC organized the transfer or repatriation of **1,121 people**, including **73 detainees** after their release. It also organized the transfer or repatriation of **3,167 sets of human remains**. It relayed 1,775 official documents of various types between family members across borders and front lines. ICRC-issued travel documents enabled 4,741 people to return to their home countries or to settle in a host country.

A total of 1,041,893 people contacted ICRC offices worldwide for services or advice regarding issues related to protection and family links.

## ASSISTANCE

ICRC assistance programmes were carried out by **69 delegations** and regional delegations. The bulk of the work was carried out in the 15 largest operations (see above).

## ASSISTANCE SUPPLIES

In 2015, the ICRC purchased or received as in-kind contributions the following assistance supplies:		
Relief items		CHF 210 million
<b>Top 10 distributed items</b>		
Food parcel (5 people/1 month)	1,875,386 parcels	
Food parcel – individual (1 person/1 month)	564,850 parcels	
Kitchen set	401,551 sets	
Rice	32,475,958 kilograms	
Hygiene parcel (5 people/1 month)	561,248 parcels	
Blanket	2,433,064 units	
Sorghum	13,206,615 kilograms	
Tarpaulin	381,101 units	
Matting	680,903 units	
Beans	12,296,970 kilograms	
<b>Medical and physical rehabilitation items</b>		<b>CHF 48 million</b>
<b>Water and habitat items</b>		<b>CHF 41 million</b>
	<b>TOTAL</b>	<b>CHF 299 million</b>
		<b>USD 310 million</b>
		<b>EUR 278 million</b>

Exchange rates: USD 1.00 = CHF 0.9638; EUR 1.00 = CHF 1.0745

## ECONOMIC SECURITY

During the year, ICRC activities to ensure economic security, often implemented together with National Societies, directly benefited individuals, households and communities in **67 countries** worldwide. Some **13,097,863 people** (residents, IDPs, returnees, refugees – in many cases, people living in rural areas and/or areas difficult to reach owing to insecurity and/or lack of infrastructure – and people deprived of their freedom) received aid in the form of **food**, and **5,608,435** in the form of **essential household items**. Approximately **87%** and **77%** of the beneficiaries of food and essential household items, respectively, were **IDPs**. Some **87,863 people** were given **vouchers** that they could exchange for basic commodities or services. Around **793,655 people** received **cash** for pursuing micro-economic initiatives, in exchange for their work on community projects, or as relief assistance. At least **3,303,943 people** benefited from **productive inputs**, such as seed, tools or equipment, which they used to spur food production or generate income. Assistance in the form of **services and training** – for instance, animal vaccination campaigns or skills training – helped some **1,635,149 people** boost their livelihood opportunities.

## WATER AND HABITAT

In 2015, ICRC engineers and technicians, often with local authorities and communities, built or rehabilitated water-supply, sanitation and other infrastructure in **53 countries**. This work translated to clean drinking water, reduced health risks or generally better living conditions for **31,026,588 civilians** (residents,

IDPs, returnees, refugees); similar projects in places of detention benefited **353,242 detainees**.

## HEALTH-CARE SERVICES

During the year, the ICRC supported – regularly or on an ad hoc basis – **476 hospitals** in 29 countries. Statistics were available for 166 of these hospitals, where **48,115 weapon-wounded** and **98,491 non-weapon-wounded surgical patients** were admitted, and **132,312 operations** were performed. Some **351,124 other patients** were also admitted, including **153,622 women and girls** receiving gynaecological/obstetric care. Some **1,864,063 people** were treated as **outpatients**, and **8,992 people** had their treatment paid for by the ICRC. The ICRC supported **148 first-aid posts** located near combat zones, which provided emergency treatment, mainly for weapon-wounded patients.

Community health programmes were implemented in **26 countries**, in many cases with the help of National Societies. The ICRC supported **286 primary-health-care centres** (covering an estimated population of 4,667,904 people, on average), where **2,879,051 curative consultations** (children: 47%; women: 33%) and **232,752 ante/post-natal consultations** were carried out.

Health activities for people deprived of their freedom were conducted in 52 countries.

## CARE FOR THE DISABLED

A total of **371,884 people** (including 73,097 women and 130,566 children) received physical rehabilitation services through **129 projects** (including physical rehabilitation centres, component factories and training institutions) supported by the ICRC in **32 contexts**. A total of **9,155 new patients** were fitted with **prostheses** and **44,226** with **orthoses**. ICRC-supported projects produced and delivered **20,872 prostheses** (of which 5,841 were for mine victims) and **88,856 orthoses** (of which 348 were for mine victims). In addition, **5,648 wheelchairs** and tricycles were distributed, most of them locally manufactured. Training for local staff was a priority in order to ensure sustainable services for patients.

## WEAPON CONTAMINATION

The ICRC carried out activities for people living in weapon-contaminated areas in **35 contexts**. These included mine-risk education sessions, collecting and analysing data on mine-related incidents and contaminated areas, clearance activities and training for local actors. The ICRC also worked with the UN and NGOs to further develop and strengthen international mine-action standards and coordination.

