

# LEBANON



## EXPENDITURE (IN KCHF)

Protection	1,881
Assistance	3,503
Prevention	983
Cooperation with National Societies	743
General	-

► **7,109**

of which: Overheads 434

## IMPLEMENTATION RATE

Expenditure/yearly budget	79%
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## PERSONNEL

Expatriates	15
National staff (daily workers not included)	41

## KEY POINTS

### In 2011, the ICRC:

- donated medical supplies and equipment to facilitate first-aid treatment for wounded Syrians, acting as a neutral intermediary to enable their medical transfer by the Lebanese Red Cross
- worked to improve the treatment and living conditions of detainees by encouraging better respect for judicial guarantees and enhanced access to an acceptable standard of health, water and sanitation facilities
- made substantial headway in an assessment of the needs of families of missing persons and of existing programmes and services with the aim of identifying shortfalls and making recommendations to the authorities
- improved access to safe water for 164,000 people living in urban and rural areas
- further strengthened first-aid and health-care capacities for Palestinian refugees, notably by ongoing technical support to 5 hospitals of the Palestine Red Crescent Society and the construction of a new health clinic

The ICRC has been present in Lebanon since the 1967 Arab-Israeli war. It gives priority to providing protection and assistance to civilians affected by armed conflict, in close cooperation with the Lebanese Red Cross Society. It promotes compliance with IHL among the government and armed groups present in the country. The ICRC visits detainees held by the Lebanese authorities to monitor their living conditions and treatment. Restoring and maintaining links between separated family members is also a key activity.

## CONTEXT

Lebanon was plunged into political crisis in January when the national unity government collapsed over differences regarding the UN Special Tribunal for Lebanon investigating the 2005 assassination of former prime minister Rafik Hariri. The new opposition-backed prime minister, Najib Mikati, needed five months to form a cabinet, which was dominated by ministers from pro-Syrian parties. Although four Hezbollah suspects in the Hariri case were later indicted, no arrests followed and feared violence did not materialize.

Lebanon itself avoided the large-scale popular unrest sweeping the region, but violence in the Syrian Arab Republic had significant repercussions on the country, notably through an influx of refugees into northern Lebanon and the Bekaa Valley. The situation increased friction between pro- and anti-Syrian blocs within Lebanon, while tension was also heightened by alleged breaches of Lebanese sovereignty by Syrian troops and a number of fatal incidents involving Lebanese civilians. Furthermore, there were demonstrations by Palestinians on the border with Israel that reportedly resulted in fatalities and sporadic clashes between various Palestinian factions in refugee camps.

Serious riots broke out in Lebanese prisons reflecting discontent among detainees with some aspects of prison life and the judicial system.

Thousands of unresolved cases of people unaccounted for in relation to past conflicts in Lebanon continued to be a source of deep anguish for the families concerned.

## ICRC ACTION AND RESULTS

The ICRC closely monitored the situation of Syrian refugees arriving in northern Lebanon, reminding the authorities of their obligations under relevant laws and standards, particularly the principle of *non-refoulement*. Conducting joint missions with the National Society, it found immediate assistance needs adequately met by the Lebanese authorities and other actors. However, emergency treatment of the wounded and their medical evacuation to health facilities in northern Lebanon fell increasingly on the National Society, supported by the ICRC in its role as neutral intermediary. The ICRC also donated emergency medical supplies and equipment to the National Society and other actors and made follow-up visits to Syrians to monitor their care.

Detainees across Lebanon continued to receive visits conducted according to standard ICRC procedures, with delegates' findings and recommendations shared confidentially with the authorities.

