

# AMERICAS

## KEY RESULTS/CONSTRAINTS IN 2016

- ▶ The ICRC continued to act as a neutral intermediary during peace talks between the Colombian government and an armed group; it also played that role to help facilitate transfers of people held by armed groups and of human remains.
- ▶ Violence-affected people in the region, including IDPs, received ICRC support to meet their basic needs, boost their livelihoods and obtain health care. The youth in some urban areas accessed educational and recreational activities.
- ▶ Migrants eased their journey at ICRC-supported centres offering water, health and family-links services and/or lodging along the migration route, particularly in Mexico. Deported minors returned home with ICRC travel allowances.
- ▶ Detainees, including migrants, received standard ICRC visits. With ICRC input, detaining authorities finalized the sentences of some inmates, provided basic health services to detainees and upgraded prison infrastructure.
- ▶ Drawing on ICRC guidance, the region's military and police forces refined their understanding of IHL and/or international policing standards. States ratified or acceded to IHL-related treaties, such as those on weapons control.
- ▶ Movement partners coordinated their activities to aid victims of an earthquake in Ecuador and a hurricane in Haiti. The region's National Societies boosted their emergency response capacities, including their family-links services.

PROTECTION	Total
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>	
<b>Restoring family links</b>	
RCMs collected	100
RCMs distributed	68
Phone calls facilitated between family members	83,995
Tracing cases closed positively (subject located or fate established)	194
People reunited with their families	1
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>	
<b>ICRC visits</b>	
Detainees visited	169,871
Detainees visited and monitored individually	601
Number of visits carried out	344
Number of places of detention visited	131
<b>Restoring family links</b>	
RCMs collected	861
RCMs distributed	614
Phone calls made to families to inform them of the whereabouts of a detained relative	40

ASSISTANCE	2016 Targets (up to)	Achieved
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>		
<b>Economic security (in some cases provided within a protection or cooperation programme)</b>		
Food commodities	Beneficiaries	5,000 2,831
Essential household items	Beneficiaries	35,000 4,522
Productive inputs	Beneficiaries	10,820 14,726
Cash	Beneficiaries	171,658
Services and training	Beneficiaries	220 140,077
<b>Water and habitat (in some cases provided within a protection or cooperation programme)</b>		
Water and habitat activities	Beneficiaries	95,800 106,798
<b>Health</b>		
Health centres supported	Structures	6 16
<b>WOUNDED AND SICK</b>		
<b>Hospitals</b>		
Hospitals supported	Structures	3 15
<b>Water and habitat</b>		
Water and habitat activities	Number of beds	242
<b>Physical rehabilitation</b>		
Projects supported	Projects	19 18
Patients receiving services	Patients	2,500 19,608

EXPENDITURE IN KCHF	
Protection	22,525
Assistance	26,861
Prevention	17,766
Cooperation with National Societies	6,869
General	1,041
<b>Total</b>	<b>75,062</b>
<i>Of which: Overheads</i>	<i>4,581</i>

IMPLEMENTATION RATE	
Expenditure/yearly budget	94%
<b>PERSONNEL</b>	
Mobile staff	143
Resident staff (daily workers not included)	629



**DELEGATIONS**

Colombia  
Haiti

**REGIONAL DELEGATIONS**

Brasilia  
Caracas  
Lima  
Mexico City  
Washington  
New York

 ICRC delegation  
  ICRC regional delegation  
  ICRC mission



**Mexico, Ciudad Serdán.** The ICRC and the Mexican Red Cross provide assistance to migrants. An ICRC employee explains to migrants the information they can find in the ICRC leaflet promoting self-care.

## HUMANITARIAN NEEDS AND RESPONSES

In 2016, the ICRC helped people cope with the consequences of armed conflict and other situations of violence in the region, and assisted vulnerable migrants and detainees. In most cases, it worked with the region's National Societies and other local partners.

Colombia remained the ICRC's largest operation in the Americas. Although the Colombian government and the Revolutionary Armed Forces of Colombia – People's Army (FARC-EP) finalized peace talks amid a sustained ceasefire, which resulted in an overall drop in violence, hostilities between government troops and other armed groups persisted. The ICRC continued to encourage the parties concerned to respect IHL and other applicable norms. It continued to act as a neutral intermediary during the peace talks between the Colombian government and the FARC-EP; it played the same role to help facilitate the transfer of people held by armed groups and of human remains to the authorities or relatives concerned. The ICRC provided various types of support for families of missing persons (see below).

Colombian State services continued to benefit from ICRC input to enhance their capacities to meet the material needs of IDPs and other vulnerable people in rural and urban areas. Gaps in those services were filled by direct assistance to the people concerned, which the ICRC usually provided with the Colombian Red Cross. Distributions of food and cash helped households meet their daily needs, and the provision of productive inputs or livelihood grants enabled breadwinners to work towards self-sufficiency. The National Society and the ICRC upgraded water and other community infrastructure to help IDPs and residents – especially those living in areas affected by weapon contamination – reduce their exposure to risks.

Elsewhere in the region, vulnerable members of communities received various forms of ICRC support to cope with the consequences of armed violence. Those in Peru's Apurímac-Ene and Mantaro Valley (VRAEM), in northern Paraguay and in parts of Guatemala, Honduras and Panama accessed potable water from newly built or refurbished facilities; others drew on material and financial assistance to start or resume income-generating activities. The ICRC partnered with or supported National Societies and health and educational institutions providing psychosocial care to victims of violence in, for example, Guatemala, southern Chile and three Mexican states. With ICRC support, health and education officials in Brazil implemented measures to mitigate the effects of armed violence in municipalities of Rio de Janeiro and other cities. Residents of violence-prone areas in El Salvador, Honduras and Jamaica, including young people, accessed recreational and educational activities with the help of the National Society concerned and the ICRC.

To help ensure that wounded, sick and disabled persons and victims of sexual violence across the region obtained good-quality health care, the ICRC provided material and/or infrastructural support and training to emergency responders and health personnel or facilities. In support of the goals of the Health Care in Danger project, it acted as a neutral intermediary, accompanying Colombian health staff in conflict-affected areas. The Peruvian health ministry and the Peruvian Red Cross adopted an ICRC primer detailing the rights and duties of health personnel, for nationwide distribution to the personnel concerned. In Chile, the health ministry implemented a tool to monitor situations affecting health services in two places. In the Bolivarian Republic of Venezuela (hereafter Venezuela), medical staff from public and military hospitals honed their skills in treating people wounded



by firearms and explosives. Vulnerable residents and Colombian migrants in Venezuelan states bordering Colombia obtained basic health services provided by the Venezuelan Red Cross, with ICRC backing.

Migrants traveling through Guatemala, Honduras and Mexico eased their journey at ICRC-supported facilities along the migration route, where they obtained drinking water, health care, family-links services and/or temporary lodgings. Informational materials distributed along the route apprised them of the location of assistance points and how to stay safe. In Guatemala and Honduras, deported minors, and the relatives accompanying them, received ICRC travel allowances for the journey home. The ICRC provided ad hoc support to help the authorities concerned – including those in Costa Rica, El Salvador and Panama – address the influx of migrants in the region and launch or expand some of these activities.

The ICRC continued to help local partners in Mexico and Central and South America boost their capacities to search for missing persons and address the needs of these persons' families. Forensic personnel and health staff received training and technical input to manage human remains and related data, and to provide psychosocial support to families of the missing, respectively. With ICRC financial support, families in Peru travelled to exhumation sites to participate in the search for their missing kin; those in Colombia and Guatemala arranged or attended dignified burials for relatives who were located after years of being unaccounted for. In Peru, the authorities approved a bill and a related national plan that waived – on purely humanitarian grounds – the need for judicial proceedings for exhumations of people who had died in relation to the 1980–2000 conflict. Argentina and the United Kingdom of Great Britain and Northern Ireland agreed to have the ICRC recover and identify the remains of Argentine soldiers who had perished during the 1982 conflict between them.

Other people separated from relatives owing to armed conflict and other violence, detention, natural disaster or other circumstances maintained or restored contact through family-links services offered by the National Societies and the ICRC. After an earthquake struck northern Ecuador, the Ecuadorean Red Cross led the Movement's response, which focused on providing victims with these services.

Across the region, detainees received ICRC visits conducted according to the organization's standard procedures. Those visited included security detainees, migrants, and internees at the US internment facility at Guantanamo Bay Naval Station in Cuba. Following the visits, the ICRC shared its findings confidentially with the pertinent authorities. In May, it suspended its activities for people held in prisons in El Salvador, after officials implemented stricter detention measures there in order to curb gang violence. It remained unable to visit inmates in Venezuela.

Penitentiary authorities across the region drew on different kinds of ICRC assistance to improve detainees' treatment and living conditions. The Peruvian authorities approved a directive for the provision of comprehensive care and treatment for female detainees. Haitian officials followed up the cases of people held in prolonged pre-trial detention, resulting in the release of dozens of detainees. In Colombia, the ICRC reoriented its activities for detainees to focus on advising penitentiary authorities on systemic detention issues at the policy level. In parts of the region, inmates

benefited from improved health services and infrastructure. For example, in Haiti, newly detained people were vaccinated against cholera, and malnourished inmates given ad hoc food supplements provided by the ICRC. Upgrades to water, sanitation and other facilities, as in the Plurinational State of Bolivia, Honduras, Paraguay and hurricane-affected prisons in Haiti, helped enhance detainees' living conditions.

The ICRC sustained its dialogue with State weapon bearers, urging them to respect IHL and/or international human rights law. It informed them of documented allegations of abuse, with a view to encouraging them to prevent recurrences. As a result, military troops in Peru's VRAEM region cleared weapon-contaminated areas. The ICRC also provided technical input during briefings and workshops, to help the armed and police forces incorporate IHL and/or pertinent internationally recognized standards into their operations and training. Officials from Canada and the United States of America drew on ICRC expertise to incorporate measures to protect civilians in the various stages of their military operations abroad. Forces in charge of maintaining national security – including military troops involved in police operations, as in Belize, Jamaica and Trinidad and Tobago – learnt more about international norms governing the use of force. Police commanders in the region exchanged good practices with their peers at the first event organized for that purpose, by the Ecuadorean interior ministry and police and the ICRC. Dialogue resumed between the Venezuelan police and the ICRC on topics of common interest.

With help from their national IHL committees and the ICRC, governments advanced IHL implementation: Peru ratified the Arms Trade Treaty, and Cuba and El Salvador acceded to the Convention on Cluster Munitions and the Rome Statute, respectively. Some governments also contributed to the ICRC's study of customary IHL. Through regular contact with and presentations at events run by UN and regional bodies, their Member States and other pertinent organizations, the ICRC called attention to topics of humanitarian concern worldwide. It emphasized subjects such as the protection of the civilian population, displacement, weapons control, peacekeeping and the humanitarian situation in the Lake Chad region and in the Middle East. These efforts helped shape the international humanitarian agenda and the content of the policies and resolutions adopted.

To raise public awareness of and support for humanitarian principles and for the Movement and its activities around the world, the ICRC held various events and produced communication materials for traditional and new media.

With the International Federation, the ICRC helped National Societies working in the region build their capacities to respond to emergencies and to assist victims of conflict and other violence in line with the Safer Access Framework. Regular coordination meetings between Movement components and with UN agencies and other humanitarian players resulted in more efficient humanitarian action. In Haiti, coordination agreements among Movement partners helped facilitate resource mobilization and humanitarian aid in the wake of Hurricane Matthew.

## PROTECTION MAIN FIGURES AND INDICATORS

PROTECTION													
	CIVILIANS												
	RCMs collected	RCMs distributed	Phone calls facilitated between family members	Names published on the ICRC family-links website	People reunited with their families	People transferred/repatriated	Human remains transferred/repatriated	People located (tracing cases closed positively)	Detainees visited	<i>of whom women</i>	<i>of whom minors</i>	Detainees visited and monitored individually	<i>of whom women</i>
Colombia	52	31				27	17	178	63,892	5,304	1,224	253	19
Haiti	40		574	188					10,750	712	295		
Brasilia (regional)			1						13,513	1,072	60	107	7
Lima (regional)	1	9	128					12	39,158	1,691	31	147	30
Mexico City (regional)	5	18	82,869		1			4	42,451	1,730	2,375	12	
Washington (regional)	2	10	423						107			82	
<b>Total</b>	<b>100</b>	<b>68</b>	<b>83,995</b>	<b>188</b>	<b>1</b>	<b>27</b>	<b>17</b>	<b>194</b>	<b>169,871</b>	<b>10,509</b>	<b>3,985</b>	<b>601</b>	<b>56</b>

PEOPLE DEPRIVED OF THEIR FREEDOM

<i>of whom girls</i>	<i>of whom boys</i>	Detainees newly registered	<i>of whom women</i>	<i>of whom girls</i>	<i>of whom boys</i>	Number of visits carried out	Number of places of detention visited	RCMs collected	RCMs distributed	Phone calls made to families to inform them of the whereabouts of a detained relative	Detainees visited by their relatives with ICRC/National Society support	People to whom a detention attestation was issued	
5	48	114	9	5	41	122	32	17	2		41		Colombia
						44	18	69	36	7			Haiti
		30	3			46	20	1			43		Brasilia (regional)
		7				42	21	11	1	5	118	2	Lima (regional)
						82	39	34	8	28	5	4	Mexico City (regional)
						8	1	729	567			1	Washington (regional)
<b>5</b>	<b>48</b>	<b>151</b>	<b>12</b>	<b>5</b>	<b>41</b>	<b>344</b>	<b>131</b>	<b>861</b>	<b>614</b>	<b>40</b>	<b>207</b>	<b>7</b>	<b>Total</b>

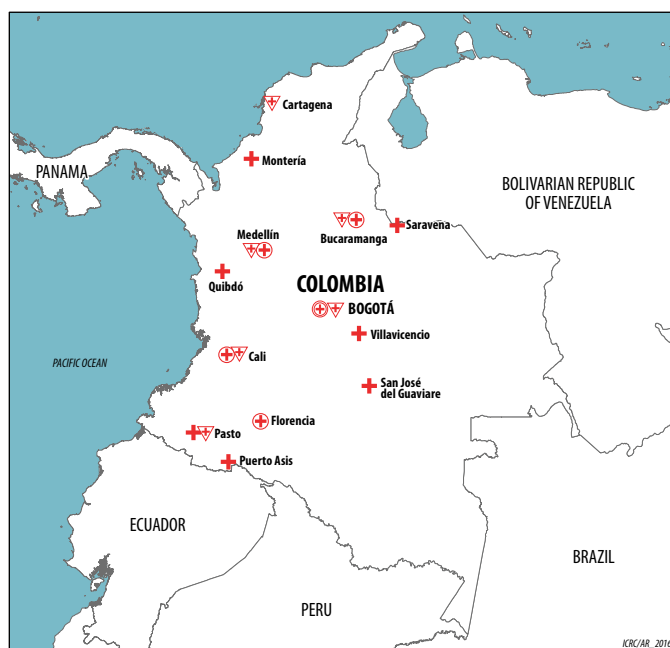
## ASSISTANCE MAIN FIGURES AND INDICATORS

ASSISTANCE										
	CIVILIANS									PEOPLE DEPRIVED OF THEIR FREEDOM
	CIVILIANS - BENEFICIARIES						HEALTH CENTRES			
	Food commodities	Essential household items	Productive inputs	Cash	Services and training	Water and habitat activities	Health centres supported	Average catchment population	Consultations	Essential household items
Colombia	2,805	4,338	14,291	170,718	139,727	17,406	3	2,433		
Haiti					200					1,749
Brasilia (regional)			435			1,737				
Lima (regional)	26	121		695		2,662				7
Mexico City (regional)		63		245	150	84,993	13	125,980	29,694	
<b>Total</b>	<b>2,831</b>	<b>4,522</b>	<b>14,726</b>	<b>171,658</b>	<b>140,077</b>	<b>106,798</b>	<b>16</b>	<b>128,413</b>	<b>29,694</b>	<b>1,756</b>
of whom women	731	1,279	4,099	55,476	49,926	8,034				294
of whom children	1,366	2,010	7,065	69,535	48,003	7,354				46
of whom IDPs	217	369	4,337	163,596	138,227	916				

PEOPLE DEPRIVED OF THEIR FREEDOM	WOUNDED AND SICK									
	FIRST AID	HOSPITAL	PHYSICAL REHABILITATION							
			Projects supported	Patients receiving services	New patients fitted with prostheses	New patients fitted with orthoses	Prostheses delivered	Orthoses delivered		
Water and habitat activities	First-aid posts supported	Hospitals supported	Projects supported	Patients receiving services	New patients fitted with prostheses	New patients fitted with orthoses	Prostheses delivered	Orthoses delivered	Patients receiving physiotherapy	
7,681	8	14	11	11,922	350	5,147	644	8,161	4,398	Colombia
3,901										Haiti
3,902										Brasilia (regional)
1,642										Lima (regional)
19,405		1	7	7,686	149	852	250	1,141	5,781	Mexico City (regional)
<b>36,531</b>	<b>8</b>	<b>15</b>	<b>18</b>	<b>19,608</b>	<b>499</b>	<b>5,999</b>	<b>894</b>	<b>9,302</b>	<b>10,179</b>	<b>Total</b>
2,387				7,338	118	1,193	178	2,002	5,403	of whom women
78				5,369	54	3,417	69	5,209	704	of whom children
										of whom IDPs



# COLOMBIA



ICRC delegation ICRC sub-delegation ICRC office/presence ICRC-supported physical rehabilitation project

## KEY RESULTS/CONSTRAINTS IN 2016

- ▶ As a neutral intermediary, the ICRC facilitated: the handover of 27 people held by armed groups; the transfer of demobilized child soldiers to reception centres; and the recovery of the remains of 17 people killed in the fighting.
- ▶ Families of missing persons coped with their situation with the help of psychosocial care and financial assistance provided by the ICRC and local partners.
- ▶ Thousands of IDPs and other vulnerable people in both urban and rural areas worked to recover their food-production capacities and livelihoods, with the help of ICRC-provided supplies and equipment and cash assistance.
- ▶ IDPs and residents in over 30 communities reduced their exposure to health hazards and risks posed by mines, partly through ICRC upgrades to their water, sanitation and shelter facilities, and promotion of good hygiene practices.
- ▶ With ICRC advice, the authorities revised their policies on solitary confinement, the use of force and other disciplinary measures; they were also better placed to apply laws protecting minors formerly associated with armed groups.
- ▶ Sick and weapon-wounded people, disabled persons and victims of sexual violence received appropriate care, with ICRC support. Weapon bearers were reminded of the necessity of facilitating the safe delivery of health care.

## EXPENDITURE IN KCHF

Protection	8,705
Assistance	13,855
Prevention	3,064
Cooperation with National Societies	1,166
General	522
<b>Total</b>	<b>27,313</b>
<i>Of which: Overheads</i>	<i>1,667</i>

## IMPLEMENTATION RATE

Expenditure/yearly budget	88%
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## PERSONNEL

Mobile staff	66
Resident staff (daily workers not included)	301

In Colombia since 1969, the ICRC strives to protect and assist victims of armed conflicts and other situations of violence, secure greater compliance with IHL by all weapon bearers, and promote integration of IHL and international human rights norms into the security forces' doctrine, training and operations. The ICRC visits security detainees. It supports efforts to address the needs of families of missing persons, provides relief to violence-affected IDPs and residents, and helps ensure their access to health care. It runs a comprehensive mine-action programme. It works closely with the Colombian Red Cross and other Movement components active in Colombia.

## YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action	<b>HIGH</b>
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PROTECTION	Total
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>	
<b>Restoring family links</b>	
RCMs collected	52
RCMs distributed	31
Tracing cases closed positively (subject located or fate established)	178
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>	
<b>ICRC visits</b>	
Detainees visited	63,892
Detainees visited and monitored individually	253
Number of visits carried out	122
Number of places of detention visited	32
<b>Restoring family links</b>	
RCMs collected	17
RCMs distributed	2

ASSISTANCE	2016 Targets (up to)	Achieved
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>		
<b>Economic security (in some cases provided within a protection or cooperation programme)</b>		
Food commodities	Beneficiaries 5,000	2,805
Essential household items	Beneficiaries 5,000	4,338
Productive inputs	Beneficiaries 10,600	14,291
Cash	Beneficiaries	170,718
Services and training	Beneficiaries	139,227
<b>Water and habitat (in some cases provided within a protection or cooperation programme)</b>		
Water and habitat activities	Beneficiaries 16,500	17,406
<b>Health</b>		
Health centres supported	Structures	3
<b>WOUNDED AND SICK</b>		
<b>Hospitals</b>		
Hospitals supported	Structures	14
<b>Water and habitat</b>		
Water and habitat activities	Number of beds	84
<b>Physical rehabilitation</b>		
Projects supported	Projects 8	11
Patients receiving services	Patients	11,922

## CONTEXT

In October 2016, the Colombian public voted not to ratify the peace agreement between the government and the Revolutionary Armed Forces of Colombia – People’s Army (FARC-EP). The parties revised their peace agreement; after its approval by the Colombian Congress, it was implemented in December 2016. The parties continued to implement an agreement on clarifying the fate of missing people, and pursued their commitment to demobilize child soldiers. Minors formerly associated with armed groups were transferred to reception centres run by other humanitarian organizations or the State.

The peace agreement, accompanied by a sustained ceasefire, resulted in a decrease in the violence related to the armed conflict. However, situations of violence involving other armed groups continued, especially in urban centres such as Buenaventura and Medellín. The government authorized the use of military force to combat some of these groups. Despite ongoing hostilities, negotiations between the government and the National Liberation Army continued.

People continued to suffer the consequences of the armed conflicts and other violence: among others, disappearance, displacement, sexual violence and restricted access to basic services.

The Colombian Constitutional Court issued a ruling declaring the situation in the country’s penitentiary system as unconstitutional, particularly with regard to overcrowding.

## ICRC ACTION AND RESULTS

The ICRC maintained its operational presence in rural and urban areas affected by conflict and other violence. It continued its confidential dialogue with parties to the conflicts and other weapon bearers and, where necessary, reminded them of their obligations under IHL or other applicable laws through oral and written representations based on documented allegations of abuses. These activities, along with acceptance of the organization’s role as a neutral intermediary, enabled it to: receive information on the fate of missing persons; recover human remains for identification and burial; facilitate the handover of people, especially children, held by armed groups; and promote the safe delivery of health-care services in violence-affected communities.

To foster long-term compliance with the applicable norms, the ICRC continued supporting the armed and security forces’ efforts to incorporate IHL and other pertinent norms in their training and doctrine. With ICRC support, government officials and relevant stakeholders discussed, at various events, IHL issues specific to Colombia’s situation, such as non-international armed conflicts and victims’ rights. Colombia worked towards ratifying the Arms Trade Treaty.

The ICRC shared its recommendations on a draft law establishing a national mechanism for clarifying the fate of missing persons. It reinforced its response to missing persons’ families; it published a report on their needs, and urged the authorities to take the necessary measures to address them. At ICRC-organized workshops, the authorities tackled the importance of a multi-disciplinary approach – combining forensic identification, and economic, legal and psychosocial support – to meeting these families’ needs. With the Colombian Red Cross, the ICRC shared with the families concerned ways to cope with their economic, legal and psychological needs; with local partners, it provided psychosocial care for them.

The ICRC focused its assistance activities towards helping State services strengthen their ability to respond to the needs of IDPs and other vulnerable people. Where budgetary constraints or the volume of victims’ claims hampered State services, the ICRC, by itself or with the National Society, helped fill gaps in State coverage. Distributions of cash and food, and livelihood-support initiatives, helped vulnerable families cover their immediate needs or work towards self-sufficiency. Upgrades to water and sanitation facilities helped IDPs and residents – including people in areas contaminated with mines or explosive remnants of war (ERW) – reduce the risk to their safety.

With ICRC help, sick and weapon-wounded people, disabled persons and victims of sexual violence received suitable medical attention. Health personnel learnt more about their rights and duties, and received markers bearing protective emblems, which helped them deliver their services safely.

The ICRC continued to visit detainees according to its standard procedures; afterwards, it confidentially shared its findings with the authorities. Detainees restored contact with their families through the Movement’s family-links services. The ICRC concluded its material assistance to the detaining authorities in 2016, and began shifting towards a more advisory role in detention-related activities. It focused on advising central authorities on addressing system-wide detention-related issues at policy level, following the Colombian Constitutional Court’s ruling (see *Context*). With ICRC technical advice, the authorities continued revising their policies on solitary confinement, the use of force and other disciplinary measures, and worked to address health emergencies in prisons. Penitentiary officials from 13 countries participated in the first regional conference on prison management in Latin America.

The ICRC broadened public awareness of IHL and humanitarian issues in Colombia through its report *Humanitarian Challenges 2016* and other communication materials picked up by local media outlets.

Regular cooperation helped the National Society and the ICRC to improve their capacities to address humanitarian needs. With ICRC support, the National Society integrated the Safer Access Framework into its volunteers’ training.

## CIVILIANS

Parties to the conflicts and the ICRC held confidential dialogue on: the protection of civilians; the release of minors associated with armed groups; missing persons; and sexual violence. Weapon bearers were reminded of their obligations under IHL or other applicable laws, through oral or written representations made by the ICRC based on documented allegations of abuses, including attacks on people seeking or delivering health-care services. The ICRC discussed with the parties the consequences of sexual violence and the means of preventing it; and provided vulnerable people with brochures outlining ways of reducing the risks of sexual violence.

Parties affirmed their understanding of and acceptance for the ICRC’s role as a neutral intermediary, particularly in connection with the peace talks between the Colombian government and the FARC-EP, and their humanitarian demining projects. The ICRC also participated in the technical committee in charge of implementing the agreement between the Colombian government and the FARC-EP on missing persons.

### **Minors held by armed groups rejoin their families**

As a neutral intermediary, the ICRC facilitated the return of 27 people held by armed groups – including 15 minors – to their families, with the agreement of all parties concerned. It also assisted in the transfer of 13 minors formerly associated with the FARC-EP to reception centres run by the State or other humanitarian organizations; where appropriate, the ICRC helped restore contact between them and their families.

Twenty other demobilized minors spent time with their families during ICRC-organized visits. Family members dispersed by armed conflict or detention restored contact through the Movement's family-links services. With ICRC assistance, over 755 people facing threats linked to the conflicts or other violence reached safer places, and some 75 families covered funeral expenses for relatives killed in the fighting.

### **Missing persons' families receive psychosocial support**

As per the agreement between the Colombian government and the FARC-EP on missing persons, the ICRC, acting as a neutral intermediary, recovered the remains of ten people and turned them over to the authorities. Five were identified, and four returned to their families, who received psychosocial support throughout the process. The remains of seven other people were handed over by an armed group and community members to the ICRC, which turned them over to the authorities.

Over 160 relatives of missing persons received psychosocial care from health-care personnel or ICRC-trained local partners. At support-group sessions facilitated by the Colombian Red Cross and the ICRC, 72 members of missing persons' families learnt how to manage their economic, legal and psychological needs. With the ICRC's financial assistance, 22 families gave their relatives' remains a dignified burial. Another 87 families (121 people) received cash for rebuilding their livelihoods.

The ICRC made recommendations, to the parties concerned, for a draft law establishing a national mechanism for clarifying the fate of missing persons. It also released its assessment of the needs of missing persons' families in a public report; findings were used to urge or help the authorities to improve measures assisting these families. At ICRC-facilitated workshops, more than 280 government officials, prosecutors, investigators, forensic experts and National Society volunteers were reminded of the rights of missing persons' families, and urged to address these families' needs through an approach combining forensic identification with economic, legal and psychosocial support.

ICRC training helped emergency responders – including civil defence personnel, firefighters and National Society volunteers – strengthened their ability to manage human remains during disasters. Cemetery workers learnt ways to improve the management of unidentified or unclaimed human remains; 461 vaults were constructed in the central cemetery of Buenaventura. At ICRC-organized seminars, forensic experts discussed the standardization of forensic procedures. The ICRC collected biological samples from several missing persons' families, and monitored their processing by forensic services.

### **Newly arrived IDPs in urban centres meet their immediate needs with cash assistance**

The State's victim assistance unit and other institutions drew on ICRC support to help IDPs and other vulnerable people. They received cash and technical or material support for service delivery,

benefitting over 154,000 and 138,000 people, respectively. For example, they used ICRC-donated computers and office equipment to file victims' statements and expedite administrative processes, thereby delivering assistance to beneficiaries more quickly.

Where budgetary constraints or the sheer volume of victims' claims hampered State services, the ICRC, by itself or with the National Society, helped fill gaps in State coverage. Distributions of food to over 2,800 IDPs and other conflict-affected people (700 households), and household essentials for over 4,300 people (1,000 households), helped them meet their immediate needs. Some 3,000 IDPs (760 households) who had recently arrived in urban centres also received cash assistance.

Where circumstances allowed, the ICRC helped IDPs work towards self-sufficiency: over 1,400 breadwinners (supporting over 5,900 people) received cash for vocational training or as partial coverage of their salaries; 246 households (984 people) earned income from small businesses they had established with ICRC-provided materials. Over 3,260 households (10,147 people) in rural areas used ICRC-provided agricultural inputs to increase or diversify their harvests, allowing them to consume or sell more food. Beneficiaries included 372 agricultural students who developed techniques for improving their community's food production.

Some 900 IDPs and around 16,500 residents from Buenaventura and 32 rural areas decreased their exposure to health hazards through ICRC hygiene-promotion sessions and upgrades to their water, sanitation and shelter facilities. Through similar projects, 2,797 people also reduced their exposure to mines or ERW; over 1,770 children were encouraged to attend class following improvements to their school facilities. At ICRC-organized workshops, nearly 14,000 community members and local authorities learnt more about victims' rights and safe practices in weapon-contaminated areas.

### **Victims of sexual violence receive suitable care**

Around 170 victims of sexual violence coped with their situation, with ICRC-provided medical and psychological care. At ICRC-facilitated workshops, local service providers and National Society volunteers trained to provide psychological first aid. The ICRC donated medical supplies to, or repaired the facilities of, three health centres to help them cope with influxes of patients.

To facilitate people's safe access to health care in conflict-affected areas, the ICRC monitored attacks against people delivering or seeking health care and made representations to the parties concerned. About 6,000 health personnel received markers bearing protective emblems, including some for use on facilities and vehicles. With ICRC support, National Society volunteers, community members and health personnel learnt more about their rights and duties, and ways to promote respect for health-care services; three universities incorporated these topics in their curricula.

## **PEOPLE DEPRIVED OF THEIR FREEDOM**

The ICRC visited detainees in accordance with its standard procedures, and confidentially shared with the authorities feedback to help them ensure that detainees' treatment and living conditions conformed to internationally recognized standards.

### **Authorities work towards refining criminal policies and disciplinary measures**

The ICRC concluded its material support to the detaining authorities in 2016; it began shifting towards a more advisory role in its

detention-related activities. It focused on advising central authorities on addressing system-wide issues, such as: overcrowding, and updating criminal policies and reinforcing respect for judicial guarantees. The ICRC's advisory role was facilitated by its participation in the committee charged with following up the Constitutional Court's ruling (see *Context*).

Senior penitentiary officials from 13 Latin American countries participated in the first regional conference on prison management, organized by the ICRC and Colombian penitentiary authorities. The participants discussed such matters as the challenges posed by overcrowding, the importance of training prison staff and the need for a standardized model for prison management. Colombian authorities were urged to adopt an ICRC-designed model for handling health emergencies in prisons and ensuring vulnerable detainees' timely access to health care. They drew on ICRC technical advice to ensure that the infrastructure of newly constructed prisons, especially for women and minors, complied with the minimum internationally recognized standards. Over 7,600 detainees had improved living conditions after ICRC-supported upgrades to their water, sanitation and dining facilities.

Judiciary and penitentiary authorities drew on ICRC expertise to revise their policies on solitary confinement, the use of force and other disciplinary measures; some 240 penitentiary officers underwent training in the proper use of force. A task force of 31 judges responsible for carrying out sentences visited selected detention centres with the ICRC; the aim was to assess detainees' living conditions, with a view to establishing clearer criteria for alternative sentences, such as house arrest and conditional release.

With ICRC support, authorities in the juvenile penal system developed their ability to apply laws protecting minors formerly associated with armed groups. Detained minors, including those formerly associated with armed groups, contacted their relatives through RCMs; 30 adolescents spent time with their families during ICRC-organized visits.

## WOUNDED AND SICK

Through ICRC assistance, some 1,400 wounded and sick people obtained adequate care. One-off donations of medical supplies were made to 22 hospitals and first-aid posts, to help them cope with influxes of patients.

Over 11,900 disabled people received services or assistive devices, or both, at six ICRC-supported physical rehabilitation centres. Among them, 341 people – including 73 detainees, some injured by mines or ERW prior to detention – covered their transportation, accommodation and treatment expenses, with ICRC assistance. Drawing on ICRC technical advice, the national health authorities and two training institutes enhanced the implementation of good practices in providing prosthetic and orthotic services, and over 84 prosthetic-orthotic technicians honed their skills at specialized courses. Two wheelchair-manufacturing facilities, and the physical rehabilitation section of one hospital, maintained the quality of their services with spare parts and supplies from the ICRC.

Through training conducted by the ICRC, by itself or with the National Society, some 1,400 people from areas contaminated with mines or ERW strengthened their first-aid skills; over 500 medical personnel and students learnt more about weapon-wound management.

## ACTORS OF INFLUENCE

Dialogue with the authorities and with weapon bearers emphasized the necessity of ensuring the safe and unhindered delivery of humanitarian aid, particularly health services, to communities affected by conflict and other violence. Such contact facilitated the ICRC's activities and fostered acceptance for the ICRC's role as a neutral intermediary.

The ICRC maintained its efforts to strengthen dialogue with armed groups in violence-affected urban areas, such as Buenaventura and Medellín.

### The Colombian military incorporates IHL in its doctrine

The armed forces continued their cooperation with the ICRC in integrating IHL and international human rights law into their doctrine, with a view to completing the process by 2020. With ICRC technical support, the armed forces and the national police continued integrating these bodies of law into their respective educational and training curricula. Drawing on ICRC technical input, the armed forces assessed their incorporation of IHL in their doctrine and refined their protocols for preventing sexual violence, during self-evaluation exercises and round-tables (see *Civilians*).

With ICRC support, 1,700 members of the armed and security forces attended training in IHL and international standards for the use of force, particularly for their joint law enforcement operations. They incorporated learnings from such training in their own exercises, with a view to instructing their staff in the same topics. Senior police officers discussed methods for handling violent social protests, and other topics, at a regional colloquium in Ecuador (see *Lima*).

### Policy-makers discuss how to uphold conflict victims' rights

At two public panels organized by academic institutions and the ICRC, some 350 government officials and other stakeholders discussed IHL issues pertinent to Colombia's situation: for instance, the participation of civilians in hostilities and the provision on non-international armed conflicts in the updated Commentary on the First Geneva Convention. Public servants tested their knowledge of IHL in the fifth Augusto Ramírez Ocampo Course on IHL, organized jointly by the national IHL committee and the ICRC. At the first ICRC-organized workshop on overcoming challenges in the application of IHL in Colombia, key legal stakeholders discussed policy-making in connection with IHL and victims' rights, and measures for attending to the needs of missing people's families (see *Civilians*).

Colombia passed a law officially recognizing the Arms Trade Treaty as binding; the foreign affairs ministry prepared to deposit instruments of ratification, the final step in the ratification process.

### The media broaden public awareness of the needs of victims of conflict and other violence

ICRC public communication efforts focused on broadening awareness of humanitarian issues related to: the plight of missing people and their families; the needs of detainees; urban violence; and the long-term impact of weapon contamination. These efforts included: regularly posting multimedia material on the ICRC's website and on social media platforms; and publishing the delegation's report on IHL and humanitarian issues, *Humanitarian Challenges 2016*, which was made available to decision-makers at local and national levels. Media organizations relayed the report's key messages to the wider public; partner television stations – in



Medellín, for instance – adapted the report into a series of news pieces highlighting victims’ stories.

Sustained contact with journalists and opinion-makers contributed to the media focus on the aforementioned points. At two courses, 80 journalists learnt about the protection afforded to them by IHL; senior editors were encouraged to report accurately on IHL and humanitarian issues.

## RED CROSS AND RED CRESCENT MOVEMENT

The Colombian Red Cross continued responding to the needs of people affected by conflict and other violence in the country (see *Civilians*); it bolstered its capacity to do so with ICRC technical and financial support. For instance, the National Society incorporated the Safer Access Framework in its training programme; ICRC-trained National Society instructors briefed volunteers and staff from 16 branches, thereby enhancing their ability to operate safely in violence-affected areas. With ICRC help, the National Society also strengthened its financial management and upgraded the infrastructure of its branches.

The National Society and the ICRC further strengthened their partnership by developing joint strategies for activities such as addressing the issue of missing persons and training security forces in human rights law and the use of force (see *Actors of influence*). Regular meetings reinforced coordination among Movement partners and facilitated the exchange of security-related information. The National Society also took part in the coordinated Movement response to the earthquake in Ecuador in April 2016 (see *Lima*).

MAIN FIGURES AND INDICATORS: PROTECTION		Total			
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>					
<b>RCMs and other means of family contact</b>			UAMs/SC		
RCMs collected		52	46		
RCMs distributed		31	12		
<b>Reunifications, transfers and repatriations</b>					
People transferred or repatriated		27			
Human remains transferred or repatriated		17			
<b>Tracing requests, including cases of missing persons</b>			Women	Girls	Boys
People for whom a tracing request was newly registered		649	81	61	121
Tracing cases closed positively (subject located or fate established)		178			
Tracing cases still being handled at the end of the reporting period (people)		936	86	72	164
	<i>including people for whom tracing requests were registered by another delegation</i>	2			
<b>Documents</b>					
Official documents relayed between family members across borders/front lines		1			
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>					
<b>ICRC visits</b>			Women	Minors	
Detainees visited		63,892	5,304	1,224	
			Women	Girls	Boys
Detainees visited and monitored individually		253	19	5	48
Detainees newly registered		114	9	5	41
Number of visits carried out		122			
Number of places of detention visited		32			
<b>RCMs and other means of family contact</b>					
RCMs collected		17			
RCMs distributed		2			
Detainees visited by their relatives with ICRC/National Society support		41			

MAIN FIGURES AND INDICATORS: ASSISTANCE		Total	Women	Children
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>				
<b>Economic security (in some cases provided within a protection or cooperation programme)</b>				
Food commodities	Beneficiaries	2,805	724	1,349
	<i>of whom IDPs</i>	217	76	76
Essential household items	Beneficiaries	4,338	1,236	1,923
	<i>of whom IDPs</i>	369	125	137
Productive inputs	Beneficiaries	14,291	3,979	6,854
	<i>of whom IDPs</i>	3,937	1,383	1,604
Cash	Beneficiaries	170,718	55,124	69,286
	<i>of whom IDPs</i>	163,596	52,746	66,478
Services and training	Beneficiaries	139,727	49,836	47,928
	<i>of whom IDPs</i>	138,227	49,311	47,403
<b>Water and habitat (in some cases provided within a protection or cooperation programme)</b>				
Water and habitat activities	Beneficiaries	17,406	5,396	6,422
	<i>of whom IDPs</i>	916	284	321
<b>Health</b>				
Health centres supported	Structures	3		
Average catchment population		2,433		
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>				
<b>Economic security (in some cases provided within a protection programme)</b>				
Productive inputs	Beneficiaries	78	78	
Cash	Beneficiaries	92	83	7
<b>Water and habitat (in some cases provided within a protection or cooperation programme)</b>				
Water and habitat activities	Beneficiaries	7,681	1,843	
<b>WOUNDED AND SICK</b>				
<b>Hospitals</b>				
Hospitals supported	Structures	14		
Patients whose hospital treatment has been paid for by the ICRC		1,495	550	232
<b>First aid</b>				
First-aid posts supported	Structures	8		
<b>Water and habitat</b>				
Water and habitat activities	Number of beds	84		
<b>Physical rehabilitation</b>				
Projects supported	Projects	11		
Patients receiving services	Patients	11,922	4,004	4,061
New patients fitted with prostheses	Patients	350	92	20
Prostheses delivered	Units	644	137	38
	<i>of which for victims of mines or explosive remnants of war</i>	75	8	
New patients fitted with orthoses	Patients	5,147	1,115	2,748
Orthoses delivered	Units	8,161	1,946	4,217
	<i>of which for victims of mines or explosive remnants of war</i>	93	30	26
Patients receiving physiotherapy	Patients	4,398	2,297	405
Walking aids delivered	Units	802	323	46
Wheelchairs or tricycles delivered	Units	1,245	319	452





ICRC/AR\_2016  
 + ICRC delegation \* Dominican Republic is covered by the ICRC delegation in Haiti

The ICRC has been present in Haiti since 1994. It responds to acute humanitarian situations in prisons and supports national authorities in improving conditions of detention and respect for judicial guarantees. While sustaining dialogue with the authorities and weapon bearers on humanitarian concerns, it helps the national security forces disseminate international human rights law, other relevant norms and standards, and humanitarian principles. With other Movement partners, the ICRC helps strengthen the emergency response capacities of the Haitian National Red Cross Society and the Dominican Red Cross.

## YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action

**MEDIUM**

## KEY RESULTS/CONSTRAINTS IN 2016

- ▶ In Haiti, dozens of detainees were released in relation to efforts by the justice ministry and penitentiary legal staff, backed with the ICRC's technical advice, to tackle prolonged pre-trial detention via streamlined case management.
- ▶ Although the Haitian authorities sought to preserve the results of past measures to ensure detainees' treatment and living conditions, budgetary, staffing and other constraints considerably hampered their ability to do so effectively.
- ▶ Detainees saw some improvements in their circumstances, partly through the support of ICRC-mobilized actors or – in acute situations – of the ICRC to the Haitian authorities, but food-supply, sanitation and health-care issues persisted.
- ▶ The Haitian National Red Cross Society built its capacities with ICRC input. Its agreements with the International Federation and the ICRC helped facilitate coordinated Movement action in behalf of hurricane-affected households.

PROTECTION	Total
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>	
<b>Restoring family links</b>	
RCMs collected	40
Phone calls facilitated between family members	574
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>	
<b>ICRC visits</b>	
Detainees visited	10,750
Number of visits carried out	44
Number of places of detention visited	18
<b>Restoring family links</b>	
RCMs collected	69
RCMs distributed	36
Phone calls made to families to inform them of the whereabouts of a detained relative	7

## EXPENDITURE IN KCHF

Protection	542
Assistance	1,107
Prevention	393
Cooperation with National Societies	694
General	19
<b>Total</b>	<b>2,755</b>
<i>Of which: Overheads</i>	<i>168</i>

## IMPLEMENTATION RATE

Expenditure/yearly budget	95%
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## PERSONNEL

Mobile staff	4
Resident staff (daily workers not included)	32

## ASSISTANCE

	2016 Targets (up to)	Achieved
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>		
<b>Economic security</b> (in some cases provided within a protection or cooperation programme)		
Services and training	Beneficiaries	200

## CONTEXT

The long-protracted presidential and legislative electoral processes in Haiti – at times, marked by violent protests – eventually led to the election of a new president in November; polls for some legislative positions were pending at end-2016.

Grave socio-economic conditions prevailed, notably in terms of the difficulties in accessing essential services, including within the penitentiary system. These were exacerbated by political uncertainty and, in October, the passage of Hurricane Matthew, which affected some 2 million people. Limited access to clean water, for instance, contributed to the rise of cholera cases. The circumstances endured by detainees were compounded by overcrowding – mainly linked to a very high rate of prolonged pre-trial detention – and food-supply gaps, which caused malnutrition.

The Haitian authorities and their international partners continued to strengthen the capacities of the Haitian National Police (PNH). The UN Stabilization Mission in Haiti (MINUSTAH) was undergoing reconfiguration, towards extending more support to the authorities' development initiatives; its troop reduction continued.

Haitians and people of Haitian descent continued to return from the Dominican Republic, voluntarily or otherwise, because of the Dominican Republic's tightened immigration policies – a source of tension between the two States.

## ICRC ACTION AND RESULTS

In Haiti, the ICRC backed the authorities' efforts to meet detainees' needs, mainly by providing technical input and mobilizing international actors to lend support. It monitored the treatment and living conditions of detainees during visits conducted according to its standard procedures. Based on these visits, the ICRC shared its findings and recommendations with the Penitentiary Administration Directorate (DAP), the PNH, and the health and justice ministries, urging them to take appropriate action; budgetary, staffing and other constraints, however, considerably hampered their ability to respond effectively. In the continued absence of official coordination mechanisms, the ICRC bolstered its dialogue and networking efforts to foster cooperation between relevant local and international parties in addressing detention-related issues.

To help tackle prolonged pre-trial detention, the ICRC supported the justice ministry and penitentiary legal assistants in following up the cases of the detainees concerned. Hundreds of detainees thus saw their cases handled more efficiently; dozens of them were released.

Detainees had reduced health risks through the support that the ICRC or ICRC-mobilized actors provided to the authorities. For example, some newly detained people were vaccinated against cholera, during a campaign undertaken partly by DAP medical staff. Although the appointment of an ICRC-trained pharmacist and ICRC-donated stocks of essential drugs helped the DAP run its central pharmacy, it struggled to maintain the pharmacy's daily operations, because of a lack of resources. The DAP seldom shouldered inmates' laboratory-examination fees, and only at one prison; as in the past, it was prompted by the ICRC to do so systematically for all detainees. The ICRC extended ad hoc assistance to malnourished inmates. Through dialogue, it sought

to persuade the PNH, the DAP and the justice ministry to provide these detainees with sufficient food. Such dialogue also covered the ICRC's concerns regarding the adequacy of the overall prison food supply. This contributed to the official approval of new contracts with relevant service providers, fending off shortages in the short term; supply issues, however, persisted. A working group led by the health ministry finished developing a prison health policy; it awaited formalization by the health and justice ministries.

The authorities' ability to maintain a hygienic and orderly environment for detainees was limited; ICRC initiatives, including infrastructural repairs or upgrades, helped improve the situation of some detainees.

Towards ensuring an effective response to emergencies in Haiti, the Haitian National Red Cross Society enhanced its operational capacities, with comprehensive ICRC support, and entered into coordination agreements with the International Federation and the ICRC. The agreements notably helped facilitate resource mobilization and maximize humanitarian action by Movement components, in connection with the passage of Hurricane Matthew; thousands of households received assistance, including for contacting family members.

With the help of Movement and other partners, the National Society boosted its family-links services, particularly to enable family members dispersed by migration or disaster to reconnect. Its informational materials helped Haitians increase their awareness of the need to respect the red cross emblem and ensure safe passage for ambulances.

Through dialogue, training and public communication, the ICRC promoted IHL, pertinent internationally recognized standards and the Movement among the authorities, weapon bearers, civil society representatives and international actors. It kept influential parties updated on its adaptation of activities as it focused on reinforcing local ownership and sustainability of the response to humanitarian needs; this entailed, *inter alia*, maintaining its status as a delegation for the time being, instead of changing into a mission by end-March, as initially planned.

## PEOPLE DEPRIVED OF THEIR FREEDOM

### The authorities face challenges in ensuring detainees' welfare

During visits conducted in accordance with its standard procedures, the ICRC monitored the treatment and living conditions of 10,757 in 18 places of detention; it paid particular attention to respect for judicial guarantees and detainees' access to health services and open air. Some juvenile detainees reconnected with relatives, using ICRC family-links services. After its visits, the ICRC shared its findings and recommendations with the DAP, the PNH and the health and justice ministries, urging them to take appropriate action.

Although these authorities sought to preserve the results of past measures to ensure that the circumstances of detainees conformed to internationally recognized standards, budgetary, staffing and other constraints – some linked to the political situation (see *Context*) – considerably hampered their ability to do so effectively. They obtained support from either ICRC-mobilized international actors or, in acute situations, the ICRC (see below).

Given the continued inactivity of the DAP's sectorial coordination platforms working on penitentiary reform and the absence of alternative official mechanisms, the ICRC bolstered its dialogue and

networking to foster cooperation between relevant local and international actors in helping address detainees' needs. Such included facilitating periodic meetings, where detention-related issues, and ways to keep them on the government's agenda, were discussed.

### **Eligible detainees are released, via the efforts of trained legal assistants**

In line with the goal of promoting respect for judicial guarantees, the pertinent actors continued to receive ICRC advice and/or training. The justice ministry sought to broaden its efforts to tackle pre-trial detention: for instance, prosecutors assigned to Port-au-Prince city worked towards streamlining the management of 300 cases. This led to such results as decisions on the cases of 54 people held in preventive detention, and the release of 92 detainees, contributing to the alleviation of overcrowding. In parallel, penitentiary legal assistants and clerks lobbied the judiciary to expedite the resolution of detainees' cases, especially those held for protracted periods and/or with particular vulnerabilities, through representations on the detainees' behalf. Through a project funded by UNICEF, which the ICRC had mobilized, these assistants: underwent training and regular coaching, to better handle their caseloads and instruct some detainees to guide their peers in basic legal protocols; and had improved working conditions, following office upgrades.

The detaining authorities continued to be urged by ICRC to ensure inmates' access to outdoor areas.

PNH recruits augmented their knowledge of pertinent standards, including those linked to detention, during seminars (see *Actors of influence*); 183 were later assigned to various prisons.

### **Hundreds of detainees receive assistance to lower health risks**

Some 430 newly detained people in Jacmel and Les Cayes prisons were vaccinated against cholera, during a campaign by WHO and the ICRC; each inmate received the second of two doses from DAP medical staff. Around 470 scabies-afflicted detainees received treatment from the penitentiary medical department, with ICRC support. Although the appointment of an ICRC-trained pharmacist and ICRC-donated stocks of essential drugs helped the DAP run its central pharmacy, it struggled to maintain the pharmacy's daily operations, because of a lack of resources. The DAP seldom shouldered inmates' laboratory-examination fees, and only at one prison; as in the past, it was prompted by the ICRC to do so systematically for all detainees. Fifty-five nurses honed their skills in providing health care to detainees – including the prevention and treatment of cholera, scabies, TB and Zika virus disease – during workshops organized by the British embassy in Haiti, mobilized to this end by the ICRC.

DAP and/or ICRC personnel regularly assessed the nutritional status of detainees; DAP medical supervisors were encouraged by the ICRC to ensure adherence to pertinent best practices. The number of detainees with malnutrition was found to have decreased in some prisons, and increased in others. Malnourished detainees received high-calorie food supplements, helping ease their condition, from the ICRC on an ad hoc basis. The ICRC urged the PNH, the DAP and the justice ministry to assume their responsibilities in providing malnourished detainees with sufficient food; some of these detainees were later covered by a nutrition programme led by the DAP, with ICRC financial and technical support. Dialogue with these authorities – and with the president and the prime minister – also covered the ICRC's concerns regarding the adequacy of the overall prison food supply,

owing partly to the non-renewal of contracts with pertinent service providers. All this contributed to the official approval of new contracts with these providers, fending off shortages in the short term; supply issues, however, persisted.

A working group led by the health ministry – composed of the DAP and other partners, including the ICRC – finished developing a prison health policy; its formalization by the health and justice ministries remained pending.

### **Detainees reduce their risk of cholera**

The authorities' ability to maintain a hygienic, orderly environment for detainees was limited; ICRC initiatives helped improve the situation of some detainees. A total of 395 inmates in Gonaïves and Petit-Goâve prisons had increased access to water and sanitation, following emergency repair and maintenance work to water-supply and sewage systems. In Jacmel prison, 560 detainees could better avert infection after a treatment area for sick detainees was renovated. Local engineers, with ICRC backing, completed a new cell block in Les Cayes prison; up to 18 minors could thus be held in more suitable conditions. In this and one other prison, hurricane-damaged facilities (see *Context*), including roofing and utility systems, were repaired, benefiting some 1,406 detainees. Around 6,240 detainees in five prisons received hygiene kits and cleaning materials to help lower their risk of cholera, particularly after the hurricane; some also benefited from flood-control measures. In six prisons, 107 particularly vulnerable inmates – women, minors and those sick – had increased protection from such ailments as Zika virus disease, after mosquito nets were installed. About 300 detainees in Pétion-Ville women's prison learnt more about avoiding the said disease, during information sessions.

The authorities received an evaluation report, including recommendations for improvement, on the work of the penitentiary technicians who had joined a 2015 ICRC workshop. Thirty-two penitentiary technicians honed their skills at a workshop organized in mid-2016. These workshops were held in line with an agreement with the authorities to help address, through training, the limited functionality of equipment and facilities that had previously been renovated or maintained with ICRC support. Tools and equipment were to support the regular maintenance of prison facilities, particularly plumbing and electricity systems. The authorities began work on developing a countrywide infrastructure-maintenance plan.

## **ACTORS OF INFLUENCE**

The ICRC engaged, through dialogue and training, with the authorities, security forces, civil society representatives and international actors; all of them also had access to ICRC-produced multimedia resources. This helped promote the protection of vulnerable people, notably detainees (see *People deprived of their freedom*), and facilitate humanitarian activities for them, especially during emergencies (see also *Red Cross and Red Crescent Movement*). Such contact also fostered acceptance for IHL and the Movement.

The ICRC kept influential parties updated on its adaptation of activities as it focused on reinforcing local ownership and sustainability of the response to humanitarian needs.

### **Security personnel strengthen their grasp of pertinent standards**

During seminars organized by the PNH's training academy and the ICRC, over 1,400 PNH recruits learnt more about: internationally recognized standards applicable to their duties – particularly,

on the use of force and detention; and the Movement. About 100 MINUSTAH officers – briefed by ICRC delegates in their countries of origin before their deployment– refreshed their understanding of these, during dissemination sessions in Haiti.

Seven Dominican military officers deepened their knowledge of IHL and international policing standards, during their ICRC-supported participation in courses abroad (see *Mexico City*).

#### **Haitian law on the red cross emblem awaits entry into force**

Twenty staff members of the Haitian foreign affairs ministry increased their familiarity with the ICRC's mandate and activities during an ICRC briefing, held at the ministry's request.

Some 80 legal professionals further their knowledge of IHL and international human rights law at a training course organized by an international human rights institute, during which the ICRC made a presentation. Secondary-school and university students learnt about these subjects, during information sessions conducted by a local human rights organization and the ICRC.

The lower house of Haiti's bicameral legislature adopted a law protecting the red cross emblem, following joint efforts to this end by the National Society/ICRC; the law awaited entry into force. The draft of a new penal code, to which the ICRC contributed as part of its work to advance detention-related reform (see *People deprived of their freedom*), remained under discussion by civil society representatives.

The Dominican national IHL committee received periodic encouragement from the ICRC to promote domestic IHL implementation. The Haitian foreign affairs and justice ministries continued to study the prospect of acceding to IHL-related treaties, with ICRC input.

#### **Haitians learn more about the need to respect the red cross emblem**

Haitians increased their awareness of the need to respect the red cross emblem and ensure safe passage for ambulances – particularly during emergencies – and of the Movement, with the help of such National Society informational materials as radio spots, produced with Movement support, including the ICRC. The National Society established a communication unit, to strengthen its capacities in this field.

## **RED CROSS AND RED CRESCENT MOVEMENT**

Despite staffing and other constraints, the Haitian Red Cross enhanced its operational capacities (see also *Actors of influence*) with financial, logistical, material and technical backing from the ICRC.

#### **The Haitian Red Cross bolsters its emergency response**

During ICRC-facilitated workshops on first aid and the Safer Access Framework, Haitian Red Cross personnel honed their pertinent skills. Various branches received emergency supplies. In the tension-prone Martissant district of Port-au-Prince, volunteers treated and/or evacuated about 2,400 injured people – some hurricane-stricken (see *Context*) – and shared key violence-prevention messages with the community. Discussions with the National Society, aimed at promoting the full recognition of these volunteers and their formal affiliation with a local branch to reinforce the National Society's ability to operate in Martissant and similar areas, continued.

The Haitian Red Cross finished drafting its five-year strategic plan with input from the International Federation and the ICRC. Pursuant to this, and to ensure a coordinated Movement response to emergencies in Haiti, the National Society entered into: a tripartite agreement, with the International Federation and the ICRC; and a partnership framework agreement, with the ICRC. These notably helped facilitate resource mobilization and maximize humanitarian action by Movement components, including the Dominican Red Cross, in connection with the hurricane; some 10,000 households received assistance, including for contacting family members (see also *People deprived of their freedom*).

#### **The Haitian Red Cross reunites hurricane-dispersed families**

The National Society, with ICRC support, continued strengthening its family-links services, to better enable relatives separated by migration or disaster to reconnect (see *Context*). For example, in some badly hurricane-hit areas, the National Society collected tracing requests, facilitated phone calls, and helped over 200 people reunite with their families. A family-links services coordinator: updated pertinent guidelines; developed a plan to promote the organization's family-links services; trained personnel assigned to border areas, with American Red Cross funding; and delivered a refresher course for Haitian and Dominican National Society volunteers. The Haitian Red Cross formalized a memorandum of understanding, on coordination to help dispersed families reconnect, with UNICEF, which had been mobilized by the ICRC to this end.

MAIN FIGURES AND INDICATORS: PROTECTION		Total		
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>				
<b>RCMs and other means of family contact</b>			UAMs/SC	
RCMs collected		40		
Phone calls facilitated between family members		574		
Names published on the ICRC family-links website		188		
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>				
<b>ICRC visits</b>			Women	Minors
Detainees visited		10,750	712	295
Number of visits carried out		44		
Number of places of detention visited		18		
<b>RCMs and other means of family contact</b>				
RCMs collected		69		
RCMs distributed		36		
Phone calls made to families to inform them of the whereabouts of a detained relative		7		

MAIN FIGURES AND INDICATORS: ASSISTANCE		Total	Women	Children
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>				
<b>Economic security (in some cases provided within a protection or cooperation programme)</b>				
Services and training	Beneficiaries	200	40	20
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>				
<b>Economic security (in some cases provided within a protection programme)<sup>1</sup></b>				
Essential household items	Beneficiaries	1,749	294	46
Services and training	Beneficiaries	4,517	80	40
<b>Water and habitat (in some cases provided within a protection or cooperation programme)</b>				
Water and habitat activities	Beneficiaries	3,901	78	39
<b>Health</b>				
Visits carried out by health staff		7		
Places of detention visited by health staff	Structures	6		
Health facilities supported in places of detention visited by health staff	Structures	1		

1. Owing to operational and management constraints, figures presented in this table and in the narrative part of this report may not reflect the extent of the activities carried out during the reporting period.