## FORENSIC SERVICES

The ICRC offered forensic assistance in more than **69 countries** to help ensure the proper and dignified management of human remains and to help prevent and resolve cases of missing persons. Activities consisted primarily of promoting and supporting the implementation of best practices for the collection, analysis and management of forensic data and for the recovery, management and identification of human remains in the context of armed conflict, other situations of violence, natural disasters or other circumstances, such as shipwrecks involving migrants. Training and dissemination activities were conducted to build local/regional capacities to address the problem and to raise general awareness of the issue.

## COOPERATION WITH NATIONAL SOCIETIES

In the vast majority of the countries where it operates, the ICRC does so in partnership with host National Societies (National Societies working in their own countries) and with the support of National Societies working internationally. The ICRC also contributes to the overall strengthening of National Societies' capacities to carry out their own activities.

In 2015, direct cash transfers to boost National Societies' capacities to provide emergency responses amounted to **CHF 42 million**. Total ICRC investment in overall capacity building amounted to **CHF 84 million**.

In November, the Tuvalu Red Cross Society was recognized by the ICRC Assembly as the Movement's 190th National Society.

## STATE PARTICIPATION IN IHL TREATIES AND DOMESTIC IMPLEMENTATION

The ICRC continued to pursue active dialogue with national authorities worldwide in order to promote ratification of/accession to IHL treaties and their domestic implementation. It provided legal and technical advice to governments, and encouraged and supported them in their endeavours to establish interministerial committees entrusted with the national implementation of IHL.

In 2015, one new national IHL committee was created (in the Bolivarian Republic of Venezuela), bringing the total number worldwide to **108**. Kuwait and the Syrian Arab Republic also reactivated their respective committees, albeit with some modifications in composition.

The ICRC organized, or contributed to, **37 regional events** related to IHL and its integration into domestic law, which were attended by some **1,500 people** from 140 countries.

This work contributed to **69 ratifications of IHL treaties** (including one of Additional Protocol II, and four of Additional Protocol III) by 46 countries. In addition, 23 countries adopted **39 pieces of domestic legislation** to implement various IHL treaties, and many others prepared draft laws on related topics.

## RELATIONS WITH WEAPON BEARERS

Throughout the year, ICRC delegates met with various weapon bearers present in conflict zones, from members of the military and the police to paramilitary units, armed groups and staff of private military companies.

- ▶ Specialized ICRC delegates conducted or took part in over **1,570 courses, workshops, round-tables and exercises** involving some **203,000 military, security and police personnel** in 165 countries.
- ▶ Specialized delegates in Africa, Asia, Europe and North America represented the ICRC and observed the implementation of IHL or international human rights law during some 70 international military exercises.
- ▶ Over 80 general and senior officers from 62 countries attended the Senior Workshop on International Rules governing Military Operations in Algiers, Algeria.
- ▶ The ICRC engaged in dialogue with approximately 100 armed groups or coalitions of armed groups in about 25 countries. It tried to establish a dialogue with other armed groups elsewhere, amidst numerous challenges.

## RELATIONS WITH ACADEMIC CIRCLES

The ICRC interacted with over **600 universities** in more than **120 countries**, providing support for IHL teaching, humanitarian policy and related activities. Outside the classroom, individual professors participated in the development, implementation and promotion of IHL. Over 70 ICRC delegations and missions provided training for university lecturers, co-organized seminars, supported student competitions and/or stimulated academic debate on humanitarian law, policy and related issues.

Notably, the ICRC organized or co-organized:

- ▶ 7 regional and international IHL training seminars for academics (1 in Africa; 1 in the Americas; 2 in Asia and the Pacific; 1 in Europe and Central Asia; 2 in the Near and Middle East), involving over 200 professors, lecturers and graduate students
- ▶ 4 regional IHL competitions for students (2 in Africa; 2 in Asia and the Pacific), involving some 150 students and lecturers
- ▶ the annual Jean-Pictet Competition on IHL, involving around 170 students from around the world

In addition:

- ▶ the *International Review of the Red Cross*, a peer-reviewed

academic journal published by the ICRC and Cambridge University Press, produced 4 issues on key law and policy themes: scope of the law in armed conflict, sexual violence in armed conflict, and generating respect for the law;

- ▶ **10,000 copies** of the journal were printed, with selected articles translated into Arabic, Chinese, French, Russian and Spanish, and distributed in 75 countries around the world; the main readership of the journal includes lawyers, military experts, academics, humanitarian practitioners and policy-makers;
- ▶ ICRC headquarters received 165 groups totaling about **4,470 people** (university students: 63%; National Society staff and volunteers: 11%; representatives of the diplomatic community: 6%; members of armed forces: 10%; the private sector: 6%; secondary school and vocational training students: 2%; and NGOs and religious groups: 2%).

## LAW AND POLICY CONFERENCES

The ICRC acted as a convener of public debates and conferences on IHL and humanitarian policy. Red Cross Red Crescent actors, and members of aid, diplomatic and academic circles, reflected on solutions to current challenges and sought to identify ways to improve humanitarian action.