Main figures and indicators	PROTECTION	Total		
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>				
<b>Red Cross messages (RCMs)</b>				
RCMs collected		38	UAMs/SCs*	
RCMs distributed		22		
<b>Tracing requests, including cases of missing persons</b>				
People for whom a tracing request was newly registered		36	Women	Minors
People located (tracing cases closed positively)		24	1	2
	<i>including people for whom tracing requests were registered by another delegation</i>	2		
Tracing cases still being handled at 31 December 2011 (people)		13	1	
<b>Documents</b>				
Official documents relayed between family members across borders/front lines		6		
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>				
<b>ICRC visits</b>				
Detainees visited		6,577	Women	Minors
Detainees visited and monitored individually		426	21	6
Detainees newly registered		233	15	5
Number of visits carried out		144		
Number of places of detention visited		24		
<b>Restoring family links</b>				
RCMs collected		40		
RCMs distributed		45		
Phone calls made to families to inform them of the whereabouts of a detained relative		439		
Detainees visited by their relatives with ICRC/National Society support		2		
People to whom a detention attestation was issued		58		

\* Unaccompanied minors/separated children

Main figures and indicators	ASSISTANCE	Total	Women	Children
<b>CIVILIANS (residents, IDPs, returnees, etc.)</b>				
<b>Economic security, water and habitat</b>				
Water and habitat activities	Beneficiaries	164,000	20%	60%
<b>Health</b>				
Health centres supported	Structures	4		
Average catchment population		8,025		
<b>PEOPLE DEPRIVED OF THEIR FREEDOM (All categories/all statuses)</b>				
Economic security, water and habitat				
Water and habitat activities	Beneficiaries	4,000		
<b>WOUNDED AND SICK</b>				
<b>Hospitals</b>				
Hospitals supported	Structures	13		
<b>First aid</b>				
First-aid posts supported	Structures	4		
<b>Water and habitat</b>				
Water and habitat activities	Number of beds	370		

Ongoing discussions carried out in the framework of the 2007 agreement between the Lebanese authorities and the ICRC, notably regarding timely access to security detainees and their conditions of detention, were supported by written reports. At the same time, the ICRC completed a project to increase the water supply at Roumieh central prison, by far the country's largest. In the aftermath of rioting at Roumieh, the ICRC donated materials to treat the injured, while in the absence of progress on devising a nationwide model for prison health-care services, it intensified its structural support to the prison dispensary. It also organized a round-table for those involved in providing health care to detainees, which recommended improvements to the referral system.

Following the completion in 2010 of a three-year programme to upgrade medical equipment and improve health staff training, the ICRC gave regular on-site maintenance support to five Palestinian hospitals providing care for refugees. Community volunteers and weapon bearers in refugee camps received further first-aid training, while the construction of a community health clinic in Nahr El Bared refugee camp was completed and handed over to the Palestine Red Crescent Society. The ICRC also provided ongoing

financial, technical and material assistance to the emergency medical services (EMS) of the Lebanese Red Cross.

The ICRC concluded its five-year involvement in projects to enhance the water supply of communities in urban and rural areas, upgrading infrastructure benefiting some 164,000 people in 2011. All projects included a training element for the local water authorities to ensure long-term sustainability.

Families, detainees and migrants in Lebanon used the ICRC family-links service to exchange news with relatives detained/interned abroad or living in countries disrupted by conflict or natural disaster. A needs assessment of the families of the missing and a mapping of existing services and programmes was well advanced by year-end and aimed to serve as a basis for recommendations to the authorities in 2012. Meanwhile, family associations involved in clarifying the fate of persons missing in relation to the 1975–90 conflict assumed responsibility for coordinating the entry of information into a single database after training provided by the ICRC. Following similar support, the Lebanese Armed Forces (LAF) and the Internal Security Forces (ISF) were also using the same system.

The national IHL committee, created in 2010, was put on a solid footing with the finalization of its internal statutes and procedures, while its members attended regional training courses and seminars to strengthen their understanding of relevant issues. LAF and ISF personnel, including senior officers, attended regular briefings to familiarize themselves with IHL and the ICRC's activities.

Humanitarian actors, including Movement partners, met regularly to coordinate their activities.

## CIVILIANS

Thousands of Syrians crossing the border to escape violence received visits by the ICRC and the Lebanese Red Cross to assess their humanitarian situation. With most needs met by the Lebanese authorities and other actors, the ICRC and the National Society focused on the treatment of dozens of injured and their medical evacuation to health facilities in northern Lebanon (see *Wounded and sick*). The ICRC reminded the authorities of their obligations under relevant laws and standards, in particular the principle of *non-refoulement*. Some people approached ICRC delegates for help in locating relatives believed arrested in the Syrian Arab Republic. These requests were passed on to the ICRC delegation in Damascus, which pursued efforts to ascertain individuals' whereabouts.