# BRASILIA (regional)

COVERING: Argentina, Brazil, Chile, Paraguay, Uruguay



ICRC regional delegation ICRC mission ICRC office \*ICRC regional communication support centre

## KEY RESULTS/CONSTRAINTS IN 2016

- ▶ The governments of Argentina and the United Kingdom of Great Britain and Northern Ireland, and the ICRC, signed an agreement tasking the ICRC to identify Argentine soldiers buried in the Falklands/Malvinas islands.<sup>1</sup>
- ▶ In Brazil, the authorities in 10 cities or municipalities replicated the methods used to ensure people's access to health and other services in volatile areas of Rio de Janeiro. These methods originated from a past ICRC project.
- ▶ Violence-affected people in southern Chile and northern Paraguay learnt to provide first aid and psychosocial care with the ICRC's help. The Paraguayans also had better access to water, grew more food and earned more money.
- ▶ In Chile and Paraguay, ICRC technical input – based on visits to detainees – helped the authorities improve detainee treatment and living conditions. Aided by the ICRC, female detainees in Paraguay pursued livelihood activities.
- ▶ Aided by the ICRC, Chilean and Paraguayan security forces incorporated international policing standards more fully in their training and operations. Peacekeepers learnt more about IHL at ICRC-supported presentations.

<sup>1</sup> The designations employed in this document do not imply official endorsement nor the expression of any opinion whatsoever on the part of the ICRC concerning the legal status of any territory, or concerning the delimitation of its frontiers or boundaries. Whenever a disputed territory is given different names by the parties concerned, the ICRC uses those names together, in alphabetical order.

## EXPENDITURE IN KCHF

Protection	1,915
Assistance	1,611
Prevention	2,935
Cooperation with National Societies	1,246
General	130
<b>Total</b>	<b>7,837</b>
<i>Of which: Overheads</i>	<i>478</i>

## IMPLEMENTATION RATE

Expenditure/yearly budget	95%
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## PERSONNEL

Mobile staff	9
Resident staff (daily workers not included)	62

The ICRC has been present in the region since 1975. It visits security detainees and responds to situations of violence and social unrest, often with the region's National Societies, which it supports in developing their capacities to act in such situations. It helps authorities identify human remains so as to provide families with information on their missing relatives. The ICRC promotes the incorporation of IHL into national legislation and the doctrine, training and operations of armed forces, and works with police forces to integrate international human rights law applicable to the use of force into theirs.

## YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action **HIGH**

PROTECTION	Total
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>	
<b>Restoring family links</b>	
Phone calls facilitated between family members	1
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>	
<b>ICRC visits</b>	
Detainees visited	13,513
Detainees visited and monitored individually	107
Number of visits carried out	46
Number of places of detention visited	20
<b>Restoring family links</b>	
RCMs collected	1

ASSISTANCE	2016 Targets (up to)	Achieved	
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>			
Productive inputs	Beneficiaries	220	435
Services and training	Beneficiaries	220	
<b>Water and habitat</b>			
<i>(in some cases provided within a protection or cooperation programme)</i>			
Water and habitat activities	Beneficiaries	1,400	1,737



## CONTEXT

Brazil continued to be troubled by political instability and an economic downturn. The incidence of armed violence in urban areas, such as the *favelas* of Rio de Janeiro, grew. Thus, despite budgetary constraints, “pacification” programmes involving military and police forces were maintained. In Paraguay, massive protests demanding political and socio-economic reforms led to violence. In the north, violent encounters took place between the joint military and police task force and armed elements. In southern Chile, including Araucanía, tensions over land tenure, between Mapuches and other communities, persisted; the *carabineros* conducted security operations there.

Many families still awaited news of relatives missing since past conflict and military rule. Argentina and the United Kingdom of Great Britain and Northern Ireland (hereafter UK) agreed to identify Argentine soldiers buried in the Falkland Islands/Islands Malvinas.

Natural disasters – floods in several countries – caused deaths and displacement, and dispersed families.

## ICRC ACTION AND RESULTS

The ICRC’s delegation in Brasilia strove to address the various needs of violence-affected people throughout the region and of detainees; it also sought to broaden awareness of IHL and other international norms and support for ICRC activities.

Representatives of the Argentine and UK authorities met at the ICRC’s headquarters in Switzerland, and agreed to have the ICRC identify, in 2017, the remains of Argentine soldiers buried in the Darwin cemetery on the Falklands/Malvinas islands. The ICRC also maintained support for Brazil and Paraguay to improve their forensic services. In Brazil, the ICRC assessed needs among some families whose relatives went missing during the military regime; some of these families learnt to provide psychosocial care to their peers.

In Brazil, the ICRC continued to help the authorities replicate activities from the “Rio project” – an initiative to help people mitigate the effects of armed violence in selected *favelas* of Rio de Janeiro – which concluded in 2013. For example, health workers were trained to instruct others in psychosocial care. The authorities extended this project beyond Rio de Janeiro to other cities or municipalities: 10 such projects ran in three states.

Vulnerable people in northern Paraguay and southern Chile were given psychosocial support and/or first aid, or taught how to provide such care. Some community members in northern Paraguay were assisted in improving their access to water, growing more food, and earning more money. In both countries, vulnerable families whose breadwinners were detained also benefited from livelihood aid. In Paraguay, the Paraguayan Red Cross and the ICRC continued to back a livelihood project for female detainees; they also supported female ex-detainees, with a view to helping them reintegrate into society.

The ICRC visited detainees throughout the region and shared its findings and other pertinent observations confidentially with the detaining authorities, to help them improve detainees’ treatment and living conditions. At ICRC-organized regional events, penitentiary officials from Brazil, Chile and Paraguay learnt more about improving prison management and infrastructure maintenance. Paraguayan penitentiary authorities continued to

benefit from ICRC expertise for updating system-wide policies and from direct ICRC support for making improvements in selected prisons. The penitentiary authorities agreed to cover the expenses of redesigning the electrical system in one prison; the ICRC then helped them renovate the water infrastructure to prevent water shortages.

Through confidential dialogue with the ICRC, the region’s authorities, weapon bearers and community leaders were informed of allegations of abuse, with a view to helping them implement measures for preventing recurrence of abuses and for mitigating the effects of violence. In Chile, the health ministry and the ICRC implemented a tool for monitoring risks faced by health services. Military/security forces throughout the region worked jointly with the ICRC to further the incorporation of pertinent international norms in their training and doctrine, notably international policing standards for Brazilian, Chilean and Paraguayan military and police forces. Some peacekeepers were briefed on IHL. The region’s authorities took into account the ICRC and national IHL committee’s views while implementing IHL-related treaties. The ICRC also endeavoured to broaden support among all parties of influence for its activities and other Movement initiatives.

The region’s National Societies increased their capacity to respond to needs arising from situations of violence and natural disaster with help from the International Federation and the ICRC. The Brazilian Red Cross and the Chilean Red Cross strengthened their family-links set-up with the ICRC’s assistance; the Brazilian National Society was also helped to develop first-aid services throughout Brazil. Movement components met regularly to coordinate their activities in the region.

## CIVILIANS

The ICRC relayed allegations of abuse confidentially to the region’s authorities, military/security forces, community leaders and other key figures, with a view to helping them take measures to prevent the recurrence of abuses and to mitigate the effects of violence. In Chile, the health ministry and the ICRC continued to implement a four-year action plan to ensure the safety of health-care personnel. The health ministry created a tool for monitoring threats to health services, and implemented it in Santiago, Chile’s capital, and northern Araucanía.

### **Brazilian authorities replicate safer-access tools in 10 cities or municipalities in three states**

Health authorities in Rio de Janeiro continued activities jointly developed with the ICRC during the “Rio project”. For instance, 160 health staff were trained to instruct others in psychosocial care for violence-affected people; the aim was to make this service available in more *favelas* and other violence-prone areas. The authorities moved to institutionalize these activities by incorporating them in existing policies and establishing management structures (see *Red Cross and Red Crescent Movement*).

At the request of local authorities, the ICRC supported similar initiatives in eight other municipalities of Rio de Janeiro state, in Florianopolis city, Santa Catarina state and in Porto Alegre city, Rio Grande do Sul state. Health personnel in volatile areas were trained to minimize risks and implement the Safer Access Framework.

### **Vulnerable people in northern Paraguay and southern Chile become caregivers as well**

In southern Chile, the Chilean National Society and the ICRC maintained their efforts to increase the availability of basic care.

In Araucanía, around 500 families were trained in first aid and encouraged to form networks. Elsewhere, members of one Mapuche community received psychosocial support and learnt to provide it for others, and members of another community were encouraged to form a peer-support association. In northern Paraguay, teachers and students learnt basic first aid – and teachers, basic psychosocial care as well. Psychosocial-support activities facilitated by the ICRC partially assuaged the suffering of more than 140 families and 150 children. All these efforts helped ensure that some basic care was available in both countries to people suffering emotional or physical distress.

Vulnerable people in northern Paraguay also benefited from other forms of ICRC assistance. In Nueva Fortuna, some 70 households (400 people) consumed or sold produce they had grown with ICRC-provided agricultural supplies. In Arroyito and Nueva Fortuna, around 1,700 people had better access to water for personal or agricultural use after the ICRC renovated community infrastructure.

### **Argentina and the UK task the ICRC to identify Argentine soldiers buried in the Falklands/Malvinas**

Representatives of the Argentine and UK authorities met at the ICRC's headquarters in Switzerland, and agreed to have the ICRC identify, in 2017, the remains of Argentine soldiers buried in the Darwin cemetery on the Falklands/Malvinas islands.

In Brazil, the ICRC assessed the compatibility of domestic legislation on missing people with international norms, and the needs of some families of persons missing since past military rule. The findings will be shared with the authorities in 2017, to help them improve State forensic procedures. ICRC-supported workshops enabled 16 forensic workers to develop their skills and 35 relatives of missing persons to learn more about providing psychosocial care for their peers.

ICRC workshops in Paraguay also helped 25 forensics professionals to learn more about mapping high-risk zones and documenting cases during emergencies, and 11 others to develop their ability to conduct autopsies.

### **South American National Societies reinforce their family-links network**

Members of families separated by natural disasters, migration or other circumstances maintained contact using Movement family-links services. The Brazilian and Colombian National Societies and the ICRC worked to ensure that families knew the fate of relatives who had died in an airplane crash in Colombia. The Brazilian Red Cross offered family-links services and emergency aid during the Olympic Games.

South American National Societies strengthened their family-links services with ICRC financial and technical support; they met in Brazil to explore means of improving coordination among them and expanding the regional network. The Brazilian National Society created a department to develop family-links activities throughout the country; its São Paulo branch assessed its ability to assist migrants. The Chilean National Society opened a new office in Chile's central region, to enable a speedier family-links response to emergencies.

In Uruguay, six former detainees of the US internment facility at Guantanamo Bay Naval Station in Cuba continued to have their

situation monitored by the ICRC. One spent time with his relatives during an ICRC-organized family visit.

### **PEOPLE DEPRIVED OF THEIR FREEDOM**

Thousands of detainees in Chile and Paraguay were visited by the ICRC in accordance with the organization's standard procedures. Some people were followed individually, notably: in Chile, detained Mapuches; and, in Paraguay, alleged members of armed groups in northern Paraguay and people held by special police forces. The ICRC also monitored the situation of several inmates serving sentences for crimes against humanity in Uruguay and one alleged member of a Paraguayan armed group held in Argentina. Afterwards, confidential feedback from these visits were shared with the authorities; this, together with ICRC expertise and other support, helped them improve the treatment and living conditions of detainees.

In Paraguay, 43 detainees were visited by their families and thereby received some material assistance. In Chile, households – 35 people – whose breadwinners were detained established small businesses or planted market gardens with livelihood support from the pertinent National Societies and the ICRC.

### **Paraguayan authorities upgrade prison infrastructure**

Penitentiary officials from Brazil, Chile and Paraguay exchanged best practices in prison management and infrastructure maintenance with their counterparts from other countries at workshops abroad (see *Colombia* and *Mexico City*). In Brazil, the penitentiary authorities organized a seminar for over 100 prison architects and engineers, at which the ICRC made a presentation.

The ICRC signed an agreement with the Paraguayan penitentiary authorities formalizing its role in facilitating penitentiary reforms. This process consisted of: recommending changes to system-wide policies, for example, revision of the national penitentiary school's curriculum; and directly supporting improvements in overcrowded prisons, with a view to helping the authorities reflect these improvements in other prisons.

The penitentiary authorities renovated infrastructure at the Tacumbu prison, which houses 3,600 detainees, taking into account recommendations by parties concerned during an ICRC-organized round-table. The penitentiary authorities agreed to cover the costs of redesigning the prison's electrical system as proposed by a local company and the ICRC. The ICRC also installed a new water tank and pump at the prison after floods had disrupted its water supply. Infrastructural upgrades by the authorities and the ICRC improved ventilation at the Buen Pastor female prison; 18 elderly inmates benefited. A few hundred inmates in four places of detention were given items for maintaining their hygiene; and the health services of the Tacumbu prison and of the special police forces were given medical supplies for treating wounded detainees.

Some detainees at the Buen Pastor prison learnt to sew – with a view to monetizing their skilfulness – at a course run by the Paraguayan Red Cross with ICRC financial support. Former detainees continued to make and sell handicrafts and textiles through an ICRC-backed cooperative, which also eased their reintegration into society. These efforts benefited a total of 47 detainees.

## ACTORS OF INFLUENCE

### Brazil, Chile and Paraguay strengthen instruction in international policing standards

Chile's *carabineros* and Paraguay's national police signed two-year partnership agreements with the ICRC for the organization's technical support for updating curricula and manuals on international human rights law, and for training instructors, respectively. In addition, the *carabineros* were given advice for incorporating international standards on the use of force in their operational procedures; and Paraguay's joint military and police task force requested and received the ICRC's comments on the rules of engagement for its operations in northern Paraguay. In Brazil, the Security Secretariat of the Ministry of Justice drew on ICRC expertise to develop e-learning programmes on international policing standards; and ICRC briefings supplemented courses for military cadets on the use of force. At a conference abroad (see *Lima*), police officers from the region learnt more about standards applicable to their duties.

Advice from the ICRC helped the Uruguayan defence ministry to incorporate IHL and international human rights law more fully in the training of peacekeepers, and to produce a training manual. Troops attending seminars at peacekeeping centres in Paraguay and in Brazil were briefed by the ICRC on IHL applicable to peacekeeping. Brazil, Chile and Paraguay sent senior military officials to advanced courses abroad (see *International law and policy*).

### Chilean officials draft a bill on compensation for mine victims

The region's authorities, including foreign and justice ministry officials, were urged by the ICRC and their national IHL committees to implement IHL-related treaties and pledges and resolutions made during the 32nd International Conference and at OAS meetings, and given pertinent guidance.

In Chile, the armed forces and the national institute of human rights requested and received the ICRC's advice for drafting a bill defining the compensation due to victims of anti-personnel mines. In Argentina, a draft bill on the proper use of the emblem, prepared by the National Society and the ICRC, was presented to the parliament for approval. In Brazil, the ICRC urged the national IHL committee and the justice ministry to support a bill for implementing the Rome Statute.

The ICRC sponsored government officials' attendance at meetings in Switzerland, at which: Brazilian foreign ministry officials contributed to discussions on legislation regulating autonomous weapon systems; and Argentine, Brazilian and Chilean officials participated in the Strengthening IHL process. The five countries covered sent representatives to the annual meeting of national IHL committees, where they exchanged best practices with their counterparts from other countries.

### The Brazilian public learns more about IHL and the Movement

Communication efforts by National Societies and the ICRC broadened awareness of IHL and international human rights law, and of issues concerning migrants, violence-affected communities and health services, among actors capable of facilitating Movement action. In Brazil, social media campaigns, initiatives with journalists and participation in events related to the Olympic and Paralympic Games raised the public profile of the ICRC as a global actor and a source of reference in the humanitarian field, and helped encourage donations from the private sector. The ICRC continued to brief local authorities and organizations on the results of the "Rio project".

Universities partnered the ICRC in various initiatives. In Brazil, students and lecturers at universities in São Paulo and Rio de Janeiro, and participants in a forum on international public law, learnt more about IHL through ICRC briefings; a Brazilian lecturer attended an IHL conference abroad (see *Armenia*). University libraries were given reference materials. Law students from Argentina tested their grasp of IHL at moot court competitions abroad. All these initiatives fostered academic interest in IHL. In Argentina, the number of university lecturers teaching IHL increased.

## RED CROSS AND RED CRESCENT MOVEMENT

National Societies in the region drew on the ICRC's financial and technical support to develop their ability to assist people affected by violence. The Brazilian and Chilean National Societies worked to standardize and improve their first-aid education programmes, training some 50 and 20 volunteers, respectively, to be first-aid instructors. In Rio de Janeiro, the 20-person emergency response team of the National Society's local branch cared for over 450 people wounded during protests. In Araucanía, 125 Chilean Red Cross volunteers were trained to provide psychosocial care and livelihood assistance, and to conduct water-and-sanitation activities. The Paraguay Red Cross used ICRC expertise to improve its family-links services and, in line with the Safer Access Framework, its security measures.

Aided by the International Federation and the ICRC, the Brazilian and Paraguayan National Societies pursued organizational reform. The former strengthened its internal control mechanisms and its public communication and youth recruitment strategies; the latter approved a new institutional strategy and revised its statutes. Both underwent external audits.

Partnership agreements between the ICRC and the National Societies of Argentina, Brazil, Chile and Paraguay, and regular meetings, facilitated coordination among Movement components throughout the region.

MAIN FIGURES AND INDICATORS: PROTECTION		Total			
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>					
<b>RCMs and other means of family contact</b>					
Phone calls facilitated between family members		1			
<b>Tracing requests, including cases of missing persons</b>					
			Women	Girls	Boys
People for whom a tracing request was newly registered		32	4		
Tracing cases still being handled at the end of the reporting period (people)		32	4		
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>					
<b>ICRC visits</b>					
			Women	Minors	
Detainees visited		13,513	1,072	60	
			Women	Girls	Boys
Detainees visited and monitored individually		107	7		
Detainees newly registered		30	3		
Number of visits carried out		46			
Number of places of detention visited		20			
<b>RCMs and other means of family contact</b>					
RCMs collected		1			
Detainees visited by their relatives with ICRC/National Society support		43			

MAIN FIGURES AND INDICATORS: ASSISTANCE		Total	Women	Children
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>				
<b>Economic security (in some cases provided within a protection or cooperation programme)</b>				
Productive inputs	Beneficiaries	435	120	211
	<i>of whom IDPs</i>	400	100	200
<b>Water and habitat (in some cases provided within a protection or cooperation programme)</b>				
Water and habitat activities	Beneficiaries	1,737	1,706	
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>				
<b>Economic security (in some cases provided within a protection programme)</b>				
Productive inputs	Beneficiaries	47	47	
<b>Water and habitat (in some cases provided within a protection or cooperation programme)</b>				
Water and habitat activities	Beneficiaries	3,902	351	39
<b>Health</b>				
Visits carried out by health staff		4		
Places of detention visited by health staff	Structures	4		

# CARACAS (regional)

**COVERING:** Antigua and Barbuda, Bahamas, Barbados, Belize, Dominica, Grenada, Guyana, Jamaica, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago and Bolivarian Republic of Venezuela



ICRC regional delegation

The boundaries, names and designations used in this report do not imply official endorsement, nor express a political opinion on the part of the ICRC, and are without prejudice to claims of sovereignty over the territories mentioned.

The Caracas regional delegation was established in 1971. It reinforces the capacities of the region's National Societies in the fields of IHL promotion, restoring family links, emergency response, and assistance to victims of violence. It seeks to visit detainees in Venezuela and monitors the humanitarian situation along the Venezuelan border with Colombia. It promotes the incorporation of IHL into national legislation and into the operational procedures and training of the region's armed forces, as well as the inclusion of human rights standards in police manuals and training.