Among these events were:

- ▶ a conference cycle on “principles guiding humanitarian action” – comprising 13 events organized in cooperation with various partners – which gathered around **1,700 participants** in five countries: Australia, Austria, Belgium, Switzerland and the United Kingdom of Great Britain and Northern Ireland;
- ▶ 4 thematic conferences related to the aforementioned conference cycle, held at the Humanitarium at the ICRC’s headquarters in Geneva, Switzerland, gathering an additional 650 on-site participants.

Throughout the year, the Humanitarium hosted a total of **12 public conferences** on international law and policy, bringing together **2,250 diplomats, humanitarians and academics** based in Geneva.

The events reached a global audience through live webcasts, video summaries, conference reports and other online resources.

## PUBLIC COMMUNICATION

In 2015, the ICRC’s humanitarian concerns and activities continued to be widely covered by the media worldwide. According to the Factiva database, which compiles data on print and online media, the ICRC was mentioned in media sources about **15,000 times**.

The ICRC produced 32 new print or electronic publications and over 150 audiovisual products, including 25 video news items. Media usage of ICRC video news releases increased by 60%. ICRC news material was carried by over **940 channels** worldwide.

The ICRC distributed some **405,500 publications** and copies of films from Geneva to clients all over the world.

Interest in the ICRC’s social media platforms grew significantly: the number of “likes” for its Facebook page reached 1 million; the number of followers on its six main Twitter accounts reached 525,000; and its videos were viewed over 1.3 million times on YouTube. The ICRC website received some **4.3 million visits** in total.

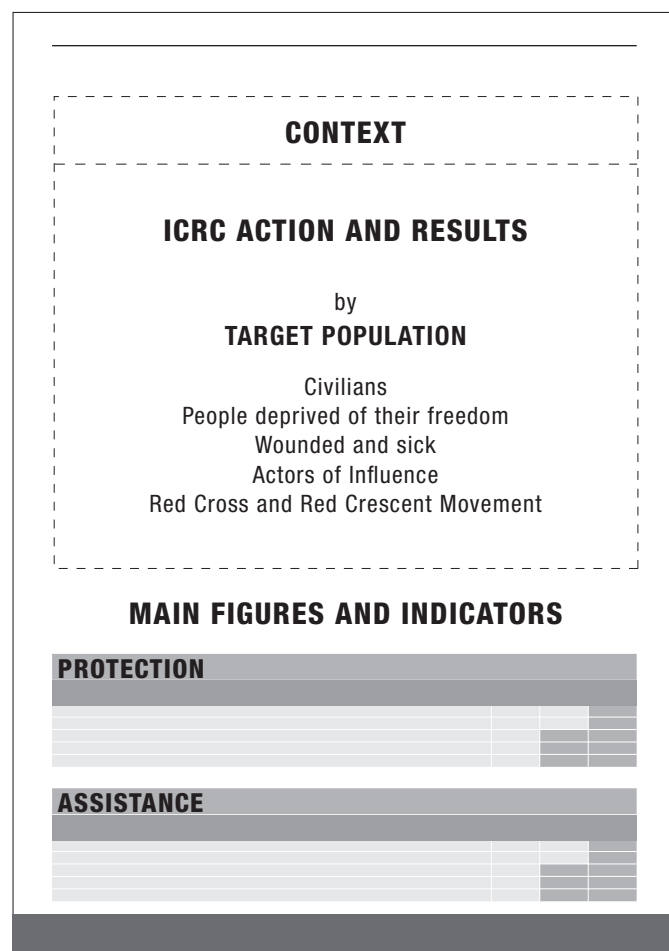
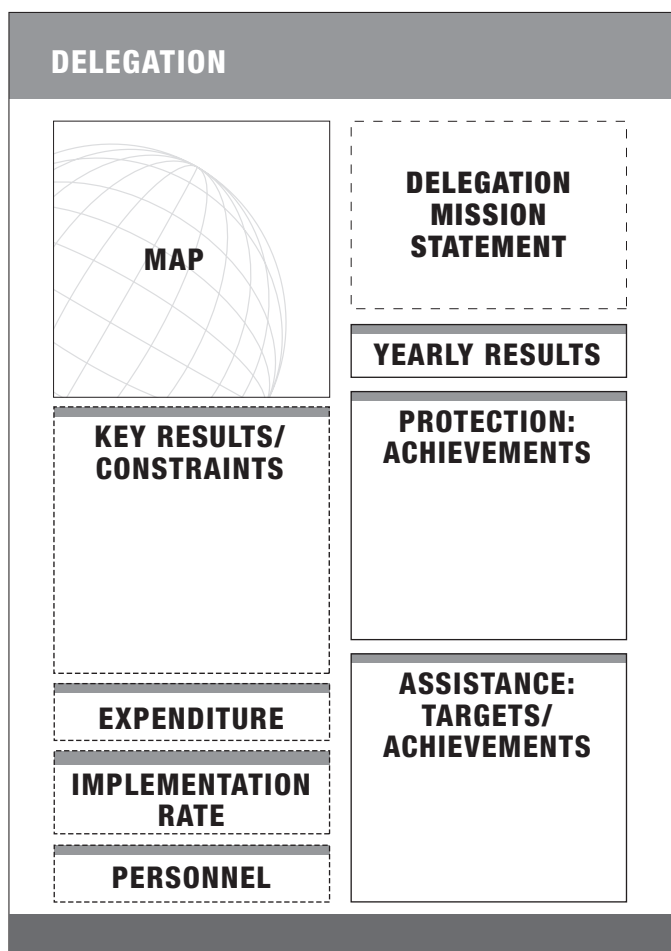
## INFORMATION AND DOCUMENTATION MANAGEMENT AND MULTILINGUAL COMMUNICATION