Other people reported incidents during protests in which several people were allegedly killed by the Israel Defense Forces. Delegates documented these allegations as the basis for discussions with the relevant authorities (see *Israel and the Occupied Territories*). In relation to one episode, the LAF and the UN Interim Force in Lebanon (UNIFIL) also engaged in discussions with the ICRC on measures to improve border security.

### Civilians gain better access to water supplies

In rural areas of the Bekaa Valley and in areas of north and south Lebanon, a total of 164,000 people (59,000 and 105,000 respectively) enjoyed enhanced water supplies after the completion of several projects to repair deep-well pumps, rehabilitate pumping stations and enhance/extend distribution and supply networks. All projects included training of local staff to ensure their ability to manage the installed systems, including the geographic information system (GIS) data bank centralizing information on the state of existing water infrastructure in northern Lebanon established with ICRC support in 2010. Improvements in the general situation and strengthened capacities among local water authorities to address remaining problems resulted in the ICRC winding down its five-year involvement in this domain by year-end.

### Relatives stay in touch

Families in Lebanon, including migrants from countries experiencing armed conflict or natural disaster, exchanged news and official documents with relatives detained/interned or living abroad, mainly in Iraq and Israel, through ICRC family-links services. Four Lebanese civilians, and the remains of another five deceased, were repatriated from Israel under ICRC auspices (see *Israel and the Occupied Territories*). People wishing to officially register in Lebanon the births or deaths of Lebanese civilians in Israel were able to do so after the ICRC translated the relevant Hebrew-language documents issued in Israel into Arabic and issued notifications of such births/deaths on this basis.

### Families of the missing participate in assessment

To help thousands of families still awaiting news of relatives missing in relation to the 1975–90 armed conflict, as well as in

relation to subsequent armed conflicts and other situations of violence, family members participated in face-to-face interviews with delegates as part of an ICRC assessment to determine their needs. By mapping existing programmes and services in parallel, the ICRC aimed to identify gaps and recommend improvements to the authorities in 2012. Dialogue with all political authorities, including the prime minister and other stakeholders, built comprehensive support for the assessment, as well as for future plans to offer support in the collection and storage of DNA samples belonging to family members and to the establishment of a mechanism to facilitate the identification of human remains. Although no forensic training took place during the year, two forensic doctors conducted an assessment of the scientific laboratory of the ISF Judicial Police in December with a view to strengthening its capacities to process DNA samples from the families of missing persons.

Family associations and NGOs received further training in managing data related to missing persons. In an important step forward, all family associations concerned appointed an ICRC-trained focal point to ensure the consolidated entry of information from various sources into a single database containing around 5,000 cases. Furthermore, under the terms of a new agreement, and having undergone similar training in recent years, the LAF and the ISF began using the same software.

Efforts to identify remains from the 2007 armed confrontation in the Nahr El Bared Palestinian refugee camp were ongoing, with eight cases pending receipt of DNA samples from Syrian and Tunisian families.

## PEOPLE DEPRIVED OF THEIR FREEDOM

Over 6,500 detainees in prisons and interrogation centres received ICRC visits to assess their treatment and living conditions, with a particular focus on security detainees. The authorities were urged to ensure delegates' timely and unrestricted access to all security detainees in accordance with the agreement concluded with the Lebanese government in 2007. People visited and registered included Syrians arrested by Lebanese security forces. As for other foreign detainees, the authorities were reminded of the principle of *non-refoulement* in relation to these individuals. Following visits, delegates discussed the findings and recommendations confidentially with the authorities, including in two reports concerning security detainees and another on respect for the judicial guarantees of detainees sentenced to death.