## KEY RESULTS/CONSTRAINTS IN 2016

- ▶ At Venezuelan Red Cross and/or ICRC workshops, personnel from public and military hospitals learnt more about treating people wounded by firearms and explosives, and emergency responders trained in providing life-saving care.
- ▶ Vulnerable residents and Colombian migrants in Venezuelan states bordering Colombia obtained basic health care and psychosocial support from the Venezuelan Red Cross, with ICRC backing.
- ▶ The Jamaica Red Cross, aided by the ICRC, sought to alleviate the impact of violence on young people, primarily by giving them access to sports and educational activities. The Belize Red Cross Society undertook similar efforts.
- ▶ Military and police personnel in three countries learnt more about international policing standards at ICRC workshops. The Venezuelan police and the ICRC resumed dialogue on topics of common interest after two years of no contact.
- ▶ Venezuelan penitentiary officials attended regional workshops on prison management with the ICRC's financial support. Detainees still did not receive visits from the ICRC.

## EXPENDITURE IN KCHF

Protection	1,141
Assistance	-
Prevention	678
Cooperation with National Societies	880
General	45
<b>Total</b>	<b>2,744</b>
<i>Of which: Overheads</i>	167

## IMPLEMENTATION RATE

Expenditure/yearly budget	88%
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## PERSONNEL

Mobile staff	4
Resident staff (daily workers not included)	14

## YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action

**MEDIUM**

## PROTECTION

	Total
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>	
Restoring family links	
Tracing cases closed positively (subject located or fate established)	1



## CONTEXT

The government of the Bolivarian Republic of Venezuela (hereafter Venezuela) continued to grapple with a deteriorating economy – characterized most notably by shortages of essential goods and high inflation rates – and with a political impasse. Street protests linked to these issues, and incidents of looting, increased and sometimes resulted in casualties. The government declared a state of emergency that gave the president additional executive powers; it also initiated talks with the opposition. Unabated violence in some neighbourhoods prompted the authorities to ramp up law enforcement operations there.

The Venezuelan authorities gradually reopened – albeit with some interruptions – the country's border with Colombia, which had been closed in 2015 owing to security concerns. Communities living along the border remained vulnerable to the effects of the conflict in Colombia.

Issues related to migration, gang violence and crime – and allegations of the use of excessive force during security operations – remained matters of concern in some States in the Caribbean Community (CARICOM). Military forces assisted the police during law enforcement operations in Guyana, Jamaica and Trinidad and Tobago. In Belize, the military no longer took part in such operations, but continued to carry out joint border patrols with their police counterparts. Tensions along the Belize-Guatemala border sometimes led to skirmishes. General elections in Jamaica and in Saint Lucia were won by opposition parties.

## ICRC ACTION AND RESULTS

The ICRC continued to support and work with the region's National Societies and other local partners in helping people prepare for possible emergencies or cope with the effects of violence. Regular coordination among Movement partners helped ensure effective implementation of projects.

In line with the Safer Access Framework and in support of the goals of the Health Care in Danger project, the Venezuelan Red Cross and the ICRC prioritized helping boost the capacities of emergency responders. National Society and/or ICRC workshops enabled health personnel from public and military hospitals to refine their skills in treating the wounded and to heighten their knowledge of how to protect themselves against violence. Informational materials produced by the National Society and the ICRC helped instruct the public in basic first aid and broadened awareness of the need to facilitate access for health staff to wounded and sick people. With ICRC backing, the National Society provided vulnerable residents and Colombian migrants living along the Colombia-Venezuela border with basic health care and psychosocial support.

The ICRC guided Jamaica Red Cross initiatives aimed at alleviating the impact of violence on young people; it also helped the Belize Red Cross Society to begin similar efforts. The Jamaican National Society facilitated young people's access to sports-related and educational activities and offered them counselling services.

The ICRC continued to promote respect for international policing standards and IHL throughout the region. It offered technical assistance in countries where military and police forces conducted joint security operations. Venezuelan military officials participated in ICRC-organized IHL sessions held locally or abroad. Dialogue between the Venezuelan police and the ICRC, on topics of common

interest, resumed after two years without contact between the two parties. Although the ICRC remained unable to visit detainees in Venezuela, it developed working relations with penitentiary officials through workshops on internationally recognized standards for detention.

## CIVILIANS

The ICRC continued to engage key parties in dialogue, and to monitor the situation in the region, to better understand the dynamics of the prevailing violence. It also explored opportunities for working with local partners to address issues of humanitarian concern, such as the need to ensure respect for health services during emergencies, especially in violence-prone urban areas of Venezuela.

National Societies in the region continued to strengthen their ability to mount effective responses to emergencies and to the needs of vulnerable people. ICRC financial, material and technical assistance – for instance, the pre-positioning of surgical kits at five Venezuelan Red Cross branches – supported their efforts.

The Bahamian, Jamaican and Venezuelan National Societies continued to be encouraged to strengthen their family-links services. Representatives of the Jamaican Red Cross participated in the Movement's regional meeting on these services, with ICRC financial input. The Venezuelan National Society appointed a focal point to follow up family-links cases; however, National Societies in the Bahamas and Jamaica made little progress in developing an action plan for family-links activities.

### Doctors at public and military hospitals in Venezuela expand their capacities to treat wounded patients

During ICRC workshops in Venezuela, roughly 800 doctors and other medical staff from seven public and military health facilities developed their capacity to treat people wounded by firearms or explosives. Some personnel from one military facility also learnt more about the goals of the Health Care in Danger project.

The National Society and the ICRC held training sessions and implemented communication efforts to strengthen violence-affected communities' emergency preparedness and to encourage people to facilitate safe access for responders to the wounded and the sick (see *Actors of influence*). Fifty members of one community in Venezuela learnt more about first-aid techniques; eight young people among them subsequently formed a health brigade. During workshops, nearly 100 staff – doctors, administrative personnel and security guards – from four National Society-run hospitals in provincial cities familiarized themselves with the Health Care in Danger project and learnt how to protect themselves against violence. They also received training in the provision of psychosocial support. In two cities, National Society volunteers and other first responders attended training sessions on the management of human remains.

In Venezuelan border areas, ICRC-backed National Society staff and volunteers helped vulnerable residents and Colombian migrants, including refugees, to cope with the effects of the conflict in Colombia: over 1,200 people received basic health care and psychosocial support, and another 300 learnt how to administer first aid.

### Violence-affected young people in Jamaica access sports and educational activities

ICRC support enabled the National Societies in Belize and Jamaica to begin and expand, respectively, a project to alleviate the impact



of violence on young people. In Jamaica, the project facilitated young people's access to sports-related activities and offered them counselling services. In addition, 60 schoolchildren affected by gang violence and without access to government services learnt reading, writing and basic arithmetic, and acquired vocational skills, at ICRC-supported National Society schools.

## PEOPLE DEPRIVED OF THEIR FREEDOM

Detainees in Venezuela still did not receive visits from the ICRC; these visits had been suspended since December 2012. Nevertheless, the ICRC pursued efforts to clarify, among the authorities concerned, the nature of its activities for detainees. Penitentiary officials deepened their knowledge of prison management at regional workshops (see *Colombia* and *Mexico City*), with ICRC financial support. During training events organized by the pertinent authorities, which the ICRC attended, military prison guards familiarized themselves with internationally recognized standards for the treatment of detainees and learnt more about the ICRC's detention activities.

Seventeen Cuban migrants detained in Jamaica received ad hoc visits from the Jamaican National Society and the ICRC.

## ACTORS OF INFLUENCE

### Venezuelan police and the ICRC resume dialogue on international policing standards

Military and police forces in Belize, Jamaica and Trinidad and Tobago continued to receive encouragement, guidance and training for incorporating international policing standards in their doctrine, training and operations. Dialogue with the military and police enabled them to understand more fully the need to coordinate their security operations and carry out tailored training sessions. During the 12th Conference of Defence Ministers of the Americas in Trinidad and Tobago, Member States renewed their commitment to incorporate IHL and international human rights law in law enforcement operations.

Members of the Venezuelan military deepened their knowledge of IHL during ICRC training courses and with the help of ICRC-donated publications on the topic. One military officer participated in an international workshop on rules governing military operations (see *International law and policy*). After more than two years without contact, the Venezuelan police and the ICRC resumed dialogue on subjects of common concern. A police official took part in an ICRC regional colloquium on international standards for the use of force (see *Lima*).

### Venezuelan foreign ministry convenes the first session of the national IHL committee

The ICRC continued to engage in dialogue with every State covered by the delegation and pertinent regional or multilateral bodies, such as the CARICOM Implementing Agency for Crime and Security, on ratifying and implementing IHL-related treaties. It also monitored the degree to which States were fulfilling the pledges – mostly in relation to detention and sexual violence – that they had made at the 32nd International Conference.

The Venezuelan foreign ministry convened the first session of the national IHL committee in order to discuss the committee's objectives; the ICRC took part in this meeting.

### Residents of violence-prone areas in Venezuela acquaint themselves with the Fundamental Principles

In Venezuela, the authorities, the diplomatic community, civil society organizations and the wider public learnt more about the Movement's neutral, impartial and independent humanitarian activities through various National Society and ICRC initiatives. Residents of violence-prone neighbourhoods, especially young people, acquainted themselves with the Fundamental Principles and learnt basic first-aid methods through National Society publications and radio spots, published and broadcast with ICRC support. Contact with community organizations enabled the National Society and the ICRC to conduct first-aid training in some neighbourhoods (see *Civilians*).

## RED CROSS AND RED CRESCENT MOVEMENT

National Societies in the region continued to receive financial, material and technical support from Movement partners for improving their institutional set-up and strengthening their capacity to respond to emergencies and/or to the effects of violence.

In Venezuela, the National Society and the ICRC assessed the emergency preparedness of selected National Society branches, with a view to improving National Society coordination of aid delivery. Some Venezuelan Red Cross staff participated in ICRC workshops on the Safer Access Framework and a course on health emergencies (see *Mexico City*). Others developed their ability, via training, to present or describe the Movement and the National Society's activities to the public.

Movement partners throughout the region held coordination meetings periodically to share experiences; they also conducted joint missions to monitor the implementation of projects.

MAIN FIGURES AND INDICATORS: PROTECTION		Total			
CIVILIANS (residents, IDPs, returnees, etc.)					
Tracing requests, including cases of missing persons					
			Women	Girls	Boys
Tracing cases closed positively (subject located or fate established)		1			
<i>including people for whom tracing requests were registered by another delegation</i>		1			
Tracing cases still being handled at the end of the reporting period (people)		1		1	

# LIMA (regional)

COVERING: Plurinational State of Bolivia, Ecuador, Peru



ICRC/AR\_2016  
 ○ ICRC regional delegation    ⊕ ICRC mission    + ICRC office/presence

The delegation in Lima opened in 1984, becoming a regional delegation in 2003. The ICRC visits detainees, addresses the issue of missing persons and monitors the humanitarian situation along the Colombia-Ecuador border. It seeks to respond to needs arising from armed conflict and other situations of violence and helps the region's National Societies reinforce their capacities to do the same. It assists security forces in integrating human rights norms applicable to the use of force into their doctrine, training and operations, and the armed forces in doing the same with IHL. It promotes the incorporation of IHL into national legislation.

## YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action

**HIGH**

## KEY RESULTS/CONSTRAINTS IN 2016

- ▶ Peruvian authorities approved a bill and a related national plan that allowed, for purely humanitarian purposes, exhumations linked to missing-persons cases from the 1980–2000 conflict to be done outside judicial proceedings.
- ▶ The Peruvian health ministry and the Peruvian Red Cross adopted an ICRC publication setting out the rights and duties of health personnel during emergencies, for distribution to such personnel throughout the country.
- ▶ In Peru, the authorities approved a protocol for protecting and assisting people who had left or had been rescued from an armed group's camps in the Apurímac-Ene and Mantaro Valley.
- ▶ The Ecuadorean interior ministry and national police and the ICRC organized a colloquium – the first event of its kind in the region – at which 34 Latin American police commanders shared good operational practices.
- ▶ Inmates in Bolivian prisons benefited from water and electrical facilities upgraded by the ICRC. Peru approved a directive providing for comprehensive treatment and care for female detainees – a first in Latin America.

## EXPENDITURE IN KCHF

Protection	2,409
Assistance	911
Prevention	1,697
Cooperation with National Societies	848
General	65
<b>Total</b>	<b>5,930</b>
<i>Of which: Overheads</i>	<i>362</i>

## IMPLEMENTATION RATE

Expenditure/yearly budget	98%
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## PERSONNEL

Mobile staff	5
Resident staff (daily workers not included)	43

PROTECTION	Total
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>	
<b>Restoring family links</b>	
RCMs collected	1
RCMs distributed	9
Phone calls facilitated between family members	128
Tracing cases closed positively (subject located or fate established)	12
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>	
<b>ICRC visits</b>	
Detainees visited	39,158
Detainees visited and monitored individually	147
Number of visits carried out	42
Number of places of detention visited	21
<b>Restoring family links</b>	
RCMs collected	11
RCMs distributed	1
Phone calls made to families to inform them of the whereabouts of a detained relative	5

ASSISTANCE	2016 Targets (up to)	Achieved	
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>			
<b>Economic security (in some cases provided within a protection or cooperation programme)</b>			
Food commodities	Beneficiaries	26	
Essential household items	Beneficiaries	121	
Cash	Beneficiaries	695	
<b>Water and habitat (in some cases provided within a protection or cooperation programme)</b>			
Water and habitat activities	Beneficiaries	400	2,662

## CONTEXT

In Peru, clashes between government forces and the militarized Communist Party of Peru (PCP-M) in the Apurímac-Ene and Mantaro Valley (VRAEM) declined in frequency after the government put the police in charge of maintaining law and order in the area. However, fighting erupted again during national elections in April and persisted throughout the year. By year's end, the new government had reassigned the military to oversee security operations there. These clashes led to casualties and arrests of alleged PCP-M members, and damaged property. There were also reports of military personnel occupying civilian infrastructure. Elsewhere, people contended with high crime rates.

Border communities in northern Ecuador continued to feel the effects of armed conflict in Colombia, but to a lesser degree (see *Colombia*).

In the Plurinational State of Bolivia (hereafter Bolivia), Ecuador and Peru, socio-economic and political issues, such as land disputes, gave rise to protests that sometimes led to injuries and deaths.

An earthquake struck northern Ecuador in April, killing 663 people and leaving 28,775 without shelter.

## ICRC ACTION AND RESULTS

The Lima regional delegation worked to protect and assist vulnerable people in the VRAEM and, to a lesser extent, people in areas along Ecuador's border with Colombia. It documented these people's concerns and relayed them to the pertinent parties to help or persuade them to improve their situation; as a result, military personnel in the VRAEM cleared two weapon-contaminated areas. The Peruvian authorities approved a protocol for addressing the needs of people who had been held in PCP-M camps, and the health ministry and the Peruvian Red Cross adopted an ICRC publication on the rights and duties of health personnel during emergencies, for distribution to such personnel throughout Peru.

The ICRC provided violence-affected people with periodic or ad hoc support, which included renovation or construction of water and other communal infrastructure in the VRAEM and material assistance for children and adults who had been held in PCP-M camps. With the help of Movement partners, the Ecuadorean Red Cross trained people in communities along the border with Colombia in first aid and hygienic practices.

At ICRC workshops, police and armed forces personnel in the region learnt more about international policing standards and/or IHL, and developed their ability to instruct their colleagues in these matters. The Ecuadorean interior ministry and national police and the ICRC organized a colloquium – the first event of its kind in the region – at which 34 Latin American police commanders shared good operational practices. National IHL committees and the ICRC continued to help the authorities in the region ensure respect and support for IHL; Peru ratified the Arms Trade Treaty. The region's National Societies and the ICRC used informational materials and various kinds of events to broaden public awareness of humanitarian principles, IHL and the Movement.

In Peru, the ICRC continued to support local partners working to ascertain the fate of people missing in relation to the 1980–2000 conflict and to address the needs of their families. It lent its expertise to these partners to help them develop their capacities

in managing human remains and providing psychosocial care. The authorities approved a bill and a related national plan that allowed, for purely humanitarian purposes, exhumations linked to missing-persons cases from the 1980–2000 conflict to be done outside judicial proceedings. Families wishing to be involved in searching for missing relatives travelled to exhumation sites with ICRC financial assistance.

Detainees in Bolivia, Ecuador and Peru, including security detainees, received visits conducted in accordance with standard ICRC procedures. Confidential feedback based on these visits and other kinds of support from the ICRC sought to help the authorities improve detainees' treatment and living conditions. Peruvian authorities approved a new penitentiary policy and a directive providing for comprehensive treatment and care for female detainees. Thanks to ICRC infrastructural upgrades, inmates in Bolivia had better access to water and electricity. In the countries covered, detainees held far from their homes continued to benefit from ICRC-organized family visits.

The region's National Societies responded to emergencies created by violence and natural disasters; they strengthened their capacities in this area with help from the International Federation and the ICRC. Movement components provided technical and other assistance to the authorities in response to the earthquake in Ecuador; the Ecuadorean Red Cross led the response that focused on restoring family links. Regular meetings helped ensure coordination among Movement components in the region.

## CIVILIANS

### Peruvian officials and National Society adopt ICRC publication on rights and duties of health staff

Vulnerable people in the VRAEM and in areas along Ecuador's border with Colombia reported their concerns to ICRC delegates, who relayed them to the pertinent parties to help or persuade them to improve these people's situation (see *Actors of influence*). At the ICRC's urging, military personnel in the VRAEM cleared two areas where people had been injured or killed in incidents involving unexploded ordnance; they also informed community members in rural and urban areas, including students, of the hazardousness of such ordnance.

In support of the goals of the Health Care in Danger project, the Peruvian authorities, the National Society and the ICRC strove to help ensure that health services safely and promptly accessed violence-affected areas. In December, the health ministry and the National Society adopted an ICRC publication setting out the rights and duties of medical personnel during armed conflicts and other emergencies, for distribution to health staff throughout Peru. Over 500 health personnel in the most violence-prone areas in the VRAEM, and health ministry officials, learnt about their rights and duties, and about protecting themselves in unsafe environments and coping with security incidents, through various ICRC briefings.

### People previously held by a Peruvian armed group ease their social and economic reintegration

Periodic and ad hoc ICRC support, such as cash assistance, helped violence-affected people cover their basic needs and deal with their situation. In the VRAEM, ICRC-organized community workshops enabled 60 people to familiarize themselves with safe practices in the event of fighting. Some 2,000 people in 23 communities had potable water and better community infrastructure after the ICRC built a water-supply network and upgraded other facilities. Workshops organized by the education ministry and the ICRC helped almost

700 teachers and students in those and other communities to learn more about hygienic practices.

More than 60 children and adults who had been released from PCP-M camps eased their social and economic reintegration with household essentials, agricultural or handicraft supplies and recreational equipment. At the ICRC's urging, the pertinent authorities enabled ten relocated families to obtain cash assistance from government-run projects.

Aided by Movement partners, the Ecuadorean Red Cross organized training sessions on first aid, pest control and waste management for 80 people in four communities along the Colombian border; it also provided support for teachers and students in one canton to conduct similar activities.

In Bolivia, 16 destitute amputees regained some mobility at a centre run by the health ministry. The health ministry drew on ICRC material and technical support to improve its physical rehabilitation services. One of the ministry's technicians refined his skills at a training course abroad, with ICRC sponsorship.