The ICRC’s Archive and Information Management Division managed more than 20 linear kilometres of archival records and a collection of over 30,000 books and articles, 400 journals, 825,000 photos (including 128,000 in digital format), about 6,500 films comprising around 2,000 hours of video footage, and 10,000 digital sound files. In 2015, it received 2,300 visitors, and handled over 2,100 requests from victims of past armed conflicts and more than 2,600 requests from National Societies, NGOs, academia, government departments and the media.

To support the opening of the ICRC’s 1966–75 archives to the public, the Division published the inventory of some 19,000 files from this period in paper and digital form.

More than 10 million words were translated, edited and proofread by translators and editors working for or contracted by the ICRC through its language service. In addition, 1.5 million words were processed in the lead-up to and during the Movement’s 2015 Council of Delegates and the 32nd International Conference.

# USER GUIDE: LAYOUT OF DELEGATION SECTIONS



The sections on each of the field delegations and missions in the *Annual Report* have been formatted to facilitate reader access to the information they contain. Each section comprises the following elements:

1. **Map:** the country or region showing the ICRC's presence during the year; the maps in this publication are for information purposes only and have no political significance
2. **Delegation:** the State(s), geographical areas, and/or political entities covered by the ICRC's presence
3. **Mission statement:** the ICRC's reasons for being in the country or region and its main activities there
4. **Yearly results:** the level of achievement of the ICRC's objectives and plans of action
5. **Key results/constraints:** up to six major achievements or examples of progress made by the ICRC or constraints it faced in meeting its humanitarian objectives in a given context
6. **Protection:** a table providing key indicators regarding activities for restoring/maintaining family links and for people deprived of their freedom
7. **Assistance – targets and achievements:** a table juxtaposing targeted beneficiary numbers or other result indicators (as presented in ICRC appeals) against those achieved during the reporting period
8. **Expenditure:** total, and by programme
9. **Implementation rate:** expenditure divided by yearly budget multiplied by 100 (indicator)
10. **Personnel:** the average number of mobile and resident staff employed over the course of the year
11. **Context:** the main developments in a given context and how these have affected people of concern to the ICRC; this segment highlights the elements that the ICRC takes into consideration when analysing the situation to carry out its humanitarian action
12. **ICRC action and results:** a summary of the ICRC's action and results in the given context followed by a more detailed description of this action and the results by target population
13. **ICRC action and results – by target population:** a description of the ICRC's action and the results by target population

These descriptions follow up objectives and plans of action provided to donors in yearly appeals and budget extension appeals. They include qualitative and quantitative results (output, outcome and contribution to impact) and combine activities carried out in the four ICRC programmes, thus illustrating the ICRC's multidisciplinary approach.

14. **Main figures and indicators:** two tables providing key output and outcome figures relating to ICRC protection and assistance programmes in a given context

# USER GUIDE: YEARLY RESULTS

The ICRC aims to ensure that people in need of protection and assistance in armed conflict and other situations of violence receive effective and relevant support, in fulfilment of the organization's mandate and of its responsibility to use donor funds optimally; thus the ICRC employs result-based management, a structured approach that focuses on the desired and expected results for the beneficiaries throughout the management cycle.<sup>1</sup> A central element of this approach is the ICRC's yearly planning and regular monitoring and review of its activities and achievements and of the needs of the people affected through updated or new assessments. This process is structured according to the ICRC's corporate management framework, which describes ICRC programmes and target populations.<sup>2</sup> In particular, during the yearly planning

exercise, specialists and managers in the field and at headquarters assess and analyse all ICRC operations, reviewing the progress made in terms of project implementation and the results achieved against the objectives defined during the previous year's planning exercise. On this basis, the ICRC appraises its yearly performance in each operation and defines new plans for the year to come.

The present report provides the outcomes of these appraisals made exclusively according to the objectives and plans of action defined for each context/delegation for the year concerned.

Success in achieving the objectives and plans of action are evaluated using the scale below:



The score provided for the yearly results of each context/delegation is the response to the following questions: **What is the level of achievement of the ICRC's objectives and plans of action for the given year? To what extent did the ICRC implement its plans of action as defined in its appeals?** These objectives and plans of action are presented in the yearly appeals

and budget extension appeals to donors. Scores, therefore, are not based on the global humanitarian situation in the context or on the institutional ambition the ICRC may, could or should have had in that context.