Serious rioting at Roumieh central prison, the country's largest, underlined the importance of the ICRC's work in trying to enhance conditions of detention, including access to improved health care. In the immediate aftermath of the violence, injured inmates were treated with ICRC-donated medical materials. With the Prison Health Commission tasked with designing a nationwide model for prison health care falling victim to the political paralysis, and as the transfer of responsibility for prisons from the Ministry of the Interior to the Ministry of Justice had not taken place, the ICRC began to offer more consistent structural support to Roumieh's medical centre. Inmates accessed better care thanks to the provision of materials and equipment to the centre and following training of prison staff and external health providers. Furthermore, the head of the medical centre learnt from the experiences of counterparts, while sharing his own, during a presentation at an ICRC-organized seminar on health in detention in Geneva, Switzerland. In addition, health providers

both within and outside the prison system attended an ICRC-organized round-table to discuss some of the most protracted challenges, prompting concrete recommendations on improving coordination in relation to detainee referrals. The prison administration was again reminded of the benefits of screening all newly arrived detainees for the successful management of individual and environmental health in prisons. As a preventive measure, particularly vulnerable detainees received hygiene items. Planned fumigation campaigns were not required as hygiene conditions were deemed adequate.

Inmates at Roumieh (some 4,000) saw their supply of water increase (by almost 50%) following the drilling of an additional borehole and its connection to the centralized water network installed in 2010. This superseded the need for a planned water treatment unit.

Detainees exchanged news with their families through RCMs, while two foreign detainees received ICRC-facilitated visits from their families in Jordan and the Syrian Arab Republic. Some 101 foreign detainees used ICRC services – RCMs or phone calls made by delegates – to inform their families abroad of their whereabouts, while another 211 informed their embassies of their detention. Released detainees or their families were issued with ICRC detention certificates.

## WOUNDED AND SICK

### Wounded Syrians receive emergency treatment

Dozens of wounded Syrians crossing the border relied mainly on Lebanese Red Cross ambulances for medical evacuation to hospitals and other public health-care facilities. Acting as a neutral intermediary, the ICRC facilitated the National Society's work by engaging in dialogue with border communities, the Lebanese authorities and other actors present, such as UNHCR and local NGOs, to ensure the timely and safe evacuation of the wounded. Medical supplies, dressing materials and other equipment donated to first-aid posts increased the likelihood of the seriously injured receiving emergency treatment to stabilize their condition before being moved. Furthermore, patients were followed up by ICRC delegates to monitor their surgical and post-operative care.

### Palestinian refugees get better access to medical care

Palestinian refugees continued to rely on services provided by volunteers in the camps and by Palestine Red Crescent hospitals. To improve services in the Beddawi, Bourj El Barajneh and Ein El Helweh camps, 165 community volunteers and weapon bearers received basic first-aid training to improve emergency response services and were briefed on the importance of respecting medical personnel and ensuring access to health care for the wounded and sick. A further 124 received training to refresh their knowledge, while others participated in a mass-casualty simulation exercise in Ein El Helweh.

Building on the completion in 2010 of a comprehensive programme to upgrade staff skills and essential medical equipment in five Palestine Red Crescent hospitals, Palestinian refugees further benefited from measures taken to reinforce the Palestine Red Crescent's maintenance capacities. An ICRC biomedical engineer carried out frequent visits to the hospitals to support the creation of a medical equipment management database to improve patient safety and medical efficiency. In parallel, the ICRC supervised a thorough assessment of each hospital's power supply system. The operating theatre in Haifa Hospital

in Bourj El Barajneh camp underwent renovation to improve conditions for patients and staff. Unfortunately, however, the training of doctors and other staff at the Palestine Red Crescent hospitals and at the Human Call Hospital in Ein El Helweh refugee camp – to improve their trauma management and their contingency planning skills – was cancelled owing to organizational difficulties.

Refugees in the Nahr El Bared camp obtained better access to health services following the construction of a community health clinic to replace one destroyed in the 2007 armed conflict. The clinic was handed over to the Palestine Red Crescent in December.

### Emergency preparedness reinforced

Other health facilities regularly responding to emergencies received materials and medical supplies. More than 50 staff of the five main ambulance operators benefited from an ICRC-organized first-aid workshop.