### **Peruvians searching for missing relatives travel to exhumation sites with ICRC financial assistance**

With ICRC support, Peruvian government agencies and local organizations strove to clarify the fate of persons missing in relation to the 1980–2000 conflict and to assist their families (see *Actors of influence*). Training and technical guidance for forensic experts, anthropologists, and specialists providing psychosocial care for missing people's families contributed to building local capacities; ICRC financial support enabled some of these experts to attend related events abroad. Forensic professionals, prosecutors, and members of associations of missing people's families in Ayacucho were encouraged to use an ICRC framework for alleviating the emotional distress of these families throughout the exhumation process.

Families wishing to be involved in searching for their missing relatives learnt more about the State services available to them from informational videos. Transport allowances from the ICRC enabled around 700 people to travel to exhumation sites or legal offices; those who journeyed from remote areas to Ayacucho had free temporary lodgings at the National Society branch there. Government agencies and NGOs in Ayacucho drew on the ICRC's advice to bolster their forensic activities and to facilitate the handover of remains to the families concerned.

In Bolivia, the pertinent authorities learnt more about best practices in searching for missing people, and managing human remains, from an ICRC booklet.

### **Earthquake-affected people obtain family-links services from the Ecuadorean National Society**

Movement partners worked together to assist the victims of the earthquake in Ecuador (see *Context*); the National Society led the response. The Colombian and Ecuadorean National Societies collected over 1,000 requests to locate missing people. Technical guidance from Movement components helped the authorities, including the National Prosecutor's Office, coordinate their activities and ensure proper management, identification, and handover of human remains. With logistical or financial assistance from the ICRC, and at its urging, experts from regional forensics associations travelled to Ecuador to aid local services.

The National Societies and the ICRC continued to urge authorities in the region to incorporate family-links services and human remains management in their national disaster-management strategies. Following the earthquake mentioned above, Ecuadorean authorities drew on ICRC expertise to develop a protocol for managing human remains after disasters. An Ecuadorean government official attended a regional seminar on forensics with ICRC financial assistance.

## **PEOPLE DEPRIVED OF THEIR FREEDOM**

### **Peru approves a directive providing comprehensive care and treatment for female detainees**

Detainees in Bolivia, Ecuador and Peru, including those held on security-related charges, received visits conducted in accordance with standard ICRC procedures. Confidential feedback based on these visits and other kinds of support from the ICRC sought to help the authorities improve detainees' treatment and living conditions. The recommendations of the working group examining the causes and consequences of overcrowding in prisons were submitted by the ICRC to Peru's new penitentiary council: they included conditional-release and alternative-sentencing measures and humanitarian pardons.

ICRC expertise helped the Bolivian, Ecuadorean and Peruvian authorities draft new policies and manuals on prison management. In Peru, officials approved a new penitentiary policy, and a directive providing for comprehensive care and treatment for female detainees – a first in Latin America.

Penitentiary officials and instructors in the three countries, including police trainers from the penitentiary school in Ecuador, developed their prison-management capacities through ICRC training materials and during national and regional workshops organized or supported by the ICRC (see *Colombia*). Instructors in Peru held dissemination sessions for prison staff on, *inter alia*, conflict management and the contents of the directive for female detainees.

In the countries covered, 118 inmates held far from their homes received ICRC-organized visits from their relatives. Over 20 released detainees returned home with ICRC financial assistance.

### **Inmates in Bolivia have better access to water after prison facilities are upgraded**

During various ICRC workshops, health and penitentiary officials in Bolivia and Peru strengthened their coordination in providing health services for detainees. In Peru, at a meeting organized by the National Penitentiary Institute, the health ministry and the ICRC, prison health staff learnt more about managing health information – particularly in relation to contagious diseases such as AIDS and TB. Participants also learnt how to register detainees in the national insurance system; such coverage was part of an initiative to expand medical care for inmates. ICRC support for the Ecuadorean health ministry in developing a handbook on health care in prisons was cancelled because the ministry did not deem it necessary.

Bolivian and Peruvian authorities strengthened their capacity to design new prisons and maintain existing ones by participating in local and regional workshops with ICRC financial assistance (see *Mexico City*). ICRC upgrades to common facilities in three Bolivian prisons improved access to water and electricity for around 1,650 detainees.



Inmates in Peru coped with their confinement with help from the national library, the National Penitentiary Institute and the ICRC; they borrowed books from mobile libraries and participated in several artistic and cultural activities. Detainees' artworks were exhibited at the national library, which contributed to broadening public awareness of the plight of people in prisons.

## ACTORS OF INFLUENCE

Various ICRC events throughout the region sought to increase awareness of and support for humanitarian principles, IHL and the Movement among the authorities and members of key organizations. Civil servants and military officials in Bolivia, Ecuador and Peru learnt more about the goals of the Health Care in Danger project and the issue of sexual violence through briefings organized by the ICRC or by their national IHL committees with ICRC support.

### Latin American police officials share good operational practices at first event of its kind in the region

Over 2,300 military and police officers in the three countries – among them police officials and military personnel from the VRAEM and military troops posted along the Colombia-Ecuador border – learnt about the proper use of force through ICRC courses. The Ecuadorean interior ministry, the national police and the ICRC organized the first international colloquium on good operational practices for police officials in Latin America. These officials – 34 commanders from 13 countries – convened to share their experiences in dealing with violent social protests and in the proper use of firearms; they also reflected on the possibility of conducting operational reviews. The Bolivian authorities continued, with ICRC help, to draft a manual and a handbook on the maintenance of public order.

Military and police forces improved their training programmes with support from the ICRC and other organizations. In particular, ICRC-trained instructors in Ecuador and Peru developed their ability, through workshops, to teach their colleagues about international human rights law and/or international policing standards. Following continuous encouragement from the ICRC, the Peruvian interior ministry took steps to establish a centre for training police in these norms and standards.

Bolivian and Peruvian military personnel advanced their understanding of IHL through ICRC briefings. Thirteen officials from the defence ministries of Member States of the Union of South American Nations did the same at an IHL course organized by the Peruvian defence ministry with the ICRC's financial support. The Naval Academy of Peru incorporated IHL in its course on international law.

### Peru ratifies the Arms Trade Treaty and approves a bill on searching for missing people

National IHL committees and the ICRC continued to advise the region's authorities on implementing IHL-related treaties and, particularly in Peru, on drafting or revising legislation on related matters such as *non-refoulement* and family reunification. The Peruvian authorities passed a bill regulating the police's use of force and firearms, and approved a protocol for protecting and assisting people who had left or had been rescued from PCP-M camps. They also approved a bill that allowed – for purely humanitarian purposes – exhumations linked to missing-persons cases from the 1980–2000 conflict to be done outside judicial proceedings, thus potentially accelerating the identification and restitution of human

remains. In this regard, the justice ministry adopted a national plan that was drafted with technical guidance from the ICRC. Peru ratified the Arms Trade Treaty.

Ecuador and Peru backed other States' lobbying efforts in connection with humanitarian issues of particular interest to the ICRC, such as education during armed conflict and the protection and social inclusion of refugees. The Peruvian authorities followed through on their pledge, at the 32nd International Conference, to support the Health Care in Danger project (see *Civilians*).

The Organization of American States incorporated in its resolution on human rights a paragraph on missing persons that was prepared by the Peruvian foreign ministry with technical advice from the ICRC.

ICRC support enabled Ecuadorean and Peruvian university students to participate in an international moot court competition and test their grasp of IHL. The Ecuadorean Red Cross and the ICRC launched a local version of the competition.

The general public in the region learnt more about humanitarian issues and the Movement through various initiatives by the National Societies and/or the ICRC, and through the work of journalists who drew on information from ICRC articles and press releases. Communication materials and art exhibits helped broaden awareness of the plight of missing people's families and of detainees in overcrowded prisons.

## RED CROSS AND RED CRESCENT MOVEMENT

The region's National Societies responded to emergencies related to violence and natural disasters (see *Civilians*); they strengthened their capacities in this area with help from the International Federation and the ICRC. Over 120 volunteers from the Ecuadorean and Peruvian National Societies learnt how to protect themselves while working in violence-prone areas, at workshops on the Safer Access Framework and the Health Care in Danger project. Volunteers from these National Societies also administered first aid to people injured during protests.

The region's National Societies worked with the ICRC to raise awareness of humanitarian principles and the Movement (see *Actors of influence*).

The Peruvian Red Cross strengthened its institutional bases and managerial capacities. The Bolivian Red Cross continued to modernize itself with Movement support.

Regular meetings helped ensure coordination among Movement components in the region.



MAIN FIGURES AND INDICATORS: PROTECTION		Total			
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>					
<b>RCMs and other means of family contact</b>			UAMs/SC		
RCMs collected		1			
RCMs distributed		9			
Phone calls facilitated between family members		128			
<b>Tracing requests, including cases of missing persons</b>			Women	Girls	Boys
People for whom a tracing request was newly registered		28	5		1
Tracing cases closed positively (subject located or fate established)		12			
Tracing cases still being handled at the end of the reporting period (people)		357	73	6	13
<i>including people for whom tracing requests were registered by another delegation</i>		1			
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>					
<b>ICRC visits</b>			Women	Minors	
Detainees visited		39,158	1,691	31	
			Women	Girls	Boys
Detainees visited and monitored individually		147	30		
Detainees newly registered		7			
Number of visits carried out		42			
Number of places of detention visited		21			
<b>RCMs and other means of family contact</b>					
RCMs collected		11			
RCMs distributed		1			
Phone calls made to families to inform them of the whereabouts of a detained relative		5			
Detainees visited by their relatives with ICRC/National Society support		118			
People to whom a detention attestation was issued		2			

MAIN FIGURES AND INDICATORS: ASSISTANCE		Total	Women	Children
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>				
<b>Economic security (in some cases provided within a protection or cooperation programme)</b>				
Food commodities	Beneficiaries	26	7	17
Essential household items	Beneficiaries	121	29	70
Cash	Beneficiaries	695	344	24
<b>Water and habitat (in some cases provided within a protection or cooperation programme)</b>				
Water and habitat activities	Beneficiaries	2,662	932	932
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>				
<b>Economic security (in some cases provided within a protection or cooperation programme)</b>				
Essential household items	Beneficiaries	7		
Cash	Beneficiaries	23	2	
<b>Water and habitat (in some cases provided within a protection or cooperation programme)</b>				
Water and habitat activities	Beneficiaries	1,642	115	

# MEXICO CITY (regional)

COVERING: Costa Rica, Cuba, El Salvador, Guatemala, Honduras, Mexico, Nicaragua, Panama



ICRC/AR\_2016  
 ○ ICRC regional delegation    ♦ ICRC mission    ▽ ICRC-supported physical rehabilitation project

## KEY RESULTS/CONSTRAINTS IN 2016

- ▶ Thousands of vulnerable migrants along the migration route found respite at facilities run by the National Societies and the ICRC, which provided drinking water, temporary accommodations, and health and family-links services.
- ▶ Violence-affected people in four countries had access to health services and water, owing to various forms of ICRC support; young people in El Salvador, Honduras and Mexico obtained psychosocial and/or educational assistance.
- ▶ With ICRC encouragement, a Mexican state enacted a law on the forensic management of missing persons' remains. Families in Guatemala arranged or attended dignified burials for relatives who were once unaccounted for.
- ▶ Detainees in Honduras and Panama had better living conditions after the ICRC upgraded infrastructure. ICRC activities in Salvadorean prisons were suspended in May after the implementation of stricter detention measures there.
- ▶ Military and police instructors in the region developed their ability to teach their peers about international policing standards. Cuba acceded to the Convention on Cluster Munitions and El Salvador to the Rome Statute.

## EXPENDITURE IN KCHF

Protection	5,410
Assistance	9,210
Prevention	3,112
Cooperation with National Societies	1,359
General	192
<b>Total</b>	<b>19,282</b>
<i>Of which: Overheads</i>	<i>1,177</i>

## IMPLEMENTATION RATE

Expenditure/yearly budget	101%
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## PERSONNEL

Mobile staff	41
Resident staff (daily workers not included)	140

The Mexico delegation opened in 1998, becoming a regional delegation in 2002. It helps the region's National Societies strengthen their capacities and works with them to address the most urgent humanitarian needs of persons affected by organized violence and of vulnerable migrants; monitors detainees' conditions; and endeavours to ascertain the fate of missing persons. It encourages the integration of IHL into armed forces' doctrine and into universities' curricula, and human rights norms applicable to the use of force into the doctrine, training and operations of security forces. The delegation hosts the regional advisory service on IHL.

## YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action **HIGH**

PROTECTION	Total
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>	
<b>Restoring family links</b>	
RCMs collected	5
RCMs distributed	18
Phone calls facilitated between family members	82,869
Tracing cases closed positively (subject located or fate established)	4
People reunited with their families	5
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>	
<b>ICRC visits</b>	
Detainees visited	42,451
Detainees visited and monitored individually	12
Number of visits carried out	82
Number of places of detention visited	39
<b>Restoring family links</b>	
RCMs collected	34
RCMs distributed	8
Phone calls made to families to inform them of the whereabouts of a detained relative	28

ASSISTANCE	2016 Targets (up to)	Achieved
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>		
<b>Economic security (in some cases provided within a protection or cooperation programme)<sup>1</sup></b>		
Food commodities	Beneficiaries	
Essential household items	Beneficiaries	30,000
Cash	Beneficiaries	245
Services and training	Beneficiaries	150
<b>Water and habitat (in some cases provided within a protection or cooperation programme)</b>		
Water and habitat activities	Beneficiaries	51,500
		84,993
<b>Health</b>		
Health centres supported	Structures	6
		13
<b>WOUNDED AND SICK</b>		
<b>Hospitals</b>		
Hospitals supported	Structures	3
		1
<b>Water and habitat</b>		
Water and habitat activities	Number of beds	158
<b>Physical rehabilitation</b>		
Projects supported	Projects	10
		7
Patients receiving services	Patients	7,686

1. Owing to operational and management constraints, figures presented in this table and in the narrative part of this report may not reflect the extent of the activities carried out during the reporting period.

## CONTEXT

Some communities in the region – particularly in El Salvador, Honduras and Mexico – continued to suffer the effects of high levels of armed violence: murders, disappearances, displacement, migration and insufficient access to basic services such as health and education. Military troops supported the police in law enforcement operations that led to casualties and arrests. In El Salvador, family contact was disrupted and an increase in TB cases recorded in six prisons housing over 20,000 detainees, after the authorities imposed stricter security measures there in order to curb gang violence.

Many people continued to seek safety and better opportunities elsewhere. Migrants heading for or deported from the United States of America risked abuse and other dangers along their route. Stricter migration policies, notably in Mexico, and the closing of borders in Nicaragua and between Colombia and Panama complicated their journey. An upsurge of economic migrants from Cuba and Haiti put added pressure on the host countries, as they had to address these migrants' needs.

Families throughout the region continued to seek information about relatives who went missing in relation to migration, past armed conflict and ongoing situations of violence.

Natural disasters, such as Hurricane Otto in Costa Rica and Panama, struck some countries in the region.

## ICRC ACTION AND RESULTS

The regional delegation in Mexico City continued to focus on protecting and assisting migrants, missing people's families and other violence-affected people. It maintained close cooperation with the National Societies in the region and helped them boost their capacity to aid these people and to reach and work in violence-prone areas safely.

People travelling the migration route through Guatemala, Honduras and Mexico eased their journey at facilities supported by the National Societies and the ICRC; they also learnt, from informational materials, how to reduce the risk to their safety. These facilities provided them with health-care services, temporary accommodations and/or means to contact relatives. Minors and their relatives traveled back to Guatemala and Honduras with cash assistance. The launching or expansion of some of these activities in El Salvador, Costa Rica, Honduras, Mexico and Panama sought to respond to the influx of migrants in the region.

The ICRC provided support for local partners to become more effective in searching for missing persons and in addressing their families' needs. Technical and infrastructural support enabled forensic personnel in four countries to strengthen their capacity to manage and identify human remains. Families in Guatemala arranged or attended dignified burials for relatives who were once unaccounted for, with ICRC financial support. One Mexican state enacted a law on the forensic identification and management of missing people's remains.

To help ensure that wounded, sick and other violence-affected people in five countries could obtain good-quality health care, the ICRC offered training and material support for first-responders and health personnel. It also upgraded facilities at primary-health-care centres in Mexico and Panama, and began to do the same in one hospital in Honduras. Disabled people, including

migrants, regained their mobility at ICRC-supported physical rehabilitation centres. Psychosocial or psychological care provided by ICRC-supported local partners helped violence-affected people – including schoolchildren and victims of sexual violence – and missing people's families to cope. Communities in remote areas of Guatemala, Honduras and Panama benefited from water and sanitation systems renovated or constructed by the ICRC.

In El Salvador and Honduras, the ICRC began to support initiatives assisting IDPs. It provided material aid to displaced households in El Salvador, and legal advice to Honduran officials in devising legal frameworks for implementing a multidisciplinary emergency response to IDPs' needs.

In five countries, detainees – such as migrants and people held in connection with incidents of violence – received visits in accordance with standard ICRC procedures. These visits were suspended in El Salvador in May, after stricter detention measures took effect in some prisons. In Mexico, a partnership agreement with the authorities included the possibility of ICRC visits to people in federal prisons. The authorities concerned drew on ICRC support to improve detainees' treatment and living conditions. Officials in Honduras began judicial reviews of detainees' cases to expedite legal procedures; in El Salvador, the authorities announced steps to tackle TB in the prisons affected by stricter detention measures. ICRC support for infrastructural upgrades and for prison health staff resulted in better living conditions and/or health care for detainees in Honduras and Panama.

To further understanding of and support for humanitarian principles, IHL and the Movement, the ICRC maintained dialogue with and organized specific events for pertinent authorities and organizations and the wider public throughout the region. Aided by ICRC expertise, the military and the police strengthened their instructors' capacity to train peers in international policing standards. Cuba and El Salvador acceded to IHL-related treaties. An IHL course was included in the curriculum of the law school at a Mexican university.

## CIVILIANS

The ICRC engaged the parties concerned in discussions on the plight of migrants, families of missing persons and other violence-affected people – including IDPs in El Salvador. Where appropriate, it reported allegations of abuse to these parties, with a view to preventing their recurrence and facilitating humanitarian access to these vulnerable people.

### **Migrants and deportees ease their journey with material aid and family-links services**

Migrants and deportees travelling the migration route through Guatemala, Honduras and Mexico benefited from comprehensive assistance – some of them more than once – at facilities supported by the National Societies and the ICRC, in coordination with other humanitarian agencies. Leaflets and radio spots informed them of how to reduce the risk to their safety and where the various assistance points were.

Over 70,000 people had access to potable water following the distribution of bottled water and water-purifying chlorine tablets; several returnee minors covered some of their dietary needs with food provisions. Eighteen NGO-run shelters in Mexico that had been upgraded by the ICRC offered free temporary accommodations. About 28,300 migrants obtained free health services,

including psychological care, at 11 ICRC-supported facilities; the ICRC covered treatment costs for those needing medical and rehabilitative care (see *Wounded and sick*).

Migrants informed their families of their situation via nearly 83,000 free phone calls from 48 family-contact points, ten of which began operations in 2016. One Guatemalan Red Cross shelter – built with ICRC financial support – temporarily housed 587 unaccompanied returnee minors, and their relatives who came to pick them up. In Guatemala and Honduras, cash assistance helped over 200 returnee minors and their relatives to travel home.

The pertinent authorities, organizations and National Societies responded to the influx of migrants in the region (see *Context*) by working with the ICRC to launch or expand some of the activities mentioned above. In El Salvador, Costa Rica and Panama, migrants received informational materials translated in their languages that detailed how to minimize the risks to their safety while travelling and where to find assistance. Ad hoc ICRC material aid to two medical centres in Honduras and Mexico helped staff provide more effective care for migrants.