<sup>1</sup> See in the present report *The ICRC's operational approach to result-based management: improving humanitarian action*

<sup>2</sup> See in the present report *ICRC management framework and descriptions of programmes*

# USER GUIDE: FIGURES AND INDICATORS – EXPLANATIONS

## INTRODUCTION

Standard figures and indicators detail protection and assistance programmes worldwide.

- ▶ For each context section, where relevant:
  - key figures for each programme are provided on the front page;
  - summary tables by programme are available at the end of the section;
  - additional tables may be included within a context report, with specific disaggregated indicators that are relevant to the operations in that context.
- ▶ The section introducing each geographical region (Africa, Americas, Asia and the Pacific, Europe and Central Asia, and Near and Middle East) includes:
  - key figures for each programme for all contexts covered by the geographical region on the front page;
  - summary tables of the programmes for all contexts covered by the geographical region at the end of the section.
- ▶ At the end of the operational sections, the section “Figures and indicators” provides comprehensive worldwide summary tables<sup>1</sup>.

It must be noted, however, that these figures and indicators do not capture the full extent of the ICRC’s action, results and priorities. Collecting, interpreting and managing data in contexts as diverse and volatile as those the ICRC is active in is particularly difficult to prioritize, if not impossible to undertake. Factors such as cultural and/or State-imposed restrictions (e.g. government policies against providing data on health-care activities or gender-specific breakdowns of beneficiaries); inaccessibility due to conflict, violence or other crises; adverse environmental conditions; and internal constraints may be barriers to such efforts. Some types of support, including ad hoc assistance given to health centres or hospitals during emergencies, are not always included in the count of structures supported. Moreover, other types of support and results are simply impossible to quantify in figures; however, their relevance should not be discounted: for example, the precise impact of dialogue with different authorities or weapon bearers or the multiplier effect of training initiatives cannot be reflected in numbers.

The indicators and their definitions are listed below.

## PROTECTION FIGURES AND INDICATORS

### GENERAL

#### Child/minor

A person under 18 or under the legal age of majority.

#### Girl

A female person under 18 or under the legal age of majority.

#### Woman

A female person aged 18 or above the legal age of majority.

#### Basis for the figures

All figures – except for *detainees visited* – are precise and are based on registrations, counting or recorded activities carried out by the ICRC or the ICRC’s partners, mainly National Societies. Figures for *detainees visited* are based on figures provided by the detaining authorities.

## RESTORING FAMILY LINKS

### RED CROSS MESSAGES (RCMs)

#### RCMs collected

The number of RCMs collected, regardless of the destination of the RCM, during the reporting period.

#### RCMs distributed

The number of RCMs distributed, regardless of the origin of the RCM, during the reporting period.

### OTHER MEANS OF FAMILY CONTACT

#### Phone calls facilitated between family members

The number of calls, including those made via cellular or satellite phone, facilitated by the ICRC between family members.

#### Phone calls made to families to inform them of the whereabouts of a detained relative

The number of calls made by the ICRC to inform families of the whereabouts of a detained relative.

#### Names published in the media

The number of names of people – those sought by their relatives or those providing information about themselves for their relatives – published in the media (e.g. newspaper or radio broadcast).

#### Names published on the ICRC website

The number of names of people – those sought by their relatives or those providing information about themselves for their relatives – published on the ICRC’s family-links website ([familylinks.icrc.org](http://familylinks.icrc.org)).

### REUNIFICATIONS, TRANSFERS AND REPATRIATIONS

#### People reunited with their families

The number of people reunited with their families under the auspices of the ICRC during the reporting period.

#### Civilians transferred/human remains transferred

The number of civilians or sets of human remains, not including those in the context of detention, transferred by the ICRC during the reporting period.

#### Civilians repatriated/human remains repatriated

The number of civilians or sets of remains, not including those in the context of detention, whose repatriation was facilitated by the ICRC during the reporting period.

### TRACING REQUESTS<sup>1</sup>

#### People for whom a tracing request was newly registered

The number of people for whom tracing requests were initiated by their families during the reporting period, for instance, because there had been no news of them, they could not be located using RCMs, or they were presumed to have been arrested and/or detained.

1. All cases of people whose fates are unknown either to their families or to the ICRC, and for whom the ICRC is going to undertake some kind of action to clarify their fate or to confirm their alleged fate; these can include allegations of arrest and co-detention, and tracing requests collected following unsuccessful attempts to restore family links by other means

### **Tracing requests closed positively**

The number of people for whom tracing requests had been initiated and who were located or whose fates were established (closed positively) during the reporting period.

### **Tracing requests still being handled at the end of the reporting period**

The number of people for whom tracing requests were still open and pending at the end of the reporting period.

## **UNACCOMPANIED MINORS (UAMs)<sup>2</sup>/SEPARATED CHILDREN (SC)<sup>3</sup>/DEMobilized CHILD SOLDIERS**

### **UAMs/SC/demobilized child soldiers newly registered**

The number of UAMs/SC/demobilized child soldiers registered by the ICRC or the National Society during the reporting period, and whose data are centralized by the ICRC.

### **UAMs/SC/demobilized child soldiers reunited with their families**

The number of UAMs/SC/demobilized child soldiers reunited with their families by the ICRC or the National Society.