The Lebanese Red Cross EMS drew on significant ICRC financial, technical and material support to review its five-year strategy, maintain and upgrade stations and ambulances, and purchase medical consumables and equipment. Staff skills were reinforced; for example, over 100 new first-aid instructors were trained.

## AUTHORITIES

Meetings with the authorities and networking with the main political, religious and secular groups and Palestinian factions aimed to build support for and understanding of IHL. The authorities concerned engaged in dialogue with the ICRC regarding incidents on Lebanon's borders and were reminded of their obligations under IHL and relevant law and standards (see *Civilians and People deprived of their freedom*).

Although the fall of the government hindered all work to integrate IHL into national legislation, members of the national IHL committee, established in 2010, made steady progress in consolidating the new body. Through bilateral meetings with ICRC experts and by participating in two round-tables, members strengthened their understanding of their role and, by year-end, had finalized the committee's statutes and procedures. Officials from the committee and from various government ministries joined around 40 counterparts from 19 countries to learn more about IHL at the Arab Regional Training Course, co-organized by the Arab League's Beirut-based Centre for Legal and Judicial Studies and the ICRC.

The diplomatic community, UN agencies and other international bodies were regularly briefed on ICRC activities in Lebanon and the region.

## ARMED FORCES AND OTHER BEARERS OF WEAPONS

Although it had completed the integration of IHL into its training curricula and was generally autonomous in terms of IHL teaching, the LAF, along with its national office tasked with IHL integration, continued to draw on ICRC support to ensure widespread knowledge of that law among troops. For example, high-ranking officers, including the deputy chief of staff, participated in a round-table discussion on IHL and the ICRC's activities in the region and in the Arab Regional Training Course (see above). Meanwhile, more than 100 officers followed advanced training at the LAF's Command and Staff College and around 2,700 troops attended IHL briefings. The LAF library received IHL reference materials.

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The ISF also maintained regular contact with the ICRC. The head of the Human Rights Division attended the Arab Regional Training Course (see above), while 1,100 ISF personnel, along with 110 military police officers and 30 officers responsible for security detainees, strengthened their understanding of standards applicable to their work at ICRC events.

Members of various Palestinian factions attended presentations on IHL, the protection due to medical services, and the ICRC, while some also followed first-aid training (see *Wounded and sick*). A Fatah library in south Lebanon received relevant IHL documentation.

Prior to their deployment, a total of 375 officers from UNIFIL were briefed on the ICRC's mandate and activities.

### **CIVIL SOCIETY**

National media covered issues of humanitarian concern, including the respect due to medical personnel and infrastructure, based partly on ICRC/National Society-issued press releases, newsletters and brochures.

Dialogue continued on incorporating IHL into university law faculties. Seventeen lecturers from 14 countries, including Lebanon, learnt more about IHL teaching methods at a regional event co-organized with the Arab League. Students at the American University and St Joseph University in Beirut attended presentations on IHL, while the delegation hosted one of the winners of the ICRC's Young Reporter Competition, who covered issues related to Palestinian youth. Local NGOs drew on ICRC expertise at their own events, and an influential think-tank received an IHL reference library.

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

The Lebanese Red Cross and the ICRC continued to work together to reinforce capacities, reviewing their joint emergency preparedness and response plan and finalizing standard operating procedures in the framework of the National Society's five-year strategy. The plan was tested during the influx of Syrian refugees. The Lebanese Red Cross continued to receive ICRC support for its EMS, including for a nationwide volunteer training programme designed in cooperation with Geneva University Hospital. In terms of logistics, the National Society used ICRC advice to streamline the procurement of EMS equipment and consumables.

The Lebanese Red Cross undertook a partial reform of its statutes, paving the way for a more comprehensive review in 2012, while terms of reference for a review of fundraising were also approved.

Young volunteers of the Lebanese Red Cross trained as IHL instructors and received advice and support on how to spread knowledge of IHL, including the respect due to medical personnel and infrastructure, among the general public.

Meanwhile, the Palestine Red Crescent also drew on ICRC support (see *Wounded and sick*), including for staff training, but efforts to draft a communication strategy aimed at reinforcing the Palestine Red Crescent's visibility made little headway.

Movement partners met regularly to coordinate activities.