### **Families in Guatemala bury relatives who were located after years of being unaccounted for**

State agencies, humanitarian actors and associations of missing people's families drew on ICRC support – tracing services, for instance – to search more effectively for missing persons, including migrants, and to address the needs of their families (see *Actors of influence*).

Various parties concerned convened at international events in Cuba and Mexico – organized or supported by the ICRC – to discuss and recommend best practices in forensics. Aided by the ICRC or by ICRC-supported trainers, over 770 forensic personnel and investigators and other pertinent officials in El Salvador, Guatemala, Honduras and Mexico developed their ability to: collect information on missing persons; standardize forensic data management; and identify human remains. ICRC material and infrastructural support for morgues and burial niches in parts of Guatemala, Honduras and Mexico contributed to the dignified burial of unidentified remains. In Mexico, such support enabled the documentation of human remains in line with best practices and the identification of some of them. Guatemalan and Salvadorean officials recorded missing-persons cases using the ICRC's data-management software; the Mexican authorities pursued the installation of this software in public prosecutors' offices.

In Guatemala, around 1,750 families used financial and technical support from the ICRC to arrange or attend dignified burials for relatives who were located after years of being unaccounted for or to follow up cases of missing relatives with the authorities concerned. Psychosocial or psychological care from ICRC-supported services helped other families there and in Honduras and Mexico to cope with their distress. In Honduras, 20 psychologists were trained to support associations of families of missing persons.

### **Students, teachers and communities learn to cope more effectively with the consequences of violence**

Vulnerable violence-affected people dealt with their situation through various forms of assistance provided by the pertinent authorities and National Society, and the ICRC. A project in Chihuahua, Mexico – run by the education ministry, the National Society and the ICRC – taught students and teachers at 13 schools

how to cope more effectively with the consequences of violence. Nearly 200 teachers helped a total of 22,750 students to ease their distress and instructed them on techniques for protecting themselves against violence; the teachers were trained by the health ministry, the National Society and the ICRC. Some of the project's beneficiaries reported that they were less depressed and anxious and that they felt safer in their schools and residences. The education authorities in Chihuahua began incorporating elements of the project in these schools' curricula.

National Society and ICRC projects in violence-prone urban areas of El Salvador and Honduras helped create access for 25,860 people to first aid and psychosocial assistance and to recreational and educational activities.

### **IDPs in El Salvador cover their material needs**

Sixty displaced households in El Salvador met their basic needs with household items provided by the Salvadorean Red Cross Society and the ICRC; NGOs assisting displaced families also received material support. Over 5,300 people in remote areas of Guatemala, Honduras and Panama benefited from upgraded or newly constructed water and sanitation systems. Through training or information sessions, 28 community workers in Honduras strengthened their hygiene-promotion skills, and 4,200 people learnt to protect themselves from contagious diseases and to refer sick people to appropriate services. These activities in Honduras ended in August, owing to the improved security situation there.

ICRC-upgraded health facilities in Tamaulipas state, Mexico, and in the Darién region of Panama, and health ministry and ICRC brigades in Darién, provided primary health care for vulnerable people. Victims of violence – including of sexual violence – and National Society volunteers received psychosocial or psychological support from trained teachers and Mexican Red Cross volunteers in Mexico and at a health facility in Guatemala. Health-centre staff in Mexico learnt more effective methods of self-protection during ICRC workshops on the Health Care in Danger project.

## **PEOPLE DEPRIVED OF THEIR FREEDOM**

### **ICRC visits to detainees in El Salvador are suspended**

Detainees in El Salvador, Honduras and Panama – including people held in connection with incidents of violence – and migrants in holding centres in Guatemala, Honduras, Mexico and Panama received visits conducted in accordance with standard ICRC procedures. However, visits to detainees in El Salvador were suspended in May, after stricter detention measures went into effect in some prisons (see *Context*). In Mexico, the ICRC signed an agreement with penitentiary officials on prospective partnerships; the agreement included the possibility of visiting people in federal prisons.

### **Honduran officials begin judicial reviews of cases to expedite legal procedures**

After the visits mentioned above, the ICRC discussed its findings confidentially with the authorities, who drew on ICRC expertise to address issues concerning detainees' treatment and living conditions, particularly the effects of prison overcrowding. ICRC oral and written representations to the Salvadorean authorities on the effects of the stricter detention measures, and the impact on the ICRC's ability to assist detainees, led in part to the authorities' announcement of steps to tackle TB in prisons. An interministerial working group in Honduras began judicial reviews of cases and set up a new registration system for detainees in selected prisons, with a view to expediting legal procedures.



At various ICRC-organized events (see *Colombia*), detention officials from Cuba, El Salvador, Honduras and elsewhere in the region discussed humanitarian issues related to prison management; one seminar in Panama, on prison infrastructure, brought together 50 representatives from 12 Latin American countries.

Inmates reconnected with their relatives through the Movement's family-links services, which included family visits.

### **Detainees in Honduran and Panamanian prisons benefit from upgraded prison facilities**

Approximately 13,000 inmates in Honduras and Panama had better living conditions after the authorities, with ICRC support, renovated water and electrical systems and other facilities. The ICRC formalized an agreement with the Panamanian interior ministry to implement an ICRC project to improve living conditions for inmates in selected prisons.

Honduran penitentiary and health officials and the ICRC signed a cooperation agreement to enhance detainees' access to comprehensive health services. ICRC-provided training and supplies for staff at selected prisons helped them provide more effective health care for inmates.

### **WOUNDED AND SICK**

#### **A Honduran hospital begins to upgrade its emergency room**

To help ensure the availability of life-saving care for wounded people in Mexico, the National Society and the ICRC provided material support and training for potential first-responders and health staff. During ICRC workshops, surgical personnel and students in El Salvador, Honduras and Mexico strengthened their ability to operate on wounded people. A university in Honduras included weapon-wound management in its training curriculum.

The Tegucigalpa Teaching Hospital in Honduras used ICRC donations of medical equipment to improve treatment for victims of violence. ICRC upgrades to the hospital's emergency room got under way: the installation and refurbishment of a nursing station and sanitation facilities contributed to more comfortable and hygienic surroundings for patients; these improvements also helped facilitate infection-control measures. The hospital and the ICRC signed an agreement allowing ICRC surgeons to provide the hospital's doctors with on-site guidance and technical input in the management of weapon wounds.

#### **Victims of unexploded ordnance and disabled migrants obtain rehabilitative care**

Roughly 7,700 disabled persons – including migrants and mine victims – in El Salvador, Guatemala, Honduras and Mexico regained their mobility at seven ICRC-supported physical rehabilitation centres. The ICRC covered treatment, transportation and accommodation costs for nearly 200 returnee migrants. In Honduras, 17 patients in one centre relieved some of their emotional distress with the help of ICRC-trained psychologists. The centres' staff improved their services with financial support and guidance from the ICRC.

### **ACTORS OF INFLUENCE**

#### **Armed forces and police instructors learn to teach their peers about international policing standards**

The region's armed forces and police drew on ICRC expertise to increase respect for international policing standards and

international human rights law in their respective training and doctrine. Around 11,300 military personnel with law enforcement duties and police officers in El Salvador, Guatemala, Honduras, Nicaragua, Mexico and Panama strengthened their knowledge of international policing standards at ICRC-organized seminars.

The Mexican federal police continued incorporating international policing standards in its officers' training curricula – in line with the findings of a 2015 ICRC assessment – and in its doctrine. At ICRC workshops in El Salvador, Guatemala, Honduras, Mexico and Panama, police officers and military instructors refined their ability to teach their peers about international policing standards.

#### **A Mexican state enacts a law on the forensic management of missing persons' remains**

Authorities and members of national IHL committees in the region continued to promote and implement IHL at the national level, with ICRC support, such as financial input for their attendance at IHL events abroad (see *International law and policy*).

ICRC legal advice to government officials and lawyers focused on the incorporation in domestic legal frameworks of provisions on the repression of war crimes and the protection due to the red cross emblem and, in Honduras, of a multidisciplinary emergency response to IDPs' needs. Guatemalan officials worked to expand the mandate of a commission – responsible for searching for people missing in relation to past conflict – to include recent disappearances and missing migrants. The Mexican authorities sought to draft a law covering the needs of missing people and their families. One Mexican state enacted a law on the forensic identification and management of missing persons' remains.

Cuba acceded to the Convention on Cluster Munitions and El Salvador to the Rome Statute.

The ICRC continued to raise humanitarian issues – especially those concerning migrants and detainees – during forums organized by regional and international organizations such as the Inter-American Court of Human Rights. At the Regional Conference on Migration, and during UNHCR-driven processes, ICRC recommendations for assisting migrants were included in the final texts adopted by Member States.

#### **Law school at a Mexican university includes IHL in its curriculum**

At conferences organized by two Cuban academic institutions, students and lecturers added to their knowledge of IHL during ICRC presentations. The law school at a Mexican university included IHL in its curriculum.

Communication efforts and events organized by the region's National Societies and the ICRC sought to broaden awareness of regional issues of growing humanitarian concern, and to foster support for ICRC activities, among government officials, members of civil society and humanitarian organizations. Drawing on ICRC communication and informational materials or presentations, journalists produced articles on the plight of missing people's families in Guatemala and Mexico. National Society dissemination sessions helped advance understanding of the Movement and its Fundamental Principles among violence-prone communities and the wider public.



## RED CROSS AND RED CRESCENT MOVEMENT

Support from Movement partners helped the region's National Societies to strengthen their ability to respond to emergencies and to the needs of violence-affected people and vulnerable migrants – through family-links services, for instance (see *Civilians*). During briefings and workshops, over 5,300 National Society volunteers in Guatemala, Mexico and Nicaragua learnt about the Safer Access Framework, and 30 Costa Rica Red Cross volunteers were trained to apply it in their activities.

Twenty-two health staff from Cuba and nine from elsewhere bolstered their capacity to respond to large-scale health emergencies at a course in Cuba that was organized by the Cuban Red Cross, a local medical institution and the ICRC.

Technical advice from the ICRC helped the region's National Societies to improve their communication capacities and revise their statutes.

Movement components in the region coordinated their activities, for instance through a tripartite coordination mechanism in El Salvador; the ICRC contributed material aid and technical assistance to the Movement's response to various natural disasters (see, for example, *Lima*). Twenty-five National Societies from the Americas, the International Federation and the ICRC adopted a joint declaration that set out a unified and proactive Movement approach to the issue of migration.

MAIN FIGURES AND INDICATORS: PROTECTION		Total			
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>					
<b>RCMs and other means of family contact</b>			UAMs/SC		
RCMs collected		5	1		
RCMs distributed		18			
Phone calls facilitated between family members		82,869			
<b>Reunifications, transfers and repatriations</b>					
People reunited with their families		5			
	<i>including people registered by another delegation</i>	4			
<b>Tracing requests, including cases of missing persons</b>			Women	Girls	Boys
People for whom a tracing request was newly registered		1			
Tracing cases closed positively (subject located or fate established)		4			
Tracing cases still being handled at the end of the reporting period (people)		3			
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>					
<b>ICRC visits</b>			Women	Minors	
Detainees visited		42,451	1,730	2,375	
			Women	Girls	Boys
Detainees visited and monitored individually		12			
Number of visits carried out		82			
Number of places of detention visited		39			
<b>RCMs and other means of family contact</b>					
RCMs collected		34			
RCMs distributed		8			
Phone calls made to families to inform them of the whereabouts of a detained relative		28			
Detainees visited by their relatives with ICRC/National Society support		5			
People to whom a detention attestation was issued		4			

MAIN FIGURES AND INDICATORS: ASSISTANCE		Total	Women	Children
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>				
<b>Economic security (in some cases provided within a protection or cooperation programme)<sup>1</sup></b>				
Food commodities	Beneficiaries			
Essential household items	Beneficiaries	63	14	17
Cash	Beneficiaries	245	8	225
Services and training	Beneficiaries	150	50	55
<b>Water and habitat (in some cases provided within a protection or cooperation programme)</b>				
Water and habitat activities	Beneficiaries	84,993		
<b>Health</b>				
Health centres supported	Structures	13		
Average catchment population		125,980		
Consultations		29,694		
	<i>of which curative</i>	29,655	3,228	1,277
	<i>of which antenatal</i>	39		
Referrals to a second level of care	Patients	157		
	<i>of whom gynaecological/obstetric cases</i>	1		
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>				
<b>Water and habitat (in some cases provided within a protection or cooperation programme)</b>				
Water and habitat activities <sup>1</sup>	Beneficiaries	19,405		
<b>Health</b>				
Visits carried out by health staff		29		
Places of detention visited by health staff	Structures	7		
Health facilities supported in places of detention visited by health staff	Structures	3		
<b>WOUNDED AND SICK</b>				
<b>Hospitals</b>				
Hospitals supported	Structures	1		
<b>Water and habitat</b>				
Water and habitat activities	Number of beds	158		
<b>Physical rehabilitation</b>				
Projects supported	Projects	7		
Patients receiving services	Patients	7,686	3,334	1,308
New patients fitted with prostheses	Patients	149	26	34
Prostheses delivered	Units	250	41	31
	<i>of which for victims of mines or explosive remnants of war</i>	2		
New patients fitted with orthoses	Patients	852	78	669
Orthoses delivered	Units	1,141	56	992
Patients receiving physiotherapy	Patients	5,781	3,106	299
Walking aids delivered	Units	139	34	18
Wheelchairs or tricycles delivered	Units	12		

1. Owing to operational and management constraints, figures presented in this table and in the narrative part of this report may not reflect the extent of the activities carried out during the reporting period.

# WASHINGTON (regional)

COVERING: Canada, United States of America, Organization of American States (OAS)



ICRC/AR\_2016  
 ⊕ ICRC regional delegation ⊕ ICRC delegation + ICRC office

Established in 1995, the Washington regional delegation engages in a regular dialogue on IHL and issues of humanitarian concern with government officials and bodies, academic institutions and other interested groups in Canada and the United States of America. The delegation heightens awareness of the ICRC's mandate and priorities within the OAS. It mobilizes political and financial support for ICRC activities and secures support for IHL implementation. It visits people held at the US internment facility at Guantanamo Bay Naval Station in Cuba. It works closely with the American Red Cross and the Canadian Red Cross Society.

## YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action **HIGH**

## KEY RESULTS/CONSTRAINTS IN 2016

- ▶ Authorities in Canada and in the United States of America (hereafter US) engaged with the ICRC in dialogue on the protection of civilians and other IHL-related issues, and expressed support for its activities.
- ▶ People held at the US internment facility at Guantanamo Bay Naval Station in Cuba kept in touch with their relatives through RCMs, video calls, phone calls and pre-recorded video messages.
- ▶ US authorities and policy-makers were given recommendations for ensuring that conditions at the Guantanamo Bay internment facility – and transfers from there – conformed to internationally recognized standards.
- ▶ The ICRC contributed expert input, about IHL-related matters and on humanitarian considerations that merited attention, to the Canadian government's reviews of the country's policies on defence and international assistance.

PROTECTION	Total
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>	
<b>Restoring family links</b>	
RCMs collected	2
RCMs distributed	10
Phone calls facilitated between family members	423
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>	
<b>ICRC visits</b>	
Detainees visited	107
Detainees visited and monitored individually	82
Number of visits carried out	8
Number of places of detention visited	1
<b>Restoring family links</b>	
RCMs collected	729
RCMs distributed	567

## EXPENDITURE IN KCHF

Protection	2,403
Assistance	168
Prevention	3,115
Cooperation with National Societies	676
General	68
<b>Total</b>	<b>6,430</b>
<i>Of which: Overheads</i>	<i>392</i>

## IMPLEMENTATION RATE

Expenditure/yearly budget	92%
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## PERSONNEL

Mobile staff	11
Resident staff (daily workers not included)	27

## CONTEXT

The United States of America (hereafter US) continued to play a major role in international affairs. It remained engaged in various military operations overseas: in the Middle East, where it led an international military coalition carrying out air strikes against the Islamic State group and providing military advice, training and other support to security forces and armed groups; and in Afghanistan, Somalia and elsewhere.

A new US president was elected in November 2016.

The transfer or repatriation of people held at the US internment facility at Guantanamo Bay Naval Station in Cuba continued. Several of the transfers followed the decisions of the Periodic Review Board, which continued to evaluate the status of internees' cases and determine whether they were to remain in custody or were eligible for transfer.

Canada worked on strengthening its position within the international community, and reviewed its defence and international assistance policies. In February, it stopped conducting air strikes in Iraq and the Syrian Arab Republic; it focused on providing training and other support to armed forces in Iraq and Ukraine, and on reinforcing NATO's presence in the Baltic countries.

Migrants from Central America and Mexico continued to cross the border into the US, risking deportation or arrest.

## ICRC ACTION AND RESULTS

The main themes of the ICRC's dialogue with the US authorities remained unchanged: the protection of civilians during US military operations; US detention policy and practices; and the humanitarian situation, and the ICRC's activities, in contexts of common interest. Dialogue with Canadian authorities was concerned mainly with ensuring respect for IHL and other operational, legal and humanitarian concerns.

The ICRC continued to lend its expertise to both States for advancing the incorporation of measures to protect civilians in various aspects of their military operations; it also sought to influence their positions on key humanitarian issues. In July, the US president asked government agencies to maintain contact with the ICRC, as part of a broader executive order on minimizing civilian casualties during military operations. The ICRC contributed to the Canadian government's review of its policies on defence and international assistance (see *Context*), providing input on IHL-related matters and humanitarian considerations that merited attention.

Dialogue with the US armed forces concentrated on their operations in the Middle East. Senior US military officials and the ICRC discussed issues related to the conduct of hostilities, the humanitarian consequences of US military operations and the responsibilities that followed from US support for security forces and armed groups; recommendations were made to certain commands on specific issues. Briefings and events with or for Canadian and US operational commanders and staff helped further their understanding of IHL and of the ICRC's mandate and activities.

The ICRC visited people held at the Guantanamo Bay internment facility, to monitor their treatment and living conditions, including their access to health care. It also helped internees maintain contact with their relatives through RCMs, phone calls and

video calls. It maintained its dialogue with US policy-makers and other pertinent authorities on the internees' humanitarian and legal concerns, drawing particular attention to the importance of regular family contact and the provision of health care in line with internationally recognized standards and medical ethics. The ICRC also emphasized the importance of respecting the principle of *non-refoulement* when transferring people out of US custody.

Interaction with the authorities and members of civil society in Canada and the US helped to foster support for the ICRC's neutral, impartial and independent approach to humanitarian action and to strengthen its position as a key source of reference on IHL. Briefings, meetings, seminars and other events – which the ICRC usually organized or attended with leading universities, National Societies and other local institutions – facilitated substantive discussions on such topics as the violence affecting patients and health-care services, the rules applicable to the conduct of hostilities, and the humanitarian response to conflict in urban areas. Public awareness of these matters was also broadened by media coverage of the ICRC's work and by the ICRC's efforts to strengthen its public communication. The ICRC continued to engage US-based technology companies in discussions on the use of technology to address humanitarian needs.

Regular contact with the Organization of American States (OAS) helped promote IHL among member countries and raise awareness of the ICRC's activities for migrants and other vulnerable people.

The ICRC also sought to develop dialogue with US authorities on the humanitarian consequences of migration. The American Red Cross continued to offer phone services to vulnerable migrants at transit points along the Mexico-US border.

The Canadian Red Cross Society and the ICRC worked on strengthening their partnership, particularly in addressing health needs in conflict-affected contexts and in helping other National Societies build their capacities. The ICRC maintained its relations with the American Red Cross.