### **Cases of UAMs/SC/demobilized child soldiers still being handled at the end of the reporting period**

The number of UAMs/SC/demobilized child soldiers whose cases were opened but who had not yet been reunited with their families by the ICRC or the National Society concerned or by another organization during the reporting period – these include cases concerning children whose parents were being sought or had been found but with whom the children had not yet been reunited.

## **DOCUMENTS ISSUED**

### **People to whom travel documents were issued**

The number of individuals to whom the ICRC issued travel documents during the reporting period.

### **People to whom a detention attestation was issued**

The number of people who received documents testifying to their detention, according to ICRC records of visits, during the reporting period.

### **Official documents relayed between family members across borders/front lines**

The number of documents – e.g. passports, power of attorney documents, death certificates, birth certificates, marriage certificates – forwarded or transmitted during the reporting period.

## **PEOPLE DEPRIVED OF THEIR FREEDOM**

### **Detainees visited**

During the reporting period, the number of detainees visited, whether monitored individually or otherwise. This number covers: detainees seen and registered for the first time; those registered previously and visited again; those not revisited, but who remain of ICRC concern; and groups that received aid collectively without being registered individually.

### **Detainees visited and monitored individually**

The number of detainees visited and monitored individually – those seen and registered for the first time and those registered previously and visited again during the reporting period.

### **Detainees newly registered during the reporting period**

The number of detainees visited for the first time since their arrest and registered during the reporting period.

### **Number of visits carried out**

The number of visits made, including those to places found empty when visited, during the reporting period.

### **Number of places of detention visited**

The number of places of detention visited, including places that were found empty when visited, during the reporting period.

### **Detainees benefiting from the ICRC's family-visits programme**

The number of detainees who were visited by a relative via an ICRC-organized or -financed visit during the reporting period.

### **Detainees released and transferred/repatriated by/via the ICRC**

The number of detainees whose transfer or repatriation was facilitated by the ICRC.

## **INTERNATIONAL ARMED CONFLICT (THIRD GENEVA CONVENTION)**

### **Prisoners of war (POWs) visited**

The number of POWs visited and monitored individually during the reporting period.

### **POWs newly registered during the reporting period**

The number of POWs visited for the first time since their capture and monitored individually during the reporting period.

### **POWs released during the reporting period**

The number of POWs released during the reporting period.

### **POWs repatriated by/via the ICRC**

The number of POWs released and repatriated under the auspices of the ICRC during the reporting period.

### **Number of visits carried out**

The number of visits to POWs carried out during the reporting period.

### **Number of places visited**

The number of places holding or having held POWs visited during the reporting period.

## **INTERNATIONAL ARMED CONFLICT (FOURTH GENEVA CONVENTION)**

### **Civilian internees (CIs) and others visited**

The number of CIs and other persons protected by the Fourth Geneva Convention who were visited and monitored individually during the reporting period.

### **CIs and others newly registered during the reporting period**

The number of CIs and other persons protected by the Fourth Geneva Convention who were visited for the first time since the start of their internment and monitored individually during the reporting period.

2. A person under 18 or under the legal age of majority separated from both parents and from all other relatives and not being cared for by an adult who, by law or custom, is responsible for doing so

3. A person under 18 or under the legal age of majority separated from both parents or from his/her previous legal caregiver but accompanied by another adult relative

## CIIs and others released

The number of CIIs and other persons protected by the Fourth Geneva Convention who, as per information received from various credible sources, were released – including those transferred or repatriated under the auspices of the ICRC upon release – during the reporting period.

## Number of visits carried out

The number of visits carried out to places holding or having held CIIs and other persons protected by the Fourth Geneva Convention during the reporting period.

## Number of places visited

The number of places holding or having held CIIs and other persons protected by the Fourth Geneva Convention visited during the reporting period

## ASSISTANCE FIGURES AND INDICATORS

### GENERAL

#### Woman

Female person aged 15 and above.

#### Man

Male person aged 15 and above.

#### Girl

Female person under the age of 15.

#### Boy

Male person under the age of 15.

### Basis for the figures

- ▶ Depending on the environment and circumstances of the context concerned, as well as on the activities implemented or services delivered/supported, beneficiary figures are based either on ICRC-monitored registrations (of individuals or households) or on estimates made by the ICRC or provided by credible secondary sources (e.g. the communities, authorities, published official figures, other humanitarian organizations). Whenever possible, triangulations are systematically used when the figures are based on estimates and secondary sources.
- ▶ In the field of *economic security*, beneficiary numbers for *cash*, *vouchers* and *services and training* are usually based on the registration of individuals. The numbers of beneficiaries of *food*, *essential household items* and *productive inputs* are based on ICRC estimates, as such beneficiaries are not systematically registered.
- ▶ In the field of *water and habitat*, beneficiary numbers are based mainly on ICRC estimates and credible secondary sources.
- ▶ In the field of *health*, beneficiary numbers are based mainly on figures provided by local health authorities and health teams in charge of health facilities. Figures related to health facilities regularly supported are based on reliable records.
- ▶ In the field of *physical rehabilitation*, the numbers of beneficiaries and devices are based on the registration of individuals and the counting of units/devices provided.

### Target figures

For each context, a table juxtaposes the achieved beneficiary numbers or other result indicators for the target populations *Civilians* and *Wounded and sick* against the initial targets set by

delegations during the planning process in the middle of the previous calendar year (for the entirety of the next year) or, in emergency cases, ad hoc planning processes during the year itself.

Targets are indicated in the section *Main targets for 20XX* of ICRC appeals to donors. These include only what can be defined in advance. During the planning process, delegations use standard averages for the number of individuals per household; these figures may be found to be higher or lower than the actual household sizes once the activities are implemented. Delegations also cannot specifically predetermine the number of health and medical facilities that will receive medical materials on an ad hoc basis, in response to emergencies; hence, targets only include regularly supported health centres and hospitals. Similarly, delegations face limitations in precisely classifying beneficiaries or the exact type of assistance they will receive. For example, they may establish targets for emergency relief, such as *food/essential household items*, and record beneficiaries accordingly during their planning. However, the circumstances during the delivery of the assistance could make it more appropriate to provide the relief through *cash* or *vouchers*, with which these commodities may be procured. Moreover, while delegations may count beneficiaries under *productive inputs* during their planning, beneficiaries may instead receive livelihood support by way of *cash* or *services and training* during project implementation, according to what best suits their needs and capacities, and the situation. Even then, some eventual beneficiaries of *cash* or *services and training* are not always included in the targets defined for those categories. This may be because cash allowances and training are often provided as complements to *productive inputs* (e.g. beneficiaries of farming equipment will also receive training on how to operate them; donations of livestock may come with financial support for veterinary services). Despite efforts to harmonize definitions and data entry, operational constraints or differences in interpretation may also affect the results presented.

Major differences between targets and achievements – both when targets are not met or are exceeded – highlight the difficulty of precisely foreseeing needs and implementing humanitarian responses, as the dynamics of instability, security and access, as well as operational capacities, can shift very rapidly during the year. These changes may prompt delegations to adapt their approaches – initiating, rescaling, or cancelling certain activities, as appropriate – to the prevailing conditions. The narrative report provides, explicitly or implicitly, information explaining major differences.

### ECONOMIC SECURITY BENEFICIARIES

Note: The number of beneficiaries of each type of commodity/service cannot be cumulated, as some people may have benefited from more than one type of commodity/service during the reporting period. This is typically the case with beneficiaries of micro-economic initiatives, who usually receive a combination of different commodities.

#### Beneficiaries of food commodities

Per population group, the number of individuals who have received one or more food items at least once during the reporting period. This number includes people who have benefited from food as compensation for work they carried out, for example, on community projects. Food items distributed typically include rice, wheat flour, maize, beans, oil, sugar, salt and, sometimes, canned food and ready-to-use therapeutic or supplementary food.



### **Beneficiaries of essential household items**

Per population group, the number of individuals who have received one or more essential household items at least once during the reporting period. Items distributed typically include tarpaulins, blankets, matting, basic clothing, kitchen sets, hygiene kits, soap, jerrycans and mosquito nets.

### **Beneficiaries of productive inputs**

Per population group, the number of individuals who have, at least once during the reporting period, benefited from at least one form of livelihood input (e.g. fertilizer, animal vaccines, seed, tools, fishing boats, farming equipment) or other type of material assistance for micro-economic initiatives (e.g. for carpentry, welding, food processing, trade)

### **Beneficiaries of cash**

Per population group, the number of individuals who have benefited from cash assistance at least once during the reporting period. This number includes those who have received cash grants, either as a form of relief assistance or for launching micro-economic initiatives, and those who have received cash in exchange for work they carried out, for example, on community projects.

### **Beneficiaries of vouchers**

Per population group, the number of individuals who have benefited from assistance provided in the form of vouchers to be exchanged for specified commodities, services or training, at least once during the reporting period.

### **Beneficiaries of services and training**

Per population group, the number of individuals who have benefited at least once during the reporting period from services (e.g. agricultural services, such as tractor ploughing, or veterinary support, such as animal vaccinations) or occupational training that helped them pursue their livelihoods.

## **WATER AND HABITAT BENEFICIARIES**

One beneficiary is one person who has benefited from a water and habitat project at least once over the course of the reporting period. A person who has benefited from a project several times is counted only once.

For recurrent projects like water-trucking or the regular provision of material (chlorine, spare parts, etc.), beneficiaries are counted only once.

### **Civilians**

This population group includes residents, IDPs, returnees and, in some cases, refugees.

### **IDPs (included in the category “Civilians” above)**

This population comprises people who have had to leave their normal place of residence, but have remained in their own country, living in temporary settlements or camps, or hosted by relatives, friends or other residents.

### **People deprived of their freedom**

The number of detainees in the structures supported.

### **Wounded and sick**

The number of beds in the structures supported.

## **TYPES OF SERVICES**

### **Water and habitat activities for all population groups**

This includes the following types of projects: wells, boreholes, springs, dams, water-treatment plants, latrines, septic tanks and sewage plants built or repaired, hygiene promotion, vector control activities and in-house rehabilitation support.