## CIVILIANS

### Authorities and the ICRC discuss the humanitarian consequences of overseas military operations

The protection of civilians in countries where US armed forces operate remained a major theme of the ICRC's dialogue with US defence authorities and pertinent federal executive departments and legislative bodies. Meetings with decision-makers and briefings for military commanders and troops emphasized the necessity of complying with IHL (see *Actors of influence*), particularly the rules on the conduct of hostilities. Such interaction focused on matters related to US military operations in the Middle East, including their detention policies and practices and the responsibilities that followed from their training and support for security forces and armed groups in the region. The ICRC also raised – during training exercises and confidential dialogue – the humanitarian consequences of US military operations and those of their partners; it made recommendations, as necessary, to certain US commands on specific issues.

Dialogue with the strategic and operational leadership of the Canadian armed forces focused on IHL and its incorporation in their initiatives to train, advise and assist other armed forces. At an ICRC seminar, officials from the ministries of foreign affairs and international development learnt more about the protection due to civilians during armed conflicts.

The ICRC continued to draw attention to the violence endangering patients and health-care services during armed conflict and other situations of violence – in its public communication and during dialogue with policy-makers and members of civil society – with a view to raising support for measures ensuring the safe provision of health care.

### **The pertinent authorities are apprised of the plight of vulnerable migrants**

Vulnerable migrants in the US contacted their relatives through phone stations set up by the American Red Cross at key transit points along the Mexico-US border.

The ICRC pursued dialogue, on the humanitarian consequences of migration, with the pertinent US authorities and contributed to discussions on the subject at regional events (see *Actors of influence*). It continued to monitor the situation of vulnerable migrants: for example, it assessed needs among Haitian migrants who had gathered at the US-Mexico border. It kept up its efforts to engage the pertinent US authorities' attention in matters related to humanitarian forensics.

### **PEOPLE DEPRIVED OF THEIR FREEDOM**

People held at the Guantanamo Bay internment facility were visited, in accordance with standard ICRC procedures, by delegates who monitored their treatment and living conditions; 105 internees were met individually. During private interviews with the delegates, some internees discussed their physical and psychological state and other matters related to their situation.

The ICRC shared its findings and recommendations to the pertinent authorities through confidential reports and during periodic meetings, in order, when necessary, to help them bring internment conditions in line with internationally recognized standards.

### **Guantanamo Bay internees maintain family contact**

Most of the internees were able to communicate with their relatives in various countries through RCMs (567 distributed; 729 collected) and phone or video calls (423 made). Several among them recorded video messages, which their relatives viewed at ICRC or National Society offices near them. Twenty-nine people received food parcels sent by their families through the ICRC. Administrators at the internment facility and other key policy-makers considered the ICRC's recommendations for improving internees' contact with their families.

Health care remained a major theme of discussions between the authorities and the ICRC, particularly in view of: an aging internee population; mental illnesses among the internees; and the necessity of complying with internationally recognized standards and respecting medical ethics, including those concerning the management of hunger strikes. An ICRC doctor visited the facility to assess internees' health-care needs, meet with medical and psychiatric staff, and review available medical records. Findings and, where necessary, recommendations for the provision of health care, including mental-health care and/or physical rehabilitation services, were shared with the authorities.

### **US authorities are apprised of humanitarian concerns related to transfers of people out of US custody**

In 2016, 48 people were transferred or repatriated from Guantanamo Bay; 59 were still there as at 31 December. The ICRC

maintained its dialogue, with the Department of Defense and other federal executive departments, on the legal framework and procedural guarantees applicable to Guantanamo Bay internees; this was particularly consequential because the status of pending cases was being reviewed (see *Context*). Discussions between these agencies and the ICRC also covered the necessity of respecting the principle of *non-refoulement* in transferring detainees out of US custody, whether to their home countries or to third countries, and the importance of mitigating the humanitarian consequences of such transfers.

The US Department of Defense's commitment to notify the ICRC of all detainees under its authority, and facilitate access to them, was made law through the 2016 National Defense Authorization Act, which the US president had signed in 2015. The ICRC sustained its confidential dialogue with the pertinent authorities about access to other detainees of ICRC concern, in particular people who had been held under the custody of the US Department of Defense and transferred to facilities on Canadian or US soil.

### **ACTORS OF INFLUENCE**

#### **Policy-makers reaffirm their support for humanitarian action and the ICRC**

Dialogue with decision-makers in the region enabled the ICRC to foster support for its neutral, impartial and independent humanitarian action and, where necessary, to mobilize them on issues of pressing humanitarian concern.

Dialogue with officials from various sections of the US federal government focused on the situation, and the ICRC's activities, in contexts of common concern, and on the situation of people held at the Guantanamo Bay internment facility (see *People deprived of their freedom*). Contact with US authorities – the ICRC president's meetings with them, briefings by ICRC officials, and other interaction – also sought to influence their views on such matters as humanitarian financing and the humanitarian response to conflict in urban areas. The importance of confidentiality in the ICRC's work was emphasized. In July, the US president called on government agencies to maintain contact with the ICRC, as part of a broader executive order on minimizing civilian casualties in US military operations.

Efforts to strengthen the ICRC's relationship with the Canadian government continued. Discussions between the ICRC's president and Canada's prime minister, and other meetings between Canadian and ICRC officials, encompassed humanitarian policy and operations and respect for IHL. The ICRC made expert contributions – about IHL-related matters and humanitarian considerations – to the government's review of its policies on defence and international assistance.

The ICRC maintained its engagement with the OAS, particularly on the plight of migrants in Central and North America and efforts to assist them. During OAS debates and at briefings for OAS diplomats, the ICRC gave prominence to these topics and to issues affecting missing persons' families. OAS officials learnt more about implementing IHL through ICRC presentations at OAS events.

Dialogue with the World Bank was developed, particularly on humanitarian and development financing, and on humanitarian issues and the ICRC's operations in fragile contexts.



## **US and Canadian military personnel further their understanding of IHL**

During meetings with ICRC representatives, senior US officials from the military and the intelligence community discussed humanitarian concerns of pertinence to them and the applicable international legal framework. These meetings focused on the US military's operations in the Middle East (see *Civilians*); dialogue about the military engagement in Afghanistan, Somalia and other contexts continued.

Meetings with Canadian military personnel, at strategic and operational levels, covered Canada's military engagement overseas and other policy, operational and legal issues.

During briefings and military training exercises attended by the ICRC or organized with its technical assistance, Canadian and US operational command staff and troops added to their knowledge of IHL and its application at various stages of military operations. Personnel bound for missions abroad or supporting other armed forces – for example, Canadian advisers to Ukrainian troops – were briefed on IHL and on the humanitarian issues and ICRC activities in their places of deployment. Contact with US special operations forces' training centres was sustained: the Special Operations Command attended an ICRC-organized experts' round-table in Switzerland. The Canadian Red Cross organized IHL briefings for the armed forces, with ICRC financial support and technical guidance.

Future commanders and operational staff learnt more about IHL, humanitarian issues and the ICRC's mandate and activities through ICRC presentations and events at US military educational institutions, including the Joint Forces Staff College and the service academies.

The Washington delegation facilitated contact between ICRC officials and US-based NATO bodies and the UN Department of Peacekeeping Operations.

## **Authorities and civil society discuss IHL and obstacles to humanitarian action**

The authorities and civil society in both countries contributed actively to discussions about IHL and humanitarian issues during events that the ICRC organized or attended, often in cooperation with the National Societies or local institutions. These discussions covered such topics as: the conduct of hostilities; detention in non-international armed conflict; humanitarian access during armed conflict; protection of people during conflict in urban areas; violence affecting patients and health-care personnel; and cyber warfare.

Partnerships with Canadian and US universities – for example, an IHL workshop at Yale Law School and presentations on IHL at the Columbia University Graduate School of Journalism – continued to help the ICRC maintain its position as a source of reference on IHL. Students from US law schools and service academies tested their grasp of IHL at a national competition organized by the American Red Cross with ICRC technical support. In Canada, law professors and students learnt more about contemporary challenges to IHL at conferences hosted by the National Society and the ICRC.

Media coverage of the ICRC's work and the ICRC's own efforts to boost its online presence, particularly through the *Intercross* blog and social media platforms, helped broaden awareness of IHL, humanitarian issues and the ICRC's work. Events organized around the launch of the updated commentary on the First Geneva Convention and of a report on the "People on War" survey, through which people in 16 countries shared their views about some rules of war, drew further attention to these topics.

The ICRC's director-general, together with American Red Cross staff, met with US-based technology companies and experts to discuss how technology could be used to address humanitarian needs more effectively.

## **RED CROSS AND RED CRESCENT MOVEMENT**

The Canadian Red Cross and the ICRC strove to strengthen their strategic partnership, particularly in such areas as: responding to health needs; helping other National Societies – such as the Lebanese Red Cross and the Syrian Arab Red Crescent – develop their capacities; and identifying innovative approaches to humanitarian action. The Canadian Red Cross and the ICRC also continued to cooperate in promoting IHL and their joint activities among Canadian policy-makers, and in the recruitment of ICRC staff. The ICRC provided training for Canadian Red Cross emergency response personnel.

The American Red Cross continued to offer family-links services, particularly to vulnerable migrants (see *Civilians*) and to promote IHL (see *Actors of influence*). Dialogue between the American Red Cross and the ICRC, on cooperation in fundraising, continued.

<b>MAIN FIGURES AND INDICATORS: PROTECTION</b>		<b>Total</b>			
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>					
<b>RCMs and other means of family contact</b>			<b>UAMs/SC</b>		
RCMs collected		2			
RCMs distributed		10			
Phone calls facilitated between family members		423			
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>					
<b>ICRC visits</b>			<b>Women</b>	<b>Minors</b>	
Detainees visited		107			
			<b>Women</b>	<b>Girls</b>	<b>Boys</b>
Detainees visited and monitored individually		82			
Number of visits carried out		8			
Number of places of detention visited		1			
<b>RCMs and other means of family contact</b>					
RCMs collected		729			
RCMs distributed		567			
People to whom a detention attestation was issued		1			

<b>MAIN FIGURES AND INDICATORS: ASSISTANCE</b>		<b>Total</b>	<b>Women</b>	<b>Children</b>
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>				
<b>Health</b>				
Visits carried out by health staff		3		
Places of detention visited by health staff	Structures	1		

The multiple tasks and activities of the UN often have implications of a humanitarian nature. Operating since 1983, the ICRC delegation to the UN serves as a support and a liaison for ICRC operational and legal initiatives. The delegation conveys the ICRC's viewpoint and keeps updated on trends and developments relating to humanitarian issues and promotes IHL.

## KEY RESULTS/CONSTRAINTS IN 2016

- ▶ The ICRC addressed the UN General Assembly and the Security Council, emphasizing such matters as IHL and the protection of the civilian population; this helped shape the content of several key UN resolutions.
- ▶ The ICRC contributed to multilateral mechanisms on the future of humanitarian action, helping ensure that IHL was reflected in output documents, as in the case of the agenda adopted by the UN on housing and urban development.
- ▶ UN officials and representatives of Member States learnt more about the ICRC's views on the situation in Iraq, South Sudan, the Syrian Arab Republic, Yemen, and the Lake Chad region, and the organization's work there.
- ▶ The ICRC kept abreast of developments in the humanitarian field, which influenced decision-making processes throughout the organization and helped strengthen field activities.

## YEARLY RESULT

Level of achievement of ICRC yearly objectives/plans of action

**HIGH**

## EXPENDITURE IN KCHF

Protection	-
Assistance	-
Prevention	2,772
Cooperation with National Societies	-
General	-
<b>Total</b>	<b>2,772</b>
<i>Of which: Overheads</i>	<i>169</i>

## IMPLEMENTATION RATE

Expenditure/yearly budget	96%
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## PERSONNEL

Mobile staff	4
Resident staff (daily workers not included)	9

## CONTEXT

The UN and the wider international community grappled with the consequences of the numerous armed conflicts and other situations of violence throughout the world – the difficulties of protecting and assisting civilians during the heavy clashes in eastern Aleppo in the Syrian Arab Republic (hereafter Syria) in December 2016 exemplified the roadblocks faced by humanitarian workers.

The international community discussed the future of humanitarian and development assistance, tackling such matters as the Sustainable Development Goals and the need for longer-term and more systematic responses to protracted conflicts. In September 2016, the UN General Assembly adopted the New York Declaration for Refugees and Migrants, which affirmed Member States' commitment to strengthening mechanisms to protect people on the move.

The UN General Assembly appointed its new secretary-general at the end of 2016.

## ICRC ACTION AND RESULTS

The New York delegation stayed in regular contact with UN bodies, Member States and observers, and civil society organizations, which enabled it to draw attention to pressing humanitarian concerns and to call for greater respect for IHL. The ICRC drew on its field experiences to concretize policy and other discussions and to contribute to the drafting of UN resolutions and guidelines, and other documents with bearing on humanitarian issues.

As a permanent observer at the UN, the ICRC maintained a regular presence at Security Council and General Assembly events. It addressed the Security Council as an expert briefer on several occasions: it reiterated the legal obligation of conflict parties to ensure that people under their control had access to essential goods and services and that those seeking or providing medical care must be spared from attack. This enabled the ICRC to contribute to the content of the Security Council's resolution on medical care in armed conflict.

The ICRC made statements to the General Assembly on the necessity of: addressing the specific needs of displaced people, women and children; upholding the rule of law and universal jurisdiction; and working towards a ban on nuclear weapons. In each instance, it emphasized the need to consider these issues from a humanitarian perspective and to take an apolitical approach to meeting the needs of victims.

The ICRC continued to cooperate with the Department of Peacekeeping Operations (DPKO) and the Office of Legal Affairs (OLA), providing feedback on IHL-related matters, particularly in the context of peacekeeping operations. The DPKO and the ICRC held consultations on the former's revision of its professional standards for protection work, and developed, for the DPKO's use, a training tool on the protection of the civilian population.

The ICRC closely followed and participated in a number of multi-lateral mechanisms and events of consequence to humanitarian work, such as the World Humanitarian Summit, the UN Summit Addressing Large Movements of Refugees and Migrants, and the UN Conference on Housing and Sustainable Urban Development (known as Habitat III). Through its participation in these forums, the ICRC contributed to shaping the international humanitarian agenda and the discussion of related matters – for instance,

displacement and migration, protracted conflict in urban areas, and the nexus between humanitarian and development work.

The ICRC also sought direct engagement with UN officials and representatives of Member States at regular meetings, some of which were held bilaterally. These included the events attended by the ICRC's president, for example, the high-level events that took place on the sidelines of the General Assembly's regular session; the delegation also had monthly meetings with the president of the Security Council. ICRC delegates frequently delivered briefings on the organization's views on contexts where it had extensive operations, such as Iraq, South Sudan, Syria, Yemen, and the Lake Chad region. The ICRC and the New York University School of Law jointly organized their annual seminar on IHL for diplomats, which was attended by over 100 State officials.

The ICRC continued to coordinate closely with other organizations and UN-affiliated consortia, and with Movement partners. To increase public awareness of its priorities and activities, the ICRC also maintained its ties to New York-based NGOs, think-tanks and academic institutions. It strengthened its public communication work by stepping up its presence on social media and reinforcing its contacts among UN-accredited media.

Such interaction helped decision-makers at various levels deepen their understanding of the ICRC's distinct mandate and approach. It also helped the ICRC stay abreast of developments in humanitarian affairs, which contributed to streamlining organizational decision-making and field activities.

## ACTORS OF INFLUENCE

Through its regular engagement with the UN and its bodies and Member States, the ICRC helped ensure that IHL and humanitarian issues were given due consideration and reflected in these entities' decision-making, resolutions, policies and documents.

### ICRC speaks out at UN events and calls for greater respect for IHL

The ICRC addressed the Security Council as an expert briefer on several occasions. During the Council's open debate on the protection of the civilian population, the organization made the link between respect for IHL and the gravity of suffering borne by conflict victims; it emphasized the obligation of conflict parties to meet the basic needs of people under their control and to allow the delivery of aid to civilians in need. The ICRC also discussed the protection due to health-care services – in the run-up to the Council's adoption of a strongly worded resolution on the subject and during a subsequent discussion on the UN secretary-general's recommendations for implementing the resolution. During the Security Council debate on peacekeeping operations, the ICRC's president stressed that discussions on the technical aspects of the applicability of IHL should not preclude the objective of impeccable respect for IHL by all actors.

The ICRC also spoke out at the General Assembly's regular session and at committee debates to draw attention to such humanitarian issues as: the specific needs of displaced people, women and children and the importance of the rule of law and universal jurisdiction; the ICRC urged Member States to decisively work towards a ban on nuclear weapons and the total elimination of these weapons.

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### **DPKO and ICRC work together to develop a training module on the protection of civilians**

The DPKO and the ICRC developed, for the former's use, a training module on the protection of civilians; the DPKO also received feedback for the revision of its professional standards for protection work. The joint workshop planned by the two organizations was postponed to 2017.

During briefings and consultations, the DPKO, the General Assembly's special committee on peacekeeping operations, the OLA and the ICRC discussed such matters as the legal and operational dimensions of humanitarian access, IHL in the context of peacekeeping and the ICRC's protection work around the world.

### **High-level interaction helps develop ties with emerging actors**

The ICRC's regular meetings with UN officials and representatives of Member States, including monthly meetings with the president of the Security Council, allowed for in-depth exchanges of views. At four high-level events on the sidelines of the General Assembly's regular session, the ICRC explained its perspective on the situations in Iraq, South Sudan, Syria, Yemen, and the Lake Chad region, and described its work in those places. UN Member States also consulted the ICRC on various matters to be discussed at the Security Council or the General Assembly. The ICRC president's meetings with regional leaders and representatives of emerging States contributed to the organization-wide effort to expand relationships with all humanitarian stakeholders.

Over 100 State representatives discussed respect for IHL and the outcomes of the 32nd International Conference during the annual seminar on IHL for diplomats organized by the New York University School of Law and the ICRC. A series of events on international law – hosted by the General Assembly's committee on legal issues – gave the ICRC an opportunity to reach out to State legal advisers and diplomats and discuss IHL compliance and the applicability of this body of law to counter-terrorism efforts, detention, and other contemporary humanitarian concerns.

### **ICRC helps set the international humanitarian agenda**

The ICRC participated in various multilateral mechanisms and events – hosted by UN agencies, NGOs, think-tanks and others – which enabled it to monitor policy developments and, when appropriate, to contribute its perspective on key issues. These occasions included agenda-setting events, such as the World Humanitarian Summit, the Humanitarian Affairs Segment of the UN Economic and Social Council, the UN Summit Addressing Large Movements of Refugees and Migrants, and Habitat III, during which developments in humanitarian needs and action were discussed. The ICRC used these opportunities to draw attention to the need for: a new global response paradigm to protracted conflicts, particularly those taking place in urban areas; multi-year funding commitments to ensure that humanitarian agencies are able to implement long-term responses; better protection and assistance mechanisms for displaced people, whether they cross State borders or not; and more space for principled and neutral humanitarian action.

Through such interaction, the ICRC helped strengthen the language and content of outcome documents: the New York Declaration for Refugees and Migrants reflected IHL-based points raised by the ICRC; the New Urban Agenda on housing and development, adopted by Habitat III, specifically recognized the impact of protracted conflict on urban services and populations and called for greater respect for IHL.

The ICRC was in regular contact with Movement partners and UN-affiliated humanitarian organizations to further understanding of each other's roles, and positions on pertinent issues, and of the ICRC's distinct mandate. Other organizations also drew on the ICRC for guidance on IHL-related matters. These discussions contributed to the ICRC's own analysis of operational and other issues, and helped strengthen its field activities.

### **Future decision-makers learn more about humanitarian principles and the Movement**

UN-accredited media drew on the ICRC's press releases and on presentations by its senior staff on key issues to cover its activities. At ICRC events, future lawyers, decision-makers and leaders advanced their understanding of IHL. The delegation continued to streamline its communication activities, stepping up its presence on social media and intensifying its engagement with the public.