### **Water and habitat activities for civilians**

This includes the following types of projects: temporary settlements (shelter), site planning and rehabilitation of dispensaries and health centres or posts.

### **Water and habitat activities for people deprived of their freedom**

This includes the rehabilitation of prisons and detention centres, including water-supply, sanitation and kitchen facilities.

### **Water and habitat activities for the wounded and sick**

This includes the construction or rehabilitation of hospitals and physical rehabilitation centres.

## **HEALTH SERVICES**

It should be noted that in a number of contexts, data about patients and health activities cannot be provided or are only provided in part. The main reasons include the lack of proper data collection systems at facility level and difficulties in transmitting information from the facility to the central level and/or the ICRC – both of which result in incomplete information; for facilities regularly supported, the ICRC endeavours to help local teams establish data management systems to address these deficiencies. In some cases, restrictions by the authorities may limit the types of data made available to the ICRC or the organization’s ability to make further use of the information.

## **COMMUNITY HEALTH/BASIC HEALTH CARE – CIVILIANS**

### **Monthly average of health centres supported**

The number of health facilities supported, on average, per month.

### **Health centres supported**

The total number of health facilities supported (target figures include only regularly supported health facilities).

### **Average catchment population**

The estimated number of people covered by these health centres, on average, per month.

### **Activities**

Beneficiaries are registered and tallied based on the particular service they have received (e.g. ante/post-natal consultation, immunization, curative consultation).

### **Immunization activities**

The number of doses administered.

### **Polio immunizations**

The number of polio doses administered (this number is included in the total number of immunization activities).

## **HOSPITAL SUPPORT – WOUNDED AND SICK**

### **Monthly average of hospitals supported**

The number of hospitals supported, on average, per month.

### **Patients whose treatment was paid for by the ICRC**

The number of patients whose consultation, admission and/or treatment fees are regularly or occasionally paid for by the ICRC.

### **Hospitals supported**

The total number of hospitals supported (target figures only include regularly supported hospitals).

### **Admissions (inpatient activities)**

The number of beneficiaries registered and tallied based on the particular service they have received (surgical, internal medicine, paediatric, gynaecological/obstetric).

### **Outpatient activities**

The number of outpatients treated, without any distinction made among diagnoses.

### **Patients admitted with injuries caused by mines or explosive remnants of war**

This number is included in the total number of patients admitted.

### **Operations performed**

The number of operations performed on weapon-wounded and non-weapon-wounded patients.

## **PEOPLE DEPRIVED OF THEIR FREEDOM**

### **Visits carried out by health staff**

The number of visits made by health staff as part of the ICRC visiting team, or visits carried out by health staff for medical issues.

### **Places of detention visited by health staff**

The number of places of detention visited by health staff as part of the ICRC visiting team or visited by health staff for medical issues.

### **Health facilities supported in places of detention**

The number of health facilities supported in places of detention.

## **PHYSICAL REHABILITATION**

### **Projects supported**

The number of projects, including centres, component factories and training institutions, receiving ICRC support or managed by the ICRC.

### **Patients receiving services at the centres**

The number of patients (amputees and non-amputees) who received services at the centres during the reporting period, including both new and former patients who came for new devices, repairs (to prostheses, orthoses, wheelchairs, walking aids) or physiotherapy.

### **Amputees receiving services at the centres**

The number of amputees who received services at the centres during the reporting period – both new and former patients who came for new devices, repairs (to prostheses, orthoses, wheelchairs, walking aids) or physiotherapy.

### **New patients fitted with prostheses (new to the ICRC)**

The number of new patients who received prostheses during the reporting period – both those fitted for the first time and patients who had previously received prostheses from a centre not assisted by the ICRC.

### **Prostheses delivered**

The total number of prostheses delivered during the reporting period.

### **Prostheses delivered to mine victims**

The total number of prostheses delivered, during the reporting period, specifically to victims of mines or explosive remnants of war.

### **Non-amputees receiving services at the centres**

The number of non-amputees who received services at the centres during the reporting period – both new and former patients who came for new devices, repairs (to prostheses, orthoses, wheelchairs, walking aids) or physiotherapy.

### **New patients fitted with orthoses (new to the ICRC)**

The number of new patients who received orthoses during the reporting period – both those fitted for the first time and patients who had previously received orthoses from a centre not assisted by the ICRC.

### **Orthoses delivered**

The total number of orthoses delivered during the reporting period.

### **Orthoses delivered to mine victims**

The number of orthoses delivered, during the reporting period, specifically to victims of mines or explosive remnants of war.

### **Patients receiving physiotherapy at the centres**

The number of patients who received physiotherapy services at the centres during the reporting period.

### **Mine victims receiving physiotherapy at the centres**

The number of mine victims who received physiotherapy services at the centres during the reporting period.

### **Crutches and sticks delivered (units)**

The number of crutches and sticks (units, not pairs) delivered during the reporting period.

### **Wheelchairs delivered**

The number of wheelchairs delivered during the reporting